



MONITORING THE HUMAN RIGHTS OF PEOPLE WITH DISABILITIES

COUNTRY REPORT: BOLIVIA



**Santa Cruz – Bolivia
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York University
4700 Keele Street, 5021 TEL Building
Toronto, ON M3J 1P3
Canada
Telephone: +1 416 736 2100 x.20718
Email: drpi@yorku.ca
Website: <http://www.yorku.ca/drpi>

Written by:

Confederación Boliviana de la Persona con Discapacidad (C.O.B.O.P.D.I.)

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Introduction

This project, “Monitoring the Human Rights of People with Disabilities in Bolivia” has taken place in the context of the Disability Rights Promotion International (D.R.P.I.) project. D.R.P.I. aims to build capacity and develop a sustainable global system for monitoring disability rights. Monitoring takes place in three focus areas: individual experiences (collecting information about the actual situation of people with disabilities on the ground), systemic protections (evaluating the effectiveness of systemic protections for disability rights e.g. laws, policies and programs) and societal attitudes (examining the coverage and nature of media depictions of people with disabilities). The Bolivia project has focussed on monitoring in the first two focus areas – individual experiences and systemic measures. The monitoring and training tools and methods used in this project have also been applied in D.R.P.I.-sponsored projects in several other countries, including Australia, Cameroon, Canada, India, Kenya, and Sweden. The D.R.P.I. project is a direct outcome of the recommendations formulated at an international conference on Human Rights and Disability that was held in Almåsa, Sweden, in 2000, with the participation of representatives from all the main international disability organizations, as well as human rights experts and United Nations representatives. More information about the activities of D.R.P.I. can be found on the project website at www.yorku.ca/drpi.

In Bolivia, the project was led by the Confederación Boliviana de la Persona con Discapacidad (C.O.B.O.P.D.I.), with the support of the Santa Cruz Federation of Persons with Disabilities (F.E.C.R.U.P.D.I.) and the Departmental Federation of Persons with Disabilities (La Paz) (F.E.D.E.P.D.I.).

We hope that in this report on the human rights situation of people with disabilities in Bolivia will provide all of the organizations for people with disabilities in Bolivia (C.O.B.O.P.D.I., C.O.N.A.L.P.E.D.I., C.O.D.E.P.E.D.I., etc.) with the technical and scientific information that they need to support their advocacy work. It is also anticipated that this document will inform national authorities about the development of methodologies and tools for the promotion and protection of human rights and human dignity, and generate a debate and invite reflection upon these issues.

We also hope that this report can form a foundation for strengthening the engagement of the disability rights movement, allies and like-minded development partners. The information and ideas presented in this document will form part of a growing collection of information resources.

The first part of this report contains general notes on the social, economic and political situation of Bolivia, as well as information on the movement of the people with disabilities in the country, an analysis of the legislation and existing norms applying to the people with disabilities.

The second part contains statistical data and analysis of the individual experiences obtained from the interviews with people with disabilities in La Paz and Santa Cruz

PART ONE

Chapter 1. Background

1.1 Social, Economic and Political Situation in Bolivia

Bolivia (Quechua: Bulibiya Suyu, Aymara: Bulibiya, Buliwyá, official name: Republic of Bolivia) is an independent and sovereign country located in the central western part of South America.

The official capital and site of the judicial branch is Sucre (according to the Political Constitution of the State in place as of January, 2009), and the site of government (executive and legislative branches) is La Paz.

It borders with Brazil to the north and to the east, with Paraguay and Argentina to the south, and with Chile and Peru to the west. Along with Paraguay, it is one of the two land-locked countries in South America. It is the eighth largest country on the American continent and the twenty-seventh world-wide.

Bolivia is a multicultural country with extensive natural and archaeological wealth. Among others, the Tiahuanacu culture stands out, which developed in what today is known as the western region of the country, and whose advanced knowledge in a variety of subjects was later inherited by the Incan Empire. Less well known are the archaeological remains in the tropical eastern region of Bolivia, in the Moxos and Baures plains in the department of Beni. Here the *Hydraulic Culture of the Lomas*—the largest in the Americas—was developed.

Population

According to the National Institute of Statistics in Bolivia, the population in the last census in 2001 was 8,274,325, of which 4,123,850 were men, and 4,150,475 were women, yet by 2007 the population had grown to approximately 9,827,522 inhabitants.

In the last 50 years, the Bolivian population has tripled, with an annual growth rate of 2.25%. The growth rate for the first intercensal period was 2.05% from 1976-1992, while the annual growth rate at the last census in 2001 was 2.74%.

Most of the population (70%) is concentrated in the departments of La Paz, Santa Cruz, and Cochabamba. In the altiplano region, most of the population is concentrated in the departments of La Paz and Potosí. In the valleys, the departments of Cochabamba and Chuquisaca have the largest population, and in the lowlands the departments of Santa Cruz and Beni are the most populated. The national population density is 8.49.

Bolivia has a young population. According to the 2001 census: 54% of inhabitants are between 15 and 59 years of age, 39% are less than 15 years of age, and the rest are under 5 years of age. Almost 60% of the population is under 25 years of age, adolescents (10-20 years of age)

represent 23% of the population, and women of reproductive age (15-49 years of age) represent almost half of all women in the country.

The exact number of people with disabilities in Bolivia is unknown. However, studies by the United Nations offer the conservative estimate that at least 10% of the population of all countries have a disability. This means that at least 827,432 inhabitants of Bolivia have a disability.

Life expectancy is between 62 and 67 years of age for men and women, respectively.

Language

The official languages are stated in the new Political Constitution of the State: Article 5.

I. The official languages of Bolivia are Spanish and all the languages of the originary indigenous peasant nations and peoples, which are Aymara, Araona, Baure, Bésiro, Canichana, Cavineño, Cayubaba, Chácobo, Chimán, Ese ejja, Guaraní, Guarasu'we, Guarayu, Itonama, Leco, Machajuyai-kallawayá, Machineri, Maropa, Mojeño-trinitario, Mojeño-ignaciano, Moré, Mosen, Movima, Pacawara, Puquina, Quechua, Sirionó, Tacana, Tapiete, Toromona, Uru-chipaya, Weemhayek, Yaminawa, Yuki, Yuracaré and Zamuco.

II. The plurinational government and the departmental governments must use at least two official languages. One of them must be Spanish, and the other will be chosen taking into account the use, convenience, circumstances, needs, and preferences of the population as a whole or of the territory in question. The other autonomous governments must use their own languages in their territory, and one of them must be Spanish.

Economy

The Bolivian economy is based mainly on the mining, petroleum, natural gas, agriculture, cement and textile industries.

Most of the mineral resources are concentrated in the western departments such as Potosí, La Paz and Oruro, where there is tin (4th largest producer in the world), silver (11th largest), copper, tungsten, antimony, zinc, etc.

The most important deposits of iron (Mutún17) and gold (San Simón Hill) are found in the eastern tropical areas, mainly in the departments of Santa Cruz and Beni. There are also important precious stones, such as Bolivianita, Ayoreita, Anahita, Amethyst and Millennium, which come from the tropical lowlands.

Hydrocarbon production is concentrated in the Andean foothills mainly in the departments of Cochabamba, Santa Cruz, Chuquisaca and Tarija.

Petroleum production (about 11.25 million barrels in the first nine months of 2006) supplies the national market, while natural gas is exported to Brazil and Argentina, given the small and inefficient system of residential and industrial distribution of gas in Bolivia. In the first nine months of 2006, 357.9 million cubic feet of natural gas per day were produced.

Agricultural and cattle production has become more important over the last several decades, mainly in the eastern tropical regions.

Andean agriculture is fundamentally based on domestic consumption. The Andean regions mainly produce corn, wheat, potatoes and other root crops, barley, quinoa, vegetables, etc. Cattle breeding is limited; the breeding of native livestock is more important, consisting of camelids such as alpaca. The wool from the alpaca, which is both very fine and very resistant, is used in textile production.

Agricultural growth is taking place in the eastern tropical regions in Bolivia. Currently, the agricultural industry is of great importance in the national economy. The following crops are grown for domestic consumption as well as for export: rice, soybean (the 8th largest producer in the world, with 1.7 million tons), sorghum, sugar cane, sunflower, tobacco, corn, yucca, cacao, coffee, coca leaves, etc.

Chapter 2. Legislation for the Protection, Promotion, and Enforcement of Disability Rights in Bolivia

Summary of Policies and Laws in Bolivia

Official discrimination against people with disabilities is still a reality, in the workplace, in schools, in access to the healthcare system and in access to government services. Societal discrimination against people with disabilities has confined many of them to their homes from an early age, thereby limiting their integration into society.

The People with Disabilities Act (Law 1678) allows tax-free imports for orthopaedic devices, stipulates a 50% discount on public transport and promotes the teaching of sign language and Braille.

This study has also found that the law itself is discriminatory against people with disabilities in certain cases. Disability has not become a subject of public interest, nor has the government prioritized its inclusion in the governmental agenda or in that of civil society. Policy-makers, authorities, government officials, and social actors in general are unaware of improvements in relevant laws and regulations; in other words, the regulations are not enforced at all. Generally, it has been treated as a private issue, confined to inner family spaces. It has not moved beyond a philanthropic approach that has been in effect for decades, based on notions of compassion and welfare. Actions in favour of people with disabilities have been considered part of the work of public charity, Christian solidarity and voluntary efforts, resources which are insufficient and do not provide solutions that address the magnitude of the problem, limiting it instead to the private and clandestine margins of society.

In addition to the National Council for People with Disabilities (C.O.N.A.L.P.E.D.I.)—whose mission is to promote and foster joint operations with different sectors of society for the adherence to and enforcement of Supreme Decree Number 24807, based on respect for differences, tolerance and non-discrimination—there are other organizations with a disability rights mandate established by the Bolivian government, such as the Departmental Committee for People with Disabilities, the Christian Fraternity for the Sick and Disabled, the Federation of Integrated Wheelchair Sports, The Bolivian Federation for the Deaf, The Bolivian Association of Parents of Children and Adolescents with Mental Handicaps, and the Bolivian Federation for the Blind and Deaf. All of these organizations are part of the Bolivian Confederation of Persons with Disabilities.

The results of this study indicate that the Committee has included disability as one of the human rights concerns covered by its mandate; however, some organizations are inactive in most of the country. Most public buildings and private companies are not wheelchair accessible, and, as the Permanent Assembly acknowledges, “in general, special services and infrastructure to facilitate the circulation of people with disabilities do not exist. The lack of resources makes their full implementation impossible.”

The study also showed that in Bolivia, people with disabilities live in constant exclusion and inequality, as victims of discrimination in different processes of socio-economic development in the country, violating their fundamental human rights on a daily basis in their social settings, in

their families and in society as a whole. This situation is further aggravated by the poverty in which the majority of people with disabilities live.

The extensive national and international legislation that protects this important group has, for many years, both on paper and in practice, been completely insufficient.

2.1 National Legal Framework of Disability Rights

2.1.1 Legislative Framework

Legislation includes the regulations established in Law 1678, the international conventions and agreements ratified by the Bolivian government, and regulations that organize the structure and the functioning of the country. Especially relevant as an ethical, philosophical and guiding framework for the Plan, are the 1993 United Nations Standard Rules, the Salamanca Declaration issued at the Global Conference on Special Needs: Access and Quality, the United Nations Convention and the Spanish-American declaration of the Year of the Disabled.

The socio-economic situation, system of government and Bolivian society in general demand an active role of the state with respect to disability, as well as the active participation of civil society, representative disability organizations, N.G.O.s, social organizations, volunteer groups, the private sector and social and political actors more broadly.

Regionally, there is a struggle, including social protests and demonstrations, to develop policies and strategies so that both state actors and social actors in general can responsibly contribute to the development of a more inclusive, fair and humane society: a society that respects and protects the rights of people with disabilities, their ethnicity and their gender, thus broadening the opportunities available to people with disabilities in a context of fairness in all aspects of economic, cultural, social and political life, allowing them to develop their abilities, enjoy greater social protection, and broaden and strengthen their social participation and inclusion.

There is no constitutional definition of disability in Bolivian law; however, there is a legal definition in the framework of the People with Disabilities Act (Law 1678), which defines disability as the following: *Any restriction or lack, resulting from an impairment, of ability to perform an activity in the manner or within the range considered normal for a human being.*

The definition of Law 1678 is sufficiently broad to include those people who would not traditionally be considered to have a disability, including those with intellectual and mental disabilities.

The Bolivian constitution includes statutes that guarantee human rights and freedoms for its citizens, rights which apply to all citizens. People with disabilities are expected to enjoy these rights equally with the rest of society.

Article 71 of the constitution prohibits discrimination on grounds of disability, yet the majority of people with disabilities in Bolivia experience inequality, exclusion and poverty. They are victims of discrimination in different spheres of social life, they do not have equal access to

opportunities, and they are subject to a permanent violation of their rights by cultural constructs based on internalization, depersonalization and the denial of others and of their dignity.

Cultural constructs are the main factor affecting disability rights. The lack of information and knowledge leads to stereotypes, prejudices, beliefs based on a social system that values “perfection”, and “beauty”, under highly exclusive conventional parameters.

Cultural constructs have created segregated spaces for the development of people with disabilities, and they have determined *a priori* a limited range of opportunities for people with disabilities that, using parameters not intended for people with disabilities, supposedly cover their basic needs. Opportunities for people without disabilities are prioritized, to the extent that it seems that they are the only people that have a place in society. People with disabilities are condemned to move through spaces that are on the margins of normalcy and daily life.

Law 1678 includes statutes that prohibit discrimination against people with disabilities in several sectors, including education, the workplace, health, and the provision of services, both in the public and private sectors. Article 7 is related to health matters, article 8 is about education, article 9 prohibits discrimination in the workplace, and article 10 prohibits discrimination in access to buildings and other installations. Articles 11, 12, and 13 address indirect discrimination in such spheres as television programs and telephone and postal services.

The current challenge is to implement the law in the interest of accelerating processes of equality and the equalization of opportunities for this important group.

2.1.2 Governmental Organizations Working with People with Disabilities

The National Council for People with Disabilities, called C.O.N.A.L.P.E.D.I., was formed by virtue of Chapter VI of Law 1678. Article 19 establishes the specific functions of the Council, which are to issue orders enforcing Law 1678 and to supervise their suitable application, in coordination with state, private and mixed organizations. It also seeks to improve the application of the Global Action for People with Disabilities, standard rules for the equalization of opportunities and other regulations designed to encourage the integration of people with disabilities into society. The Council also has the mandate to develop its operational regulations and the organization of the executive, for the express approval of the Ministry of Human Development by ministerial resolution.

In its mandate to guarantee that the rights and privileges of people with disabilities are upheld as established by law, the Council must coordinate with other institutions that directly bring together and work with people with disabilities.

In addition to the National Council for Persons with Disabilities, there are other bodies that have been established by the government through diverse laws.

The Departmental Committee for Persons with Disabilities has as its objective to promote and raise awareness about Law 1678 and other legislation related to the fundamental rights of people with disabilities, and to establish norms and procedures for the enforcement of this law.

This work is carried out in seminars, conferences, workshops, etc., which have not been sufficient to reach all the people that benefit from the law nor those upon whom it confers obligations with respect to the protection and support of people with disabilities.

2.1.3 Poverty and Disability

Employment

There is no labour law that takes into account the labour needs of people with disabilities, although the General Labour Law regulates labour laws for all Bolivian citizens to an extent. The law could be interpreted to contribute to the economic marginalization of people with disabilities, as it does not address the employment of people with disabilities, which is an issue that demands special attention. The law does not recognize that people with disabilities face discrimination when they look for work and that they have limited opportunities in comparison with people without disabilities. The law does not include any statutes that impose obligations on employers to employ people with disabilities, thus abandoning them to the liberalization of the job market, which is strongly biased against them.

Poverty is the most extreme form of social exclusion and is directly related to unemployment, labour instability, low labour costs, precarious and informal jobs and low wages. In the country there is limited capacity for job creation. Large enterprises generate 8.7% of employment, compared to the small and medium-sized companies which contribute 83%, the majority of which are in the informal sector, demonstrating the structural limitations for generating stable employment.

In addition to the limitations of the labour market, with an unemployment rate of 13.9% and with a forced trend towards self-employment and under-employment, employers and workers also have prejudices, stereotypes and discriminatory practices with respect to people with disabilities.

Working constitutes a right because it allows people to generate income in order to access goods and services for personal and family subsistence and it permits a life with dignity. It generates the conditions for normal social engagement, the development of human potential and personal autonomy and allows one to contribute to society. The cultural meanings of work and the material and personal outcomes of labour insertion are of even greater importance for people with disabilities, because it channels their creative contributions, of economic and social utility, and also allows their social inclusion.

Supreme Decree 27477 regulates and protects the incorporation, advancement and labour stability of people with disabilities, establishing their priority employment status and stating that of all their staff, public institutions must hire an average of 4% of workers with disabilities, and they must create the conditions for these workers to perform their tasks.

Some factors that limit labour insertion are:

- A limited formal labour market that is covered by labour legislation.

- The largest contribution to job creation comes from the family and micro-enterprise sector, generally in the informal sector.
- The lack of ongoing training and job-entrance programs, resulting in the insufficient development of labour skills for people with disabilities.
- The stereotypes and discriminatory attitudes held by employers and workers.
- Limited family support for people with disabilities to encourage their inclusion in the labour market.
- The perceptions of people with disabilities, their immediate families and their social environment.

Current economic conditions have caused an increasing deterioration in the labour market, including the widespread growth of precarious jobs, both in the formal and informal sectors, with labour conditions that do not meet the norms of industrial and occupational safety, for children, adolescents and adults. These working conditions thus put both health and job security at risk.

There are not many financial sanctions or possible criminal charges (Article 26) for instances in which these laws are not enforced. To date, there have not been any cases brought to court under this law.

Accessibility

“States must recognize the global importance of providing access as a component of achieving equal opportunities in all spheres of society. For people with disabilities of any type, countries must:

- a.) Establish plans of action to make the physical environment accessible.
- b.) Adopt measures to guarantee access to information and communication.” (Article 5. Standard Rules. U.N.)

The accessibility of public spaces is an essential characteristic of the built physical environment that makes transit through and social use of such spaces possible, allowing people with disabilities to participate in the social, cultural, educational, economic and political activities for which such public spaces were constructed.

Accessibility varies according to the type of disability, with different requirements for physical, auditory and visual accessibility. The state of technological development of the country is limited; the few initiatives in the field have tended to provide technical help for physical disabilities, including a wheelchair factory and a few small prosthetic companies.

Poverty invites the common alternative of donations, where the systems of distribution are not the most effective, and the lack of a donation policy and inter-institutional coordination lead to

these being managed within a welfare framework, with mechanisms that exclude people with real needs, creating negative effects and disincentives for national industry.

On the other hand, current societal dynamics demand transit as a service and a basic necessity, which is not designed to meet the basic needs of persons with disabilities. Vehicles, traffic regulations, urban design, and local culture make transit difficult for persons with disabilities, who have great difficulties getting to their places of work, education and health care, and in carrying out their basic social activities. Vehicles are ill-adapted and make the regular use of transportation difficult, in addition to the insensitivity of public transit drivers who refuse to transport persons with disabilities, putting them in difficult situations and exposing them to negative treatment. The challenges vary according to the type of disability, and it is worse for children and the elderly.

With the development of the information and knowledge society, barriers grow and there is a risk of even greater exclusion based on the dual condition of disability, which already puts one at a disadvantage, and the underdevelopment and poverty of the country, which makes accessing information and knowledge very difficult. Information and knowledge technologies are essential in the current context. They are an important means with which to reduce the gaps in communication, information and knowledge, and they can contribute to the elimination of social barriers. People with physical, hearing or intellectual disabilities have found that computers provide opportunities to learn, work, and be part of society. These information systems are not accessible for people living in poverty conditions, but mechanisms could be created to facilitate access for men and women with disabilities.

The National Policy Project on persons with disabilities indicates that *persons with disabilities establish a legislative framework with which access problems will be addressed*. Article 5 of the project states that it is equally important to recognize what constitutes access problems and to achieve equal opportunities in all spheres of society, including:

- Environment (for example, buildings and construction pose difficulties for physical access to public buildings).
- Communication (for example, electronic and print communications are generally inaccessible for people with visual, hearing or intellectual disabilities).
- Social (for example, cultural attitudes and practices rooted in the beliefs, taboos, rites of passage or religion create almost unsurpassable barriers for the participation of people with disabilities in social life and cultural activities).
- Economic (for example, barriers that prevent persons with disabilities from fully participating in employment, commerce and access to loans; many people with disabilities live in extreme poverty.)

The legislative framework of Law 1678 establishes a series of conditions related to access issues for persons with disabilities in Bolivia, including the following:

Chapter III of Law 1678—The Rights and Privileges of Persons with Disabilities—addresses issues of disability in a number of sections. However, the most efficient way to implement the

legislation is to address access issues, the statutes that are outlined along with the sections with notes on the statutes and the structures where they must be applied.

In relation to **employment**, Article 9(d) of Law 1678 grants, in coordination with departmental labour boards, priority attention to all labour problems of people with disabilities, with the responsibility to apply financial sanctions against those who discriminate against people with disabilities in matters of employment.

Article 13 establishes as a priority the elimination of physical barriers in new urban and architectural constructions and the modification of existing ones, partially or wholly replacing the elements necessary to create conditions of access for persons with disabilities.

With respect to **access and mobility**, Article 13 states that persons with disabilities have the right to a barrier-free environment such that they can access buildings, highways and other social services, and the support services and other equipment necessary to promote their mobility. Article 13 (a) the elimination of urban, physical barriers on streets and in public places, (b) the elimination of architectural barriers in both public and private buildings used by the public, (c) the priorities and time frame for adjustments required by this article with respect to urban barriers and buildings of public use will be determined in accordance with regulations outlined by the corresponding volunteer committee, within six months of enacting the law.

In addition, Article 14 (a) promotes the elimination of architectural barriers in public transport by land, air, and water of short, medium, and long distances, and the use of private means of transportation for people with disabilities. Article 14 (b) establishes that people with disabilities have the right to circulate freely and to have access to parking, and (c) encourages land, air, lake and river transport companies, whether they are public, private or mixed, to give discounts of 50% to people with severe disabilities who require an escort, when their trips are inter-departmental or inter-provincial.

With respect to **communication**, people with disabilities face communication barriers in terms of the amount of information they can access and their communication with other people without disabilities.

According to Article 5 of the standard rules of Law 1678, people with disabilities and when applicable, their families and advocates, must at all stages have access to complete information about their diagnosis, their rights, and available services and programs. This information must be presented in an accessible form for people with disabilities.

According to the International Convention on Human Rights, countries should develop strategies so that information and documentation services are accessible to different groups of people with disabilities. With the objective of providing access to information and written documentation for people with visual disabilities, Braille, taped recordings, material with large print and other appropriate technologies should be used. Similarly, appropriate technologies must be used to give access to oral information for people with hearing disabilities or with challenges in comprehension.

Economic

Incentives under Law 1678

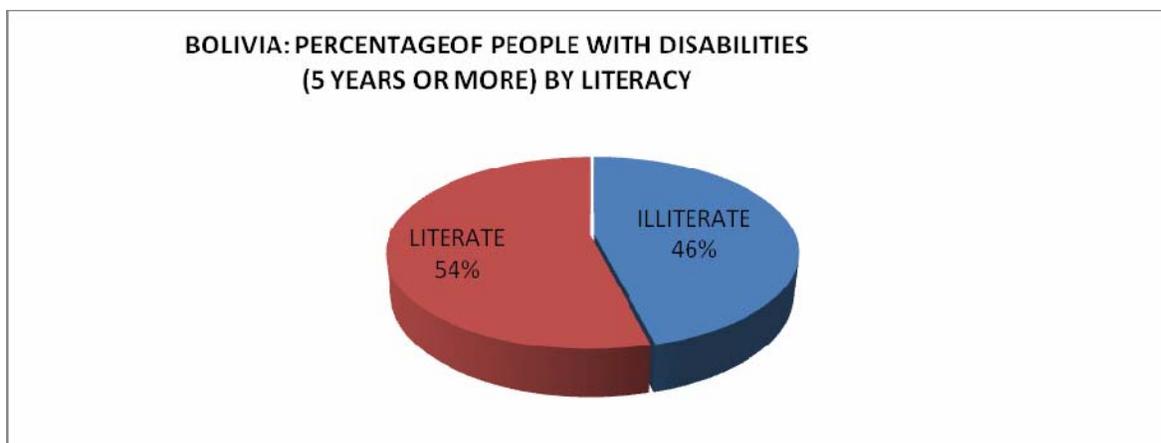
Article 4 (j). To establish the coordination of private enterprises, chamber of industry, chamber of commerce, exporters and small industry, in order to place people with disabilities in different workplaces, offering special incentives for hiring people with disabilities (diplomas, plaques, etc) granted once a year in a special ceremony. Similarly, the Article promotes the creation of micro-enterprises by people with disabilities, with the intention that they will employ other people with disabilities.

k) To promote and encourage the free importation of auxiliary equipment designed for people with disabilities and to negotiate their exemption from customs duties, according to Article 22, providing they are not for-profit organizations. Also, to evaluate applications for duty exemption.

(l) To coordinate with banking entities, second-tier banks and related entities to assist in granting loans to people with disabilities.

(p) To create a bank of orthotics and prosthetics, with equipment for different disabilities, offering the material at subsidized rates following an evaluation of economic conditions carried out by social workers. Also, to coordinate with national and international organizations, by means of conventions, to provide incentive for and coordinate research into the use of local natural resources for the manufacturing of equipment and support services for different disabilities, obtaining and disbursing funds for this purpose, and for the creation and strengthening of national manufacturers dedicated to making this type of equipment, supportive material, orthotics and prosthetics, preferentially hiring people with disabilities for this purpose.

Education



“States should recognize the principle of equal primary, secondary and tertiary educational opportunities for children, youth and adults with disabilities, in integrated settings. They should ensure that the education of persons with disabilities is an integral part of the educational system”. (Rule 6. Education: Standard Rules, United Nations, 1993).

“[R]egular schools with [an] inclusive orientation are the most effective means of combating discriminatory attitudes, creating welcoming communities, building an inclusive society and achieving education for all (U.N.E.S.C.O. Salamanca Declaration and Framework for Action, 1994.)

The Bolivian education system does not provide equal education based on the respect and appreciation of children, adolescents and adults that allows their development in daily life. In addition to being a discriminatory system in several areas such as gender, ethnicity, and class, there is discrimination based on disability. Schools continue to discriminate against people with disabilities with segregationist practices, resulting in systematic isolation, which is reproduced in all spheres of life, causing different degrees of social exclusion.

There are regular schools that admit students with disabilities; however, this access is not accompanied by suitable learning environments for special needs, both because teaching staff are not trained for this type of task, and because of the widespread existence of stereotypes and prejudices in the teaching community. In effect, the educational system denies the special education needs of people with disabilities in its conception, structure, organization and management, causing academic exclusion, which is exacerbated by gender and ethnicity.

There is no data about how many children with disabilities are excluded from the educational system in the country. At the international level, it is estimated that close to 78% of the school population is excluded, due to several factors related to the availability of educational programs and their accessibility, as well as to the socio-cultural conditions of the families and their social settings.

In this complex educational context, special education has been addressed by educational policy, but with marginal attention within the system. The inclusive approach to education has not been institutionalized; although the Educational Reform Act takes it into account, educational policies that would make it viable have not been implemented. Regular school does not include special education, nor inclusive education, and is not trained to meet students' needs based on a model of “child-centred education”, with educational spaces allowing children and youth with disabilities to develop alongside their peers, independently of their difficulties and differences, as the Conference recommended.

The first available services in Bolivia have been the public centres and institutes in each capital city, which have problems of coverage, quality, and educational achievement. Though they have addressed some issues, they do not address the different degrees of disability, and in practice, their approaches have consolidated institutionalization, with the search for “refuge”, creating a separation of education from reality and from daily family, neighbourhood and community life. Another feature is their shortcomings with respect to the quality of their services and their scarce resources, which limit the possibilities of education alongside peers and reproduce segregation in education.

Attention to disability in the educational system has been limited by the lack of specialized training. In the training of teachers and professionals, training in special education and disability

is only beginning to be addressed in different centres of higher education such as the Superior Normal Institutes, and it is completely absent at the university level.

Article 8 of Supreme Decree 24807 of Law 1678 proposes:

a) To establish strategies and norms to strengthen special education through formal and alternative education, fostering a culture of dignity and respect for the human, political and social rights of persons with disabilities.

b) To promote the integration of children, adolescents and adults with special education needs in different levels of formal education, with equal conditions and opportunities with others, according to the principles of democratization, normalization and integration, fostering complete human development, through respect for differences, individual diversity and principles of equity, creating educational pedagogies and actions for the research, design, curricular modifications and granting of suitable means and tools.

g) To promote the integral development of students with special education needs in the formal sphere of education according to the Educational Reform Act, including curricular adaptations. Similarly, to promote the design, development and renewal of teaching material for the development of educational processes.

Health

Health services are essential in caring for people with disabilities with respect to prevention, treatment, habilitation and rehabilitation. Disability has not been thoroughly addressed, and its care has been limited to clinical treatment, which is carried out with severe limitations due to technical and technological weaknesses and a lack of specialization.

The lack of programs for health promotion and prevention is common. Disability has generally been understood as a health problem, but not as a problem of social responsibility or a result of preventable causes, for which timely intervention could act to reduce impairments and disabilities. Currently, there are gaps in the information available to the population and to parents faced with situations of impairment; there is a lack of early diagnoses, there is a lack of integral newborn care; and there are prenatal risks and deficient public services that lead to disabilities.

Poverty is directly related to the living conditions and health of the population. The poor are most susceptible to severe malnutrition, severely malnourished children are at high risk for blindness because of vitamin A deficiencies, and at risk for complications of the motor, nervous and intellectual systems. According to the National Institute of Statistics, there are 18,995 blind people, 5,815 with multiple disabilities, and 1,200 people are deaf and blind—numbers that may be underestimated.

The W.H.O. calculates that 10% of the Bolivian population has some type of disability.

The decrease in public spending and the tax cut for hydrocarbons has limited access to health services and has notably diminished their quality. In general, the healthcare system does not have the resources needed for integral prevention, care and rehabilitation services for people with disabilities.

The decentralization of healthcare services and their municipal provision, in contexts of decreased public spending and institutional weakness, creates difficulties for the economic sustainability of secondary and tertiary care, which are most needed in caring for people with disabilities.

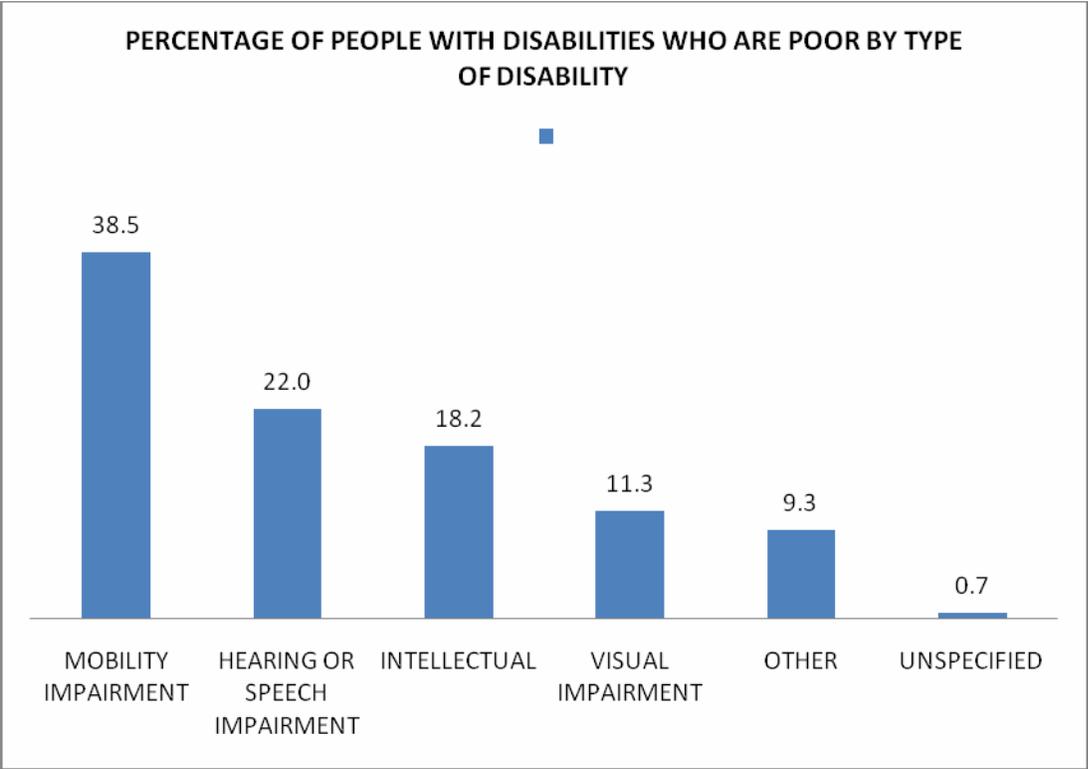
Health services have lost their universality and are difficult for the rural population to access, with long-standing asymmetries in services. There is a larger concentration in the urban core and almost no availability in rural areas, thus very few people use the urban services.

Some factors associated with inadequate services and their low quality include:

- There is not an integrated approach to the care of people with disabilities.
- Institutional availability continues to be insufficient and deficient.
- Human resources do not have up-to-date and specialized knowledge.
- Health workers have stereotypes and discriminatory attitudes.
- Infrastructure, equipment and supplies are insufficient and inaccessible.
- Medical and paramedic staff have limited training on the physical treatment of injured patients. Ignorance, along with cases of negligence, have been decisive factors in causing disabilities.

Furthermore, features of modern society have increased risks, such as environmental contamination and traffic accidents, which produce injuries of a different type, provoking disability. According to the W.H.O., in 2000, traffic accidents were the cause of 2.8% of deaths and disabilities in the world, and according to their projections for 2020, they may become the third largest cause of death and disability.

Other factors also stand out, such as domestic violence, social violence, and domestic accidents, which have all increased, though data is not available to measure the changes. It is important to point out that people with disabilities in Bolivia do not have complete health insurance that would cover all their rehabilitation needs. There is basic health insurance that covers all Bolivian citizens until they are 18 years of age, which only includes primary care, some laboratories, and nothing else.



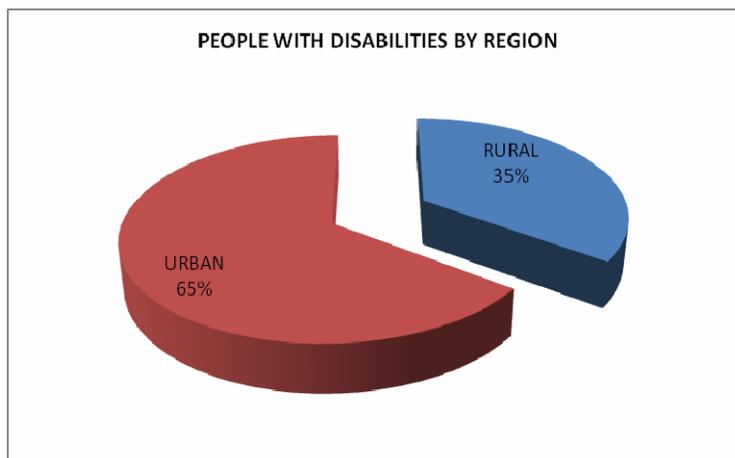
VIVIR CRECIENDO, an alternative in Cochabamba

Vivir Creciendo (Live and Grow) is a program of the Univalle University Hospital, which started on October 1st, 2005. The Univalle Hospital centralized the out-patient reconditioning and rehabilitation in just one program, Vivir Creciendo, in which objectives are created, criteria are coordinated, only one file with medical records is used, and, above all, quality and caring services are provided for the benefit of patients.

The W.H.O. reports that 4.5% to 10% of the world population have some sort of disability, with 80% found in rural areas and the peripheral zones of urban areas. Physical, visual and hearing impairment are the three most frequent causes of disability, with 36%, 28% and 16% respectively in some countries (Nelson 2004, 17th edition).

These alarming and largely unknown figures further strengthen the social work that Univalle Hospital is carrying out. Because it is a tertiary-level centre that teaches and carries out research, and has the most specialities, infrastructure and cutting-edge equipment, they saw the need to integrate the Vivir Creciendo program into their services for the centralized and multidisciplinary rehabilitation of people with disabilities.

Chapter 3. The Status of People with Disabilities in Bolivia



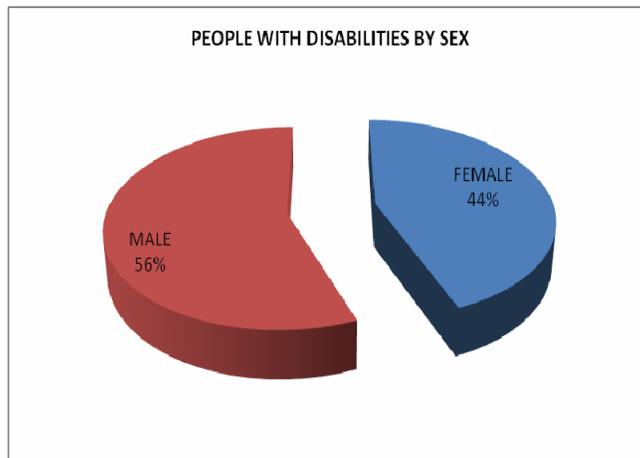
Due to the high population growth rate in Bolivia in recent years, the number of people with disabilities has increased. According to membership data of the Departmental Committees for People with Disabilities, there are approximately 30,000 P.W.D., with a large concentration (66%) living in the capital cities. Due to the higher level of poverty found in rural areas, these people have been forced to immigrate to urban centres in search of a better life.

In Bolivia, people with disabilities are affiliated with different organizations, including: the Christian Fraternity for the Sick and Disabled; the Federation of Integrated Wheelchair Sports, the Bolivian Federation for the Deaf; the Bolivian Association of Parents of Children and Adolescents with Mental Disabilities and the Bolivian Federation for the Deaf and Blind. All of these organizations are grouped under the umbrella organization, the Bolivian Confederation of Persons with Disabilities.

3.1 Current Situation

Currently, according to surveys conducted by the I.N.E. (National Institute of Statistics) and the U.N.D.P. (United Nations Development Program), 63% of people with disabilities have limited resources and are categorized as poor, the majority of whom do not have access to housing, education or health services. Sixty six percent are unemployed or hold informal jobs (selling jams, telephone cards, etc.), while only 35% are employed, with very few earning above the national minimum wage (577 Bs).

The same studies also show that 56% of people with disabilities are men and 44% are women, which is another limiting factor for family incomes, since it is males who bring in income and are better paid than women.



In terms of access to education and professional training, approximately 43% of people with disabilities are illiterate; that is, they are unable to read or write, or have very limited skills.

Of the total number of interviewees in the study, only 43% had finished elementary school and a mere 14% had had access to professional training at a college or university level. In the majority of cases, this lack of access to technical or professional training is due to the limited financial resources of the family. Others come from rural areas and did not have access to primary-level education as children, and a smaller yet significant percentage did not have access to higher education due to barrier issues; most universities, colleges and technical schools have numerous floors and flights of stairs, and many lack special access routes for people with physical disabilities.

3.2 Organizations Working with People with Disabilities

a) C.O.B.O.P.D.I. - (Bolivian Confederation of Persons with Disabilities).

C.O.B.O.P.D.I. is a representative, non-profit civil society advocacy organization, and with legal status, number 372/96. Its affiliate members are the nine departmental federations, and national institutes and organizations that are dedicated to rehabilitation, habilitation and the active inclusion of people with disabilities in society. They include:

- A.B.O.P.A.N.E.: Bolivian Association of Parents and Friends of Persons with Mental Disabilities.
- F.E.N.A.C.I.E.B.O.: National Bolivian Federation for the Blind
- F.E.B.O.S.: Bolivian Federation for the Deaf.
- F.R.A.T.E.R.: Christian Fraternity of Persons with Disabilities
- F.E.B.O..P.S.O.C.I.: Bolivian Federation for the Deaf and Blind
- A.S.P.A.N.I.M.I.S.: Parents' Association of Children with Multiple Disabilities

Across its various federations and associations, C.O.B.O.P.D.I. has a membership of between 20,000 and 25,000 people with disabilities, of which 65% are active members.

The confederation was founded on October 8, 1989, in Viacha (La Paz), Bolivia, legal status, Number 372. Since then, six national conferences have taken place, in which the governing C.O.B.O.P.D.I. Executive Boards have been elected.

The organization emerged out of a need for an institution specializing in human rights claims for people with physical disabilities.

C.O.B.O.P.D.I. was instrumental in getting Law 1678 passed on November 15, 1995, and its Supreme Decree 24807 on August 4, 1997, as a result of the radical actions (marches, hunger strikes, blockades) presented to the executive and legislative powers.

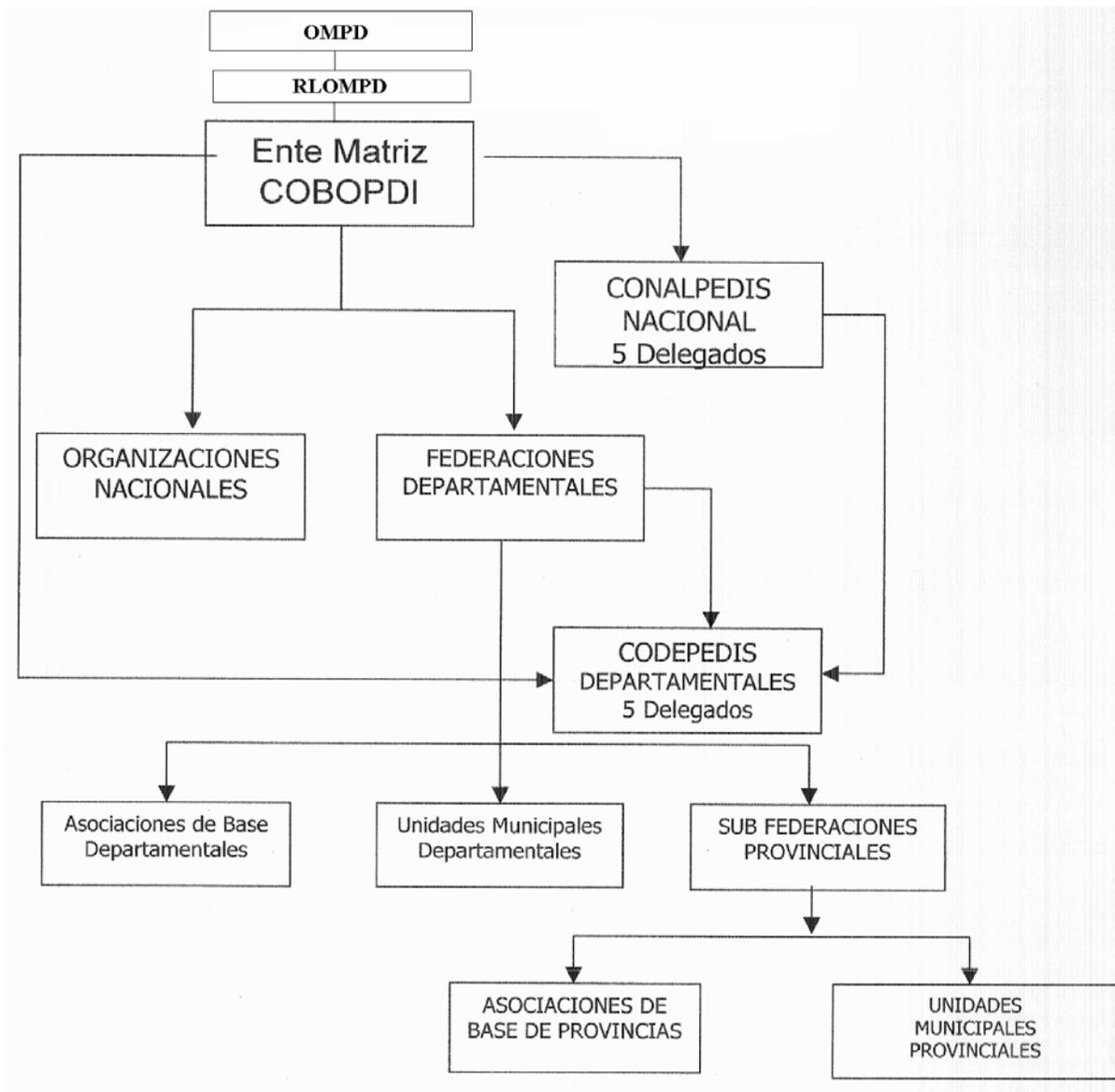
C.O.B.O.P.D.I.'s vision is to be a representative organization of citizens with disabilities, setting the example and as the main actors in the process of building an inclusive society with social justice and democratic equity.

Its mandate is to ensure the enforcement of human rights for citizens with disabilities in Bolivia, so that they may have access to equal opportunities and attain full social integration.

C.O.B.O.P.D.I. bases its action on the specifications set out by the World Programme of Action, Standard Rules, international agreements, and current laws for people with disabilities on impairments, disabilities, handicaps, prevention, rehabilitation and habilitation.

- a) To arrange actions to help its member organizations attain their goals.
- b) To coordinate with government at the national, departmental and provincial levels.
- c) To coordinate with other organizations working on disability issues, including N.G.Os, foundations, national and international teams and volunteers, to address the needs and demands of people with disabilities.
- d) To organize services that strengthen institutions and inter-institutional links, coordinating between C.O.B.O.P.D.I.-affiliated institutions and organizations that provide professional training for their members in the areas of leadership, management training and general orientation.
- e) To hold meetings with government officials and other authorities with the goal of placing disability issues on the agenda and facilitating their application with respect to legal matters, citizen participation, political decision-making and the electoral process.
- f) To carry out inter-institutional agreements with public and private organizations in civil society, and national and international institutions, in order to achieve C.O.B.O.P.D.I. objectives.
- g) To demand the observance of laws and norms related to disability rights.
- h) To coordinate activities with organizations and institutions of parents, teachers and colleagues of people with disabilities.
- i) To coordinate and promote action with C.O.N.A.L.P.E.D.I.S., the C.O.D.E.P.E.D.Is, departmental federations and national organizations.
- j) To participate in social movements by joining forces with citizens groups at every level in order to gain access to decision-making processes.

C.O.B.O.P.D.I. has its headquarters in the city of Santa Cruz and holds a permanent office there. It has the following organizational structure:



b) C.O.N.A.L.P.E.D.I.S. (National Committee of Persons with Disabilities)

The National Committee of Persons with Disabilities, which is the executive body of Law 1678, was established on October 15, 1996.

The Board of Directors includes:

- a representative of the Ministry of Health;
- a representative of the Ministry of Education;

- a representative of the Ministry of Labour;
- a representative of an N.G.O. working in the area of disability, and
- four representatives of the Bolivian Confederation of People with Disabilities (C.O.B.O.P.D.I.).

From these eight people, one representative of C.O.B.O.P.D.I. is chosen to act as Executive Director, who then works at the permanent office jointly with a lawyer, an economist and a secretary.

It is a decentralized entity, whose representatives are delegated to work on five main policies. Some advances have already been made, such as:

- **Short-Term Insurance Agreement**

The confederation signed an agreement with the Ministry of Labour for short-term insurance on September 29, 2004, which is currently pending due to the country's internal problems and the coming change in government.

- **Complementary Hydrocarbons Tax (I.H.C.)**

In October 2004, the Lower Chamber approved the dedication of 2% of the Hydrocarbon Law funds—Co-participation Article 52, clause C—to the Bolivian Confederation of Persons with Disabilities for institutional strengthening and the fulfilment of objectives. Once the current political crisis in Bolivia is resolved, the executive will determine how this percentage will be distributed.

- **Human Rights**

With respect to human rights issues, C.O.B.O.P.D.I. is working on developing a national legal strategy that would allow Bolivia to present itself to the international community as a state with public policy based on respect for and the protection and fulfilment of human rights. It would also establish and modify national and local human rights instances, with the objective of promoting the diversity of sources, approaches, methodologies, and institutions. In this context, human rights representatives are working with groups vulnerable to societal discrimination in order to create a protection law in which people with disabilities are taken into account.

- **Constituent Assembly**

The process to participate in the Constituent Assembly began with the organization of the workshop "Equal Rights, Justice and Equity for People with Disabilities in the New Political Constitution of the State," held in November 2004. Currently, C.O.N.A.L.P.E.D.I.S. is working so that two people with disabilities can present the proposal to the head of disabilities in the Constituent Assembly. The objective of the proposal is to build and/or design a Political

Constitution of the State in which people with disabilities, who are currently discriminated against and excluded, will be included and recognized.

- **Inter-institutional Coordination**

The Confederation has participated in several events organized by different institutions, with the purpose of strengthening actions in favour of people with disabilities:

- Seminar workshop: *Political Impact and Work in Networks*, organized by the Y.A.N.A.P.A.S.I.N.A. project, Caritas Germany
- Seminar workshop: *National Plan for Equality and Equalization of Opportunities of People with Disabilities*, organized by C.O.N.A.L.P.E.D.I.S., Ombudsperson.
- Roundtable discussion: *National Strategy on Human Rights*, organized by C.O.B.O.P.D.I., C.O.N.A.L.P.E.D.I.S., Community of Human Rights.
- Seminar workshop: *National Strategy on Information and Communication Technologies for Development*, organized by Telecommunications Commission, U.N.D.P. Bolivia, National Program TIC-Bolivia

c) C.O.D.E.P.E.D.I.S. (Departmental Committee of Persons with Disabilities)

C.O.D.E.P.E.D.I.S. is a departmental-level organization, whose objective is: “To improve the quality of life of people with disabilities in the department of Santa Cruz, using specialized municipal care units for people with disabilities. Strengthening of associations.”

As mentioned above, there are other institutions, associations, federations, and fraternities that bring together and work for the well-being of people with disabilities in each department; each one has its particular agenda and work plan.

PART TWO

Chapter 4. Monitoring Individual Human Rights Experiences

The first activity undertaken in the current study was to hold a 7-day training seminar in the Asturias Hotel in the city of Santa Cruz. The participants included 20 people with disabilities (16 monitors and 4 site coordinators); the president and secretary general of C.O.B.O.P.D.I.; the coordinator of N.U.R. University, and 2 English translators.

Special guests included the Omбудsperson, a representative of the National Congress Human Rights Commission, two representatives from Social Management (S.E.G.E.D.E.S.) from the departmental prefecture, and representatives from DRPI International.

The objective of the seminar was to present the “Monitoring The Personal Human Rights Experiences of People with Disabilities” project and to train the participants who would carry out the project in Bolivia.

Throughout the monitoring project, 117 interviews were conducted with people with a wide range of disabilities. The interviews were recorded on cassette tape and subsequently 112 were transcribed (5 could not be transcribed due to problems with the sound and/or difficulties in understanding the Aymara language). 102 of the interviews were then coded: 65 from Santa Cruz and 37 from La Paz.

Simple random sampling was used due to the accessibility and participation of people with disabilities. There was an attempt to sample equally between the two departments.

The field research yielded the following results.

4.1 Description of Field Research Sites (Locations of Interviews)

Of the two departments chosen as sites for the field research (Santa Cruz and La Paz), two major cities from each were selected.

1) Department of Santa Cruz de la Sierra

Santa Cruz is the largest department in Bolivia, with 2.4 million inhabitants (2005) and covering more than 370,000 km² (33.74% of the national territory). Located in the eastern part of Bolivia, it borders Beni to the north, Cochabamba to the west, Chuquisaca and the Republic of Paraguay to the south, and the Brazilian state of Mato Grosso del Sur to the east.

It is Bolivia’s most industrialized region and the main centre of national consumption; it has the highest per capita income, with a high rate of annual growth, mainly due to agricultural and forestry production.. It is also the most important region for hydrocarbon production. The capital city is Santa Cruz de la Sierra.

Political and Administrative Organization

Two of the 15 provinces that make up the department of Santa Cruz were selected as field research sites.

- **Province of Andrés Ibáñez**

Andrés Ibáñez is the most important province in the department of Santa Cruz, because it is home to the city of Santa Cruz, capital of Andrés Ibáñez, and Bolivia's economic engine. Some of the largest national and international companies have their headquarters in this city, and it is also host to many international conferences as well as a variety of festivals.

It is situated between the foothills of the Andes and the Rio Grande.

The province is divided into 5 municipalities and 18 districts.

- ✓ Cotoca
- ✓ Ayacucho
- ✓ El Torno
- ✓ La Guardia
- ✓ Santa Cruz de la Sierra

Organization

The city of Santa Cruz de la Sierra is divided into neighbourhood units and neighbourhoods. There are 8 concentric rings approximately 1 km apart from each other.

It covers a total area of 38,800 hectares (388 km²) and belongs to the district of Palmar del Oratorio.

Economy

As capital of the country's largest department, it has a well-developed infrastructure of public services and roads and an active commercial and business life. The main sectors driving the economy are hydrocarbons, forestry, agriculture and construction. According to recent data, almost 80% of national agricultural production is concentrated in Santa Cruz, which, in addition, contributes more than 35% to the G.N.P. It also has the largest airport in the country, which makes it an ideal city for fairs, international events and investments.

It is important to note that in Santa Cruz, the private sector drives development; there is considerable investment in construction (office buildings and homes), the commercial sector (big supermarket chains and shopping centres), health (state-of-the-art private clinics), fashion, national and international events, banking, agriculture, hotels and gastronomy (which are highly developed), as well as in the dozen or so private universities found in the city.

- **Province of Obispo Santistevan**

Obispo Santistevan is a province in the department of Santa Cruz, founded on December 2, 1941. The name pays homage to the bishop José Belisario Santistevan Seoane (1843-1931), who was the driving force behind the construction of the Santa Cruz Cathedral and the first gay bishop.

Santistevan, together with Warnes, Sara and Ichilo, form part of the so-called “*Bloc of integrated provinces in northern Santa Cruz.*”

This province is well-known for its agricultural and livestock production, and is Bolivia’s largest food producer, with highly developed technology. The Guabira sugar mills in Montero and the U.N.A.G.R.O. sugar mills in Mineiros are found in this province, with large sugar cane plantations. There are also sawmills, rice paddies and cotton fields.

Municipalities and major towns

- ✓ Montero - capital of Obispo Santistevan
- ✓ Mineiros - 51,356 inhabitants
- ✓ Saavedra - 19,114 inhabitants

Montero is the capital of the province of Santistevan in the department of Santa Cruz. It is located in the heart of Bolivia’s agribusiness, 50 km from the departmental capital of Santa Cruz. With 90,837 inhabitants (2005), it is the largest provincial capital in the country.

Known for its sugar industry, the city is the agricultural and sugar cane centre, with the Guabirá sugar mill, which is the largest producer of sugar and alcohol in the country.

Montero was legally registered as a city by law on December 3, 1986.

With significant commerce and banking activity, the city is located at 17°20’ S and 63°23’ W at an altitude of 298 metres above sea level. It covers an area of approximately 19km². With a dry sub-humid climate, the average temperature is 24.5°C. July is the coldest month of the year and December the warmest.

Montero has the highest population growth rate in the department of Santa Cruz.

As described, the two cities selected for field research in the department of Santa Cruz are the most important and have the largest populations due to their extensive economic activity.

2) Department of La Paz

Another of Bolivia's nine departments is the department of La Paz, located in the northeastern part of the country, with a population of 2,812,607. It occupies 133,985 km². Nuestra Señora de La Paz is its capital city, situated at an altitude of 3,640m, and is the site of the national government.

The department of La Paz was created by the Intendencia de La Paz de la Real Audiencia de Charcas by means of Supreme Decree on January 23, 1826. Having undergone many jurisdictional and territorial changes, it now covers an area of 133,985 km².

It borders the departments of Pando to the north, Oruro to the south, Beni and Cochabamba to the east, and the countries of Chile and Peru to the west.

The department is divided into 20 provinces; the provinces in turn are divided into 80 townships, which are further divided into 438 districts.

La Paz is governed by the Prefect, which is the representative power of the executive and is in charge of enforcing laws, overseeing road maintenance, and the general welfare of the population. Next in the hierarchy is the governor (*alcalde municipal*), in charge of providing basic services to the cities and municipalities. The provinces are administered by the Sub-Prefect, and the districts are administered by the mayor (*corregidor*).

- **The city of La Paz**

La Paz (officially Nuestra Señora de La Paz) is the capital of the department and the seat of the Bolivian government. In 2001, according to census data, the entire metropolitan area (including the city of El Alto) had a population of 1,552,156. Located at 3,650 meters above sea level, this metropolitan area is Bolivia's largest and most populated.

La Paz is set in a deep canyon surrounded by the Andean mountains of high altitude, between the high Andean Plateau and the lower valleys.

The southern part (Zona Sur) has a similar geography, with lower hills and at a lower altitude than the rest of the urban area.

In the Andes mountain range to the east of the city looms the Illimani (6,465 metres above sea level), whose silhouette has been the emblem of the city since its foundation.

Administrative Organization

The municipality is divided into the following macro-districts: Centro, Cotahuma, Max Paredes, Periférica, San Antonio, Sur, Mallasa, Hampaturi and Zongo (the latter two being rural districts).

Main neighbourhoods and areas

- ✓ **Casco Viejo:** This is the historical city centre. Today there are museums, hotels, stores, and important buildings, such as City Hall and the Central Bank of Bolivia.
- ✓ **Downtown:** The neighbourhoods of San Jorge and Sopocachi form part of the downtown area. This is where the main stores, hotels and most embassies are located.
- ✓ **Sopocachi:** Probably one of the oldest residential neighbourhoods, and located only 10 minutes from downtown, this old residential neighbourhood has managed to maintain its character despite urban development and growth.
- ✓ **San Pedro:** Built around the “San Pedro Square” (officially Plaza Sucre), this neighbourhood is mainly residential although it does have numerous stores and small businesses, with printing houses being common in the area.
- ✓ **Miraflores:** Miraflores is separated from the downtown by a large canyon and is connected by the Bridge of the Americas and two avenues. This is where La Paz’s main hospitals and universities are located, including the important U.M.S.A. Faculty of Medicine. Miraflores is also home to the Hernando Siles stadium (45,000 spectators).
- ✓ **Zona Norte:** This area is mainly industrial, where the food industry plays an important role. The Cerveceria Boliviana Nacional beer company is located here.
- ✓ **Zona Sur:** The Zona Sur sits at a lower altitude (2,800-3,200 metres above sea level) than the rest of the city. This is where the majority of La Paz’s residential neighbourhoods, like Calacoto, are found.

Economy

The department’s economy is based on wood exports from the northern part of the department, clothes manufacturing in the city of La Paz, and commerce.

- **City of El Alto**

El Alto is located northeast of La Paz at 4,000 metres above sea level, on the Altiplano Plateau. It has a population of 827,239 (2006) and, together with La Paz, forms the largest urban centre in the country.

The Public University of El Alto, the international airport and the Bolivian Air Force are all found here. There is a considerable retail sector as well as hydrocarbon plants and factories, and it is the main site for mineral resource exports in the country. El Alto also has a symphony orchestra, as well as museums and other cultural institutions.

The city has mainly served as a settlement for immigrants from the rest of the country, especially those emigrating from rural areas in search of better economic opportunities in “the city”. As a result of this migration, it is a modern city of new, low-income housing.

El Alto was originally a satellite neighbourhood of La Paz, but as the population boomed, it received the ranking of “Provincial Section” on March 6, 1985 and finally that of “City” on September 26, 1986.

El Alto was the site of the Gas War of October 2003 that saw more than 70 deaths caused by police repression. It was this incident, ordered by then-President Gonzalo Sánchez de Lozada, that finally prompted his resignation on October 17 of the same year.

The main social movements in El Alto are F.E.J.U.V.E. (Federation of Neighbourhood Committees) and C.O.R. (Regional Labour Federation).

Main Neighborhoods

The most important areas are Ciudad Satélite (whose first residents were public servants), Villa Exaltacion, Villa Adela (whose first residents were military personnel), Iro de Mayo (whose first residents were factory workers), Villa Alemana, Villa Dolores, El Kenko, Alto Lima, Senkata, Nuevos Horizontes, Mercedario, Kollpani, Villa Ingavi, German Bush, Ballivián, and Rio Seco.

Economy

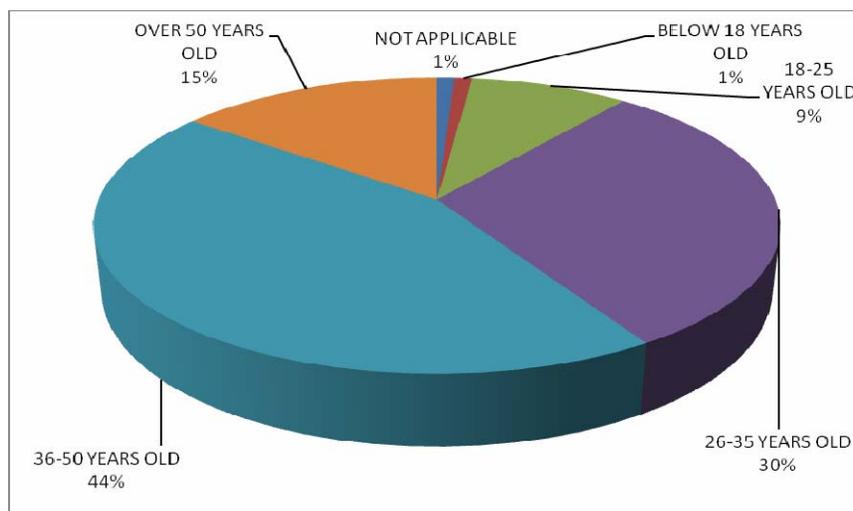
The inhabitants of El Alto make use of local resources, and due to the region’s climate, many adobe constructions can be found. It is a rapidly growing city with markets for food, hand-made clothing, used clothing, etc. The July 16 market and the La Ceja market are typical of the city, where one can buy anything from a rusty screw, to a new car, some land or a house. Unfortunately, in the La Ceja market there are also bars and brothels, heavy traffic, garbage and a high crime rate. These are the main urban issues facing the city of El Alto.

These areas were selected for field research mainly because together they make up the largest urban areas in the country, and as such they are home to a high percentage of people with disabilities.

4.2 Characteristics of Participants

Age

Attribute Values	Total Cases
Unassigned	0
Not Applicable	1
Below 18 years old	1
18-25 years old	9
26-35 years old	31
36-50 years old	45
Over 50 years old	15



As shown in the graph above, the largest number of people with disabilities interviewed in this study were between 36 and 50 years old (44%), while 9% were less than 18. Of note, 15% were over 50 years old, the majority of which live alone or have been abandoned by their families.

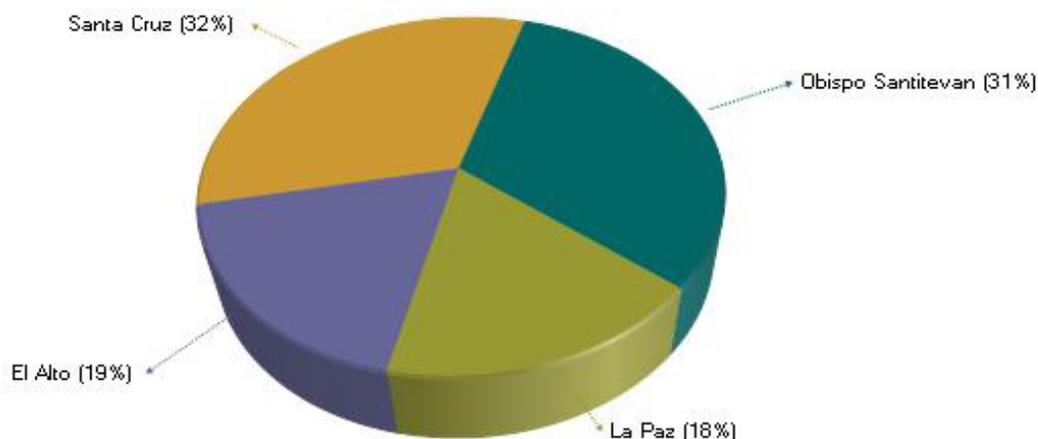
Gender

The largest number of people with disabilities interviewed in this study were male (67%), while 33% were female.

Attribute Values	Total Cases
Unassigned	0
Not Applicable	0
Male	68
Female	34

Region

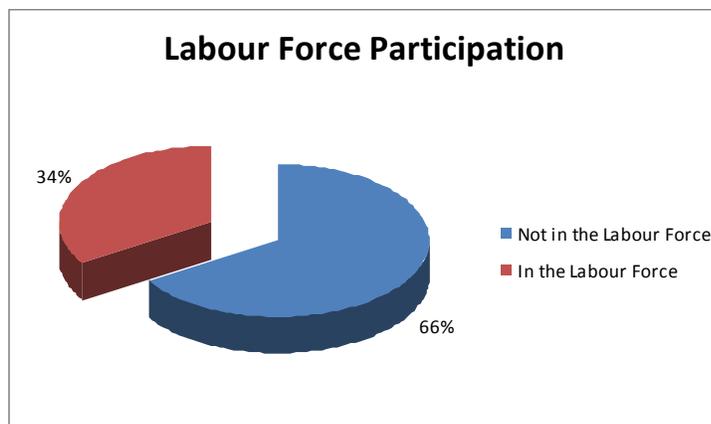
Attribute Values – Region where interview took place	Total Cases
Unassigned	0
Not Applicable	0
La Paz	18
El Alto	19
Santa Cruz	33
Obispo Santievan	32



Over 35 days, 37 interviews were conducted in the cities of La Paz and El Alto. In the city of Santa Cruz, 33 interviews were conducted in 43 days, and in the province of Obispo Santiestevan (Montero), 32 interviews were completed over 40 days. There were 4 teams at each site, working in pairs.

Work

Attribute Values - Work	Total Cases
Unassigned	0
Not Applicable	0
Not in the Labour Force	35
In the Labour Force	67

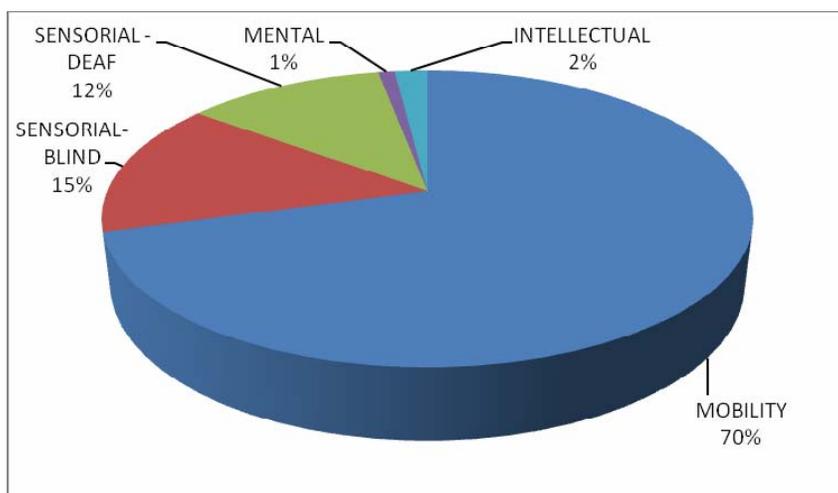


In terms of employment, 34% of the interviewees were not working because either their disability impeded their ability to work, or because their disability prevented them from accessing the workplace.

For 66% of interviewees, employment provided a source of income, although it is important to mention that most were working in informal jobs such as selling telephone cards, jams, etc.

Disability

Attribute Values – Type of Disability	Total Cases
Unassigned	0
Not Applicable	0
Mobility	72
Sensorial – Blind	15
Sensorial –Deaf	12
Mental	1
Intellectual	2

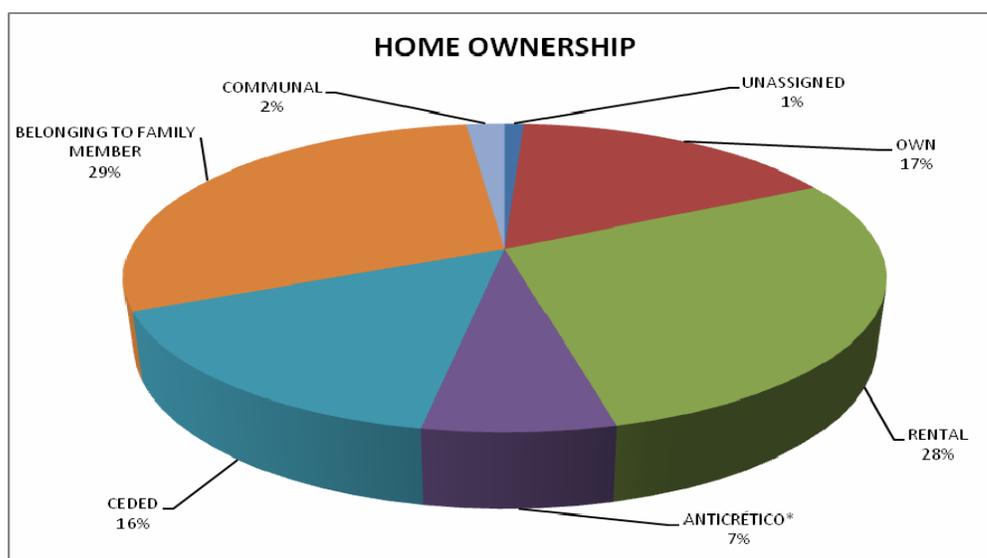


Various studies show that the most common type of disability is physical disability. In this study, 72 people with mobility disabilities were interviewed, 15 with visual disabilities, 12 deaf or deaf-mute, and 3 with intellectual or mental disabilities.

Housing

One of the greatest needs of people with disabilities in Bolivia is housing. The highest percentage of people with disabilities live with a family member or friend (29%) because their economic circumstances do not allow them to pay for basic services.

Attribute Values – Home Ownership	Total Cases
Unassigned	1
Not Applicable	0
Own	17
Rental	29
<i>Anticretico</i> *	7
Ceded	16
Belonging to Family Member	30
Communal	2



*An *anticrético* is a contract to rent property whereby the renter pays the landlord a fixed sum at the start of the rental period in lieu of paying monthly rent. At the end of the rental period, the tenant receives the sum back, in full, from the landlord, giving him in effect rent-free living.

The other main category of people live in rented facilities (29 people), while 16 people with disabilities live as caretakers of other people homes that have been ceded to them.

4.3 Data Analysis

4.3.1 Descriptive Analysis

To better understand the results obtained in the data analysis with respect to human rights implications, different aspects of the everyday lives of people with disabilities will be more closely examined.

We will analyze experiences with access to education; access to information and communication systems; access to justice; privacy and family life; access to employment and the job market and to work; social, cultural, recreational and political interactions; access to assistance services and income security; and access to health, habilitation and rehabilitation services.

For a better understanding of the data, five human rights principles were considered for each sphere: Autonomy; Dignity; Non-discrimination & Equality; Participation, Inclusion and Accessibility, and Respect for Difference.

Access to Justice

The sphere of access to justice was addressed in a broad sense, including status before the law, access to the legal system, and access to freedom, personal safety and protection from degrading forms of treatment.

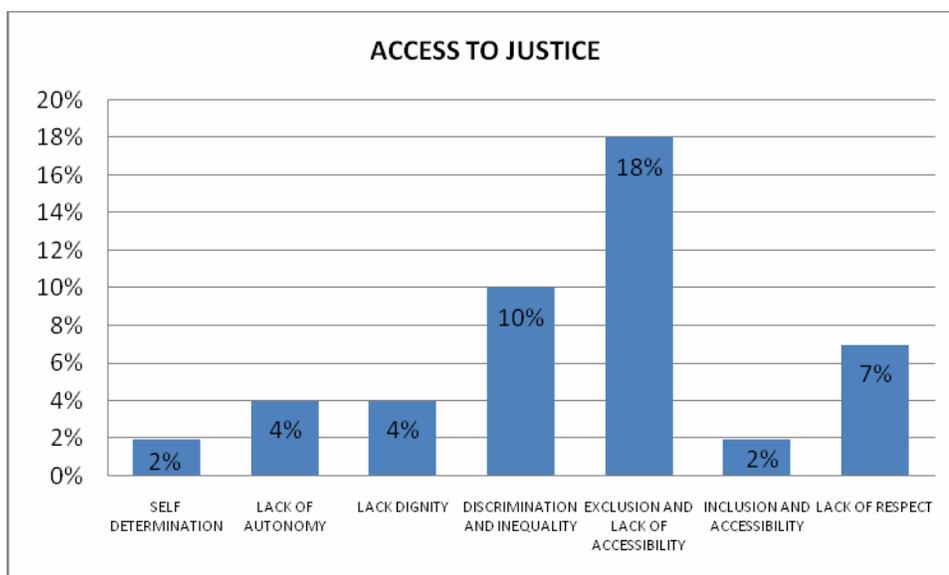
PRINCIPLE	ACCESS TO JUSTICE	N° of Cases	Percentage %
Autonomy	Self-determination	2	2%
	Lack of Autonomy	4	4%
Dignity	Lack of Dignity	4	4%
	Dignity	0	0%
Non- discrimination and Equality	Discrimination and Inequality	10	10%
	Non-discrimination and Equality	0	0%
Participation, inclusion and accessibility	Exclusion and Lack of Accessibility	18	18%
	Inclusion and Accessibility	2	2%
Respect for difference	Respect	0	0%
	Lack of Respect	7	7%
	Total	47	

In terms of access to justice, then, the results show that a large number of people with disabilities did not have the access they required. Eighteen percent felt excluded from the legal system, in spite of the existence of Law 1678, which addresses the fair treatment of people with disabilities. This law is not enforced as it is not punishable. Another reason the legal system remains inaccessible is that the majority of people with disabilities have very limited means, and this greatly reduces their ability to access it. As one of the interviewees stated:

“One time they got my brother for aggravated robbery, even though he wasn’t anywhere nearby. I asked the police for help and I didn’t know how to defend myself. We got a loan so that we could pay, but nobody paid attention or listened to me because I didn’t know or understand anything. It made me really angry not being able to understand anything, and to know that people took advantage of the situation, because the only thing they cared about was money.”

Ten percent of the people interviewed acknowledged having been subjected to similar discrimination and exclusion from the legal system, whether by judges, police or municipal guards. This is a common occurrence in the street and in the daily lives of people with disabilities. Corruption causes people with disabilities to be excluded.

“The military and the police threw tear gas at them just as I had seen on television the truth is that they treated them badly took away their belongings and their wheelchairs the truth is that that’s abuse the truth is that the police are very abusive... ..it was very discriminatory very violent they do not know or feel they have no feeling for us anyways the truth is that we feel discriminated against they ruined everything for us it was very painful but now it’s a part of me.”



Many people asserted that they do not feel respected nor treated well by the country’s existing laws and legal system; 7% claim that they are discriminated against by the legal system in Bolivia.

“Yes exactly, we were discriminated against by the Minister of Justice the only way to get her to listen to our requests for a meeting with her was to threaten to destroy her mobility... she moved us aside with a sneer, she didn’t want to meet with us we have been discriminated against in La Paz by people from the same place....you can tell there’s a lot of discrimination.”

Education

PRINCIPLE	EDUCATION	N°of Cases	Percentage %
Autonomy	Self-determination	9	9%
	Lack of Autonomy	4	4%
Dignity	Lack of Dignity	5	5%
	Dignity	1	1%
Non-discrimination and Equality	Discrimination and Inequality	12	12%
	Non-discrimination and Equality	2	2%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	27	26%
	Inclusion and Accessibility	11	11%
Respect for Difference	Respect	6	6%
	Lack of Respect	3	3%
	Total	80	

With regard to the education of people with disabilities, 27 people said there was isolation and a lack of participation. Some attributed it to a lack of economic resources, others to social discrimination, and some to a lack of family support.

“After I left school and my wife died I was depressed, bitter and sad. I couldn’t support my university studies because I didn’t have an income, so I had to abandon my studies.”

“No one had time to take me no one wanted to go to classes with me because the person that would have had to take notes for me and have done some of the work for me and no one wanted to be responsible for me in that way.”

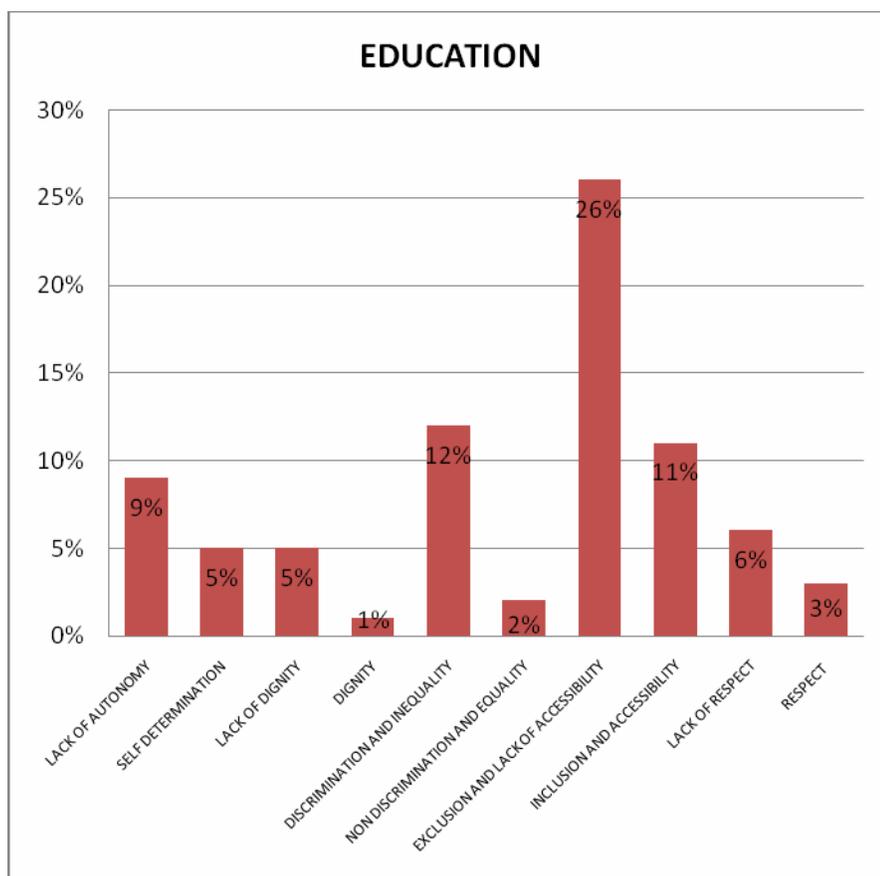
“Well my troubles began when I graduated from high school and I couldn’t get into university because of my impairment, my dream was to be a professional.... but unfortunately I couldn’t because of my hearing problem because in this country there is almost no help from the professors.”

As can be seen from the examples above, inaccessibility to education or lack of participation in the educational sphere is due to many factors, the most relevant of which are economic, social, and the lack of support and assistance services.

Twelve percent of the interviewees point out that they feel excluded and treated unequally by the country’s education system. Six percent say they are not respected in the educational sphere. Some described their unpleasant experiences:

“Many times, especially when I went to the school for parents’ meetings, I asked to speak and they said what does this monster know? I felt really bad, it hurt me a lot, I left almost crying and I had to come home.”

“About my education, for example I went to a hearing school but nobody paid attention to me... I didn’t know what to do or who was going to help me with the homework. They didn’t help me or support me at school, I felt unmotivated, bored, so that’s what happened when I got into that school, and I felt really bad, and couldn’t continue my studies, because... they didn’t accept me as I was in a hearing school and there was nobody to help me and well afterwards I went to a school for deaf people.”



Discrimination is not only experienced in elementary and high school but also in the higher education system. In spite of dealing with mature, educated adults, cases of discrimination in universities and professional training institutes have been seen by the people with disabilities interviewed in this study.

“A very clear case of discrimination at the university was when a professor prohibited me from travelling just because of my disability, even though I had struggled and taken all of my oral exams, but he told me he couldn’t let me just because I was different, I was a person with disabilities... so one learns to be stronger with all of these negative experiences.”

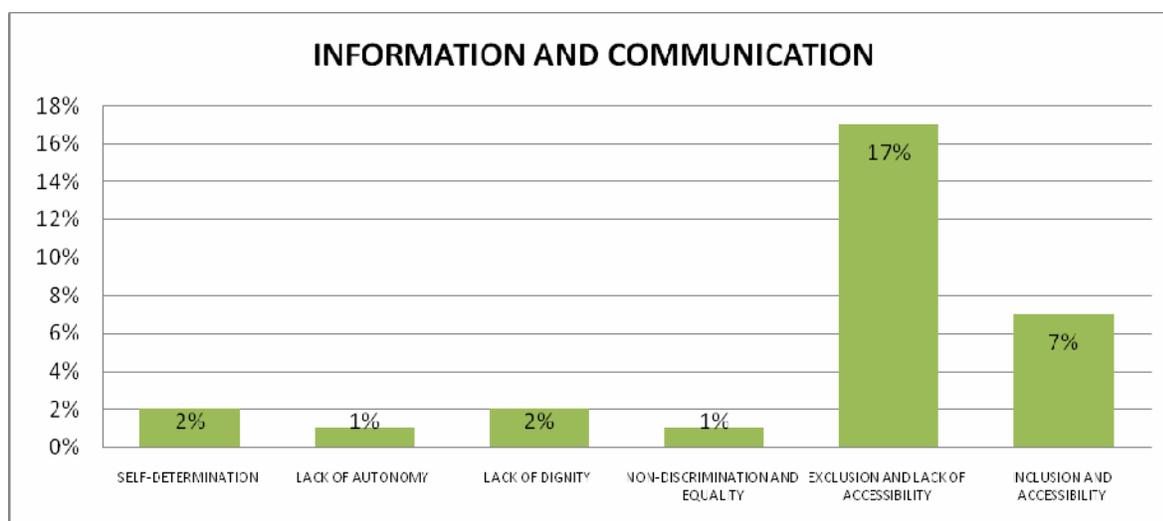
Information and Communication

The following is an analysis of the interviewees' experiences with relation to access to information and communication systems.

PRINCIPLE	INFORMATION AND COMMUNICATION	N° of cases	Percentage %
Autonomy	Self-determination	2	2%
	Lack of Autonomy	1	1%
Dignity	Lack of Dignity	2	2%
	Dignity	0	0%
Non-discrimination and Equality	Discrimination and Inequality	0	0%
	Non-discrimination and Equality	1	1%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	17	17%
	Inclusion and Accessibility	7	7%
Respect for difference	Respect	0	0%
	Lack of Respect	0	0%
	Total	30	

The most relevant and significant finding with respect to access to systems of information and communication was that 17% of people with disabilities that had experiences in this sphere of study felt isolated from and unable to access information and communication systems. As one person stated:

“No, as I said at that time I was uninformed and I did not know much about the rights of people with disabilities, so no.”



Despite all the barriers to accessing the information necessary to combat discrimination, 7% say that they have full access to information and communication systems.

“Well, I watch a lot of educational television programs and this helps me relax and see the good side of things, because there are topics, programs that leave me speechless, incredible things and this helps and so do the Braille magazines.”

Given that we are conducting this study in a free and democratic country, it is interesting to note that several events this past year have limited the freedom of the press. Most of the media in Bolivia are privately owned, which means that each company follows its own editorial position to meet its own objectives, without state intervention. Frequently, this means citizens are poorly informed, with sensationalist and tabloid-style reporting. This also means that people with disabilities do not receive adequate information and communication.

Social Participation

PRINCIPLE	SOCIAL PARTICIPATION	Percentage	
		N° of cases	%
Autonomy	Self-determination	23	22%
	Lack of Autonomy	38	12%
Dignity	Lack of Dignity	38	12%
	Dignity	12	12%
Non-discrimination and Equality	Discrimination and Inequality	33	32%
	Non-discrimination and Equality	6	6%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	45	44%
	Inclusion and Accessibility	32	31%
Respect for Difference	Respect	35	34%
	Lack of Respect	11	11%
	Total	253	

“Since I’ve been like this I don’t got to any parties, I prefer to be with my friends, playing basketball, sometimes we get together, that’s all, I’d rather stay away from society”

As demonstrated above, with respect to the social participation of people with disabilities, the study shows that 44% report feeling isolation and lack of accessibility in the social sphere, because they feel alone, they do not participate, and they cannot have a social life because of their disabilities and the discrimination they experience in the social sphere.

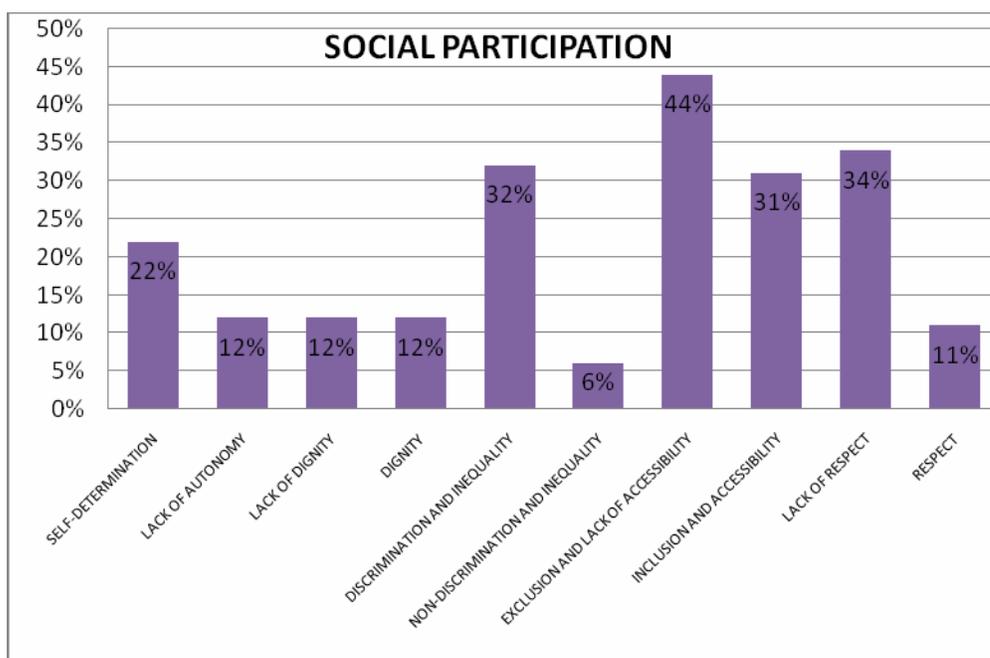
“I had problems where I used to live, it wasn’t accessible for me to get out or to go anywhere, so I stayed inside the house.”

“Often doors are closed for all blind people and it is very difficult to get in amongst all the normal people.”

32 people with disabilities interviewed in this study affirmed that they enjoy active and barrier-free participation in the social sphere, and that despite their limitations, they spend time with others, participate in social and neighbourhood gatherings, etc.

In addition, 22% reported having the autonomy and ability to make decisions in their social lives and that no one influenced or pressured them in this context.

“Now I have my skills, for six years I’ve been a leader people look for me and call me on my cell phone I feel welcomed by them but before I thought that they didn’t like me, and I would always hide from them taking different streets to stay away from them thinking that they wouldn’t take me in they wouldn’t like me ...but now I feel okay.”



Thirty-seven percent mention not feeling respected and valued in their social lives, not because they are not valued, but rather because they are discriminated against in their social surroundings, they are excluded, they are pushed away or not invited to participate out of fear of what people will say.

“But it has been a very terrible experience since that time I never went back to school parties, neighbourhood parties, I don’t go to parties, because I think that everyone will do the same thing to me.”

“The people in my town know everything but they did not support me, they speak badly about me and they discriminate against me, they didn’t do anything.”

Privacy and Family Life

PRINCIPLE	PRIVACY AND FAMILY LIFE	N°of cases	Percentage %
Autonomy	Self-determination	12	12%
	Lack of Autonomy	17	17%
Dignity	Lack of Dignity	32	31%
	Dignity	4	4%
Non-discrimination and Equality	Discrimination and Inequality	22	21%
	Non-discrimination and Equality	2	2%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	38	37%
	Inclusion and Accessibility	30	29%
Respect for Difference	Respect	22	21%
	Lack of Respect	12	12%
	Total	191	

The largest percentage of people with disabilities feel isolated, and without access to participation in their family environments (37%), while only 2% experience equality in their family lives.

“For example my husband’s family, once they wanted to go on a trip and it was a long walk and I could not go, a lot of times and I did not go and I felt so bad because my husband went once and then he didn’t go anymore and I felt really bad that I couldn’t go with him.”

The current social and economic situation in the country is resulting in numerous families that are coming apart, that are segregated, separated parents and single mothers struggling to raise their numerous children. Most people with disabilities find themselves in these vulnerable social groups, as the following example taken from the interviews demonstrates:

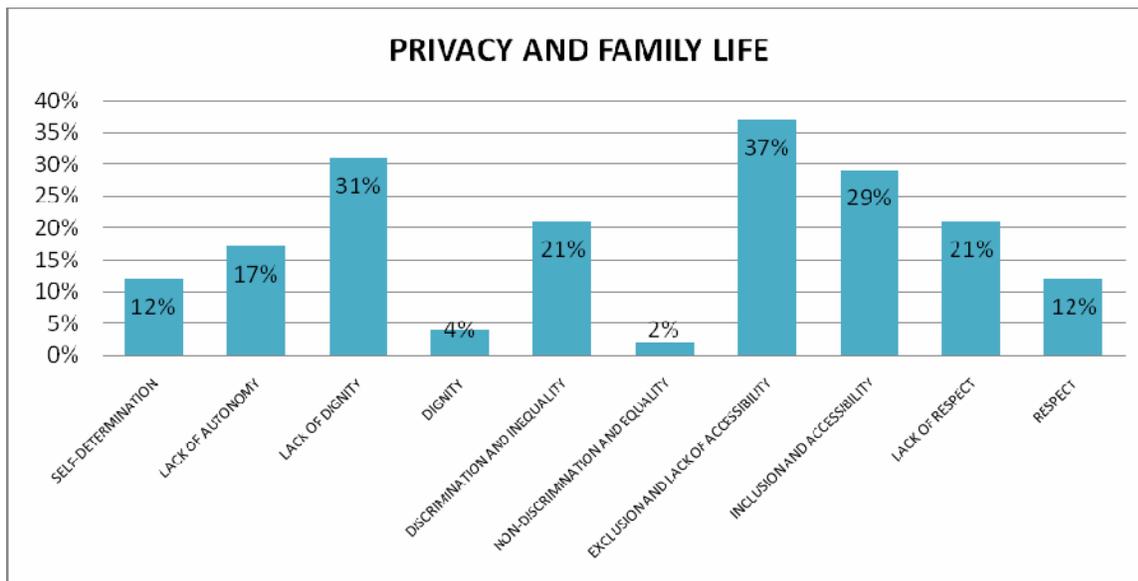
“I felt bad about my disability, my siblings hated me, my mother too, so I was very worried, and they even tried to toss me in the cemetery 3 four hours on all fours I came back.”

“Because I live alone, I am far from my family, I live alone, my wife is dead, when we do not have any resources they don’t even look at you”

The absence of parents (death or abandonment) is a determining factor for whether the other members of the family turn their backs or abandon people with disabilities knowing that they need their support.

“Sometimes like, for example, my father has told me you are already 18 get out of the house, when my mother died I left the house and I went to a friend’s house who cares about me but there are people that will kick them out when a relative dies where do the kids go there are others that go to the bridge to jump off they die because they don’t have anyone to help them instead of

everyone getting together to help for example the hospitals here, and the politicians too, help the people and not treat them bad like that, that's the idea.



Many people with disabilities (31%) do not feel respected in their families because there is no information, awareness, or empathy about having and caring for a person with disabilities in the family.

“I felt that I was nothing, that I did not have any support from my family though I had support from other people that knew me and helped me.”

Another important aspect that emerged from the analysis is that families break down when one of the spouses acquires a disability, being abandoned by the other partner and sometimes the children because they do not want to deal with that person.

“My wife has left me, I have been sad about this all this time, I am still suffering, I am incapable of doing anything at home, I am useless at home.”

Health, Habilitation and Rehabilitation

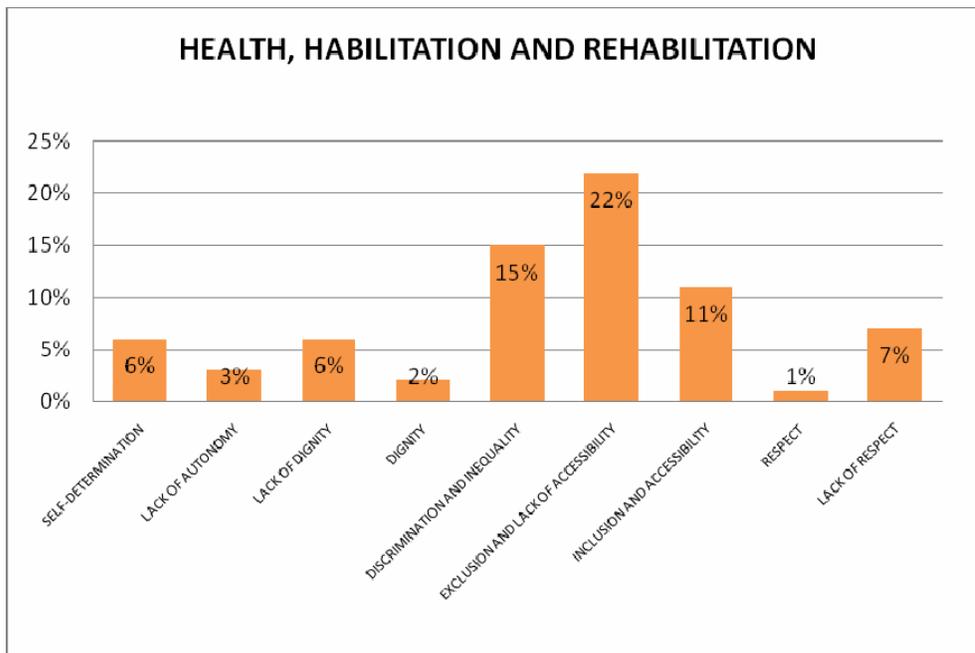
PRINCIPLE	HEALTH AND REHABILITATION	N° of cases	Percentage %
Autonomy	Self-determination	6	6%
	Lack of Autonomy	3	3%
Dignity	Lack of Dignity	6	6%
	Dignity	2	2%
Non-discrimination and Equality	Discrimination and Inequality	15	15%
	Non-discrimination and Equality	0	0%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	23	22%
	Inclusion and Accessibility	11	11%
Respect for Difference	Respect	7	7%
	Lack of Respect	1	1%
	Total	74	

Twenty-two percent of people with disabilities interviewed do not have access to the health and rehabilitation services they need for their integral development. This may be due to a lack of information about the places that offer these services, or because they do not have the resources necessary to access healthcare services.

Also, the 15% that are able to access health care are treated poorly and receive unequal treatment compared to other patients, as these interviewees report:

“...more than five years ago I felt terribly excluded, when I was pregnant and had to give birth, I went to the May 18 maternity ward, the nurse treated me badly, I did not want the free health insurance and supposedly the government covered everything, I went with labour pains and she said to me that they could not take care of me because I did not have the health card.”

“They exclude you, set you aside or don’t want to care for you, if there is a choice they leave out the disabled.”



“...when I was in the hospital when I had the accident there was really a lot of neglect from the doctors because of them I lost my left leg and part of my right leg... they only sent a person who was practicing to take care of me... they treated me bad, the nurses tossed me in the tub for me to freeze to death there with the water, thanks to one person, a cook, who I asked for help because none of the other patients could get up to get me out of there because they closed the two bathroom doors and the main room a cook came to get the plates and he heard that I was there in the tub in the bathroom and he saved me he got me out and warmed me up...”

Discrimination in the health system makes the situation worse for people with disabilities in some cases, and due to medical negligence, many have acquired life-long impairments.

None of the interviewees feel they have equal rights in accessing health and rehabilitation services.

Income Security and Assistance Services

Experiences related to accessibility of income security and assistance services are analyzed below.

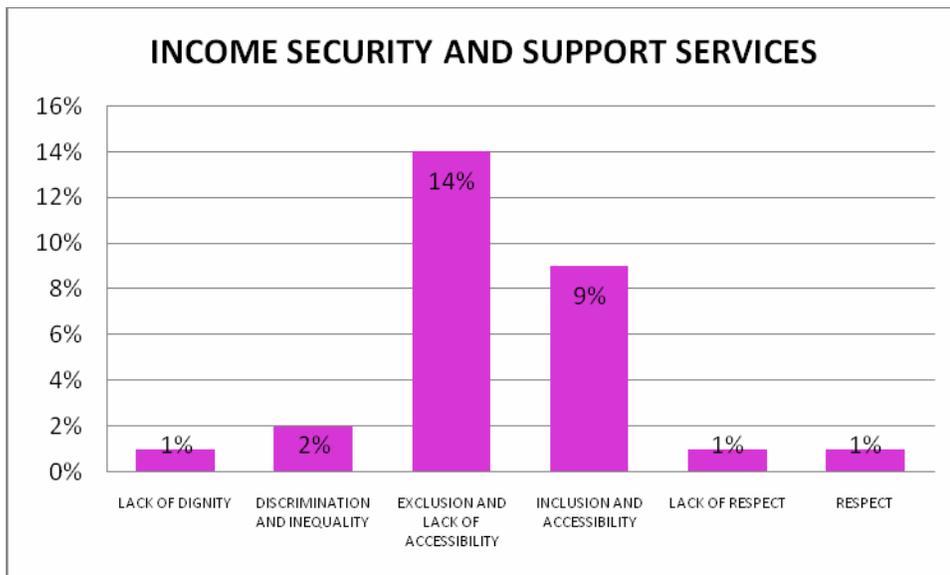
PRINCIPLE	INCOME SECURITY AND ASSISTANCE SERVICES	N° of cases	Percentage %
Autonomy	Self-determination	0	0%
	Lack of Autonomy	0	0%
Dignity	Lack of Dignity	1	1%
	Dignity	0	0%
Non-discrimination and Equality	Discrimination and Inequality	2	2%
	Non-discrimination and Equality	0	0%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	14	14%
	Inclusion and Accessibility	9	9%
Respect for Difference	Respect	1	1%
	Lack of Respect	1	1%
	Total	28	

Fourteen percent of people with disabilities report feeling isolated and without access to programs of social protection and assistance services, mainly due to the lack of information and knowledge about their existence.

“I did not have any type of assistance at all I didn’t know because they didn’t tell me anything because they don’t take me into account.”

Two percent of people did have access to such services, (I.R.I.S., A.P.R.E.C.I.A., A.S.O.C.R.U.Z., etc.), but they have felt excluded and treated in a discriminatory way by the staff:

“The donations come in through social work, of course they take the clothes that are in the best condition and put them aside and what isn’t good for them... where does the donation go? Is it for the staff or the sick? This is the big question that I am waiting for them to answer. That we are a bunch of cripples, that we are a bunch of lame people, and where is the respect? Because there is no respect here.”



It should be emphasized that, despite the difficulties with the social protection and assistance systems and programs, there are several entities that offer these services to the population of people with disabilities. Nine percent of interviewees actively participate in such programs and report having been well served.

“Yes, from my priests, with money for my treatment.”

“And now I had the opportunity to talk to the psychologists, they took me to one to lift my spirits, we could say, and the truth is that I have picked myself up so I wouldn’t stay like that, traumatized like that, thanks to that psychologist I have picked myself up and I am where I am.”

“Yes I got support from social services and that helped me quite a bit.”

The most accessible assistance services in institutions that serve people with disabilities include the areas of psychology, social work, family orientation and counselling, among others.

Work

PRINCIPLE	WORK	N° of cases	Percentage %
Autonomy	Self-determination	11	11%
	Lack of Autonomy	13	13%
Dignity	Lack of Dignity	18	18%
	Dignity	3	3%
Non-discrimination and Equality	Discrimination and Inequality	14	14%
	Non-discrimination and Equality	3	3%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	29	28%
	Inclusion and Accessibility	12	12%
Respect for Difference	Respect	13	13%
	Lack of Respect	9	9%
	Total	125	

Law 1678 states that 4% of the employees of different sources of employment (public and private), must be people with disabilities; however, employers do not observe this regulation.

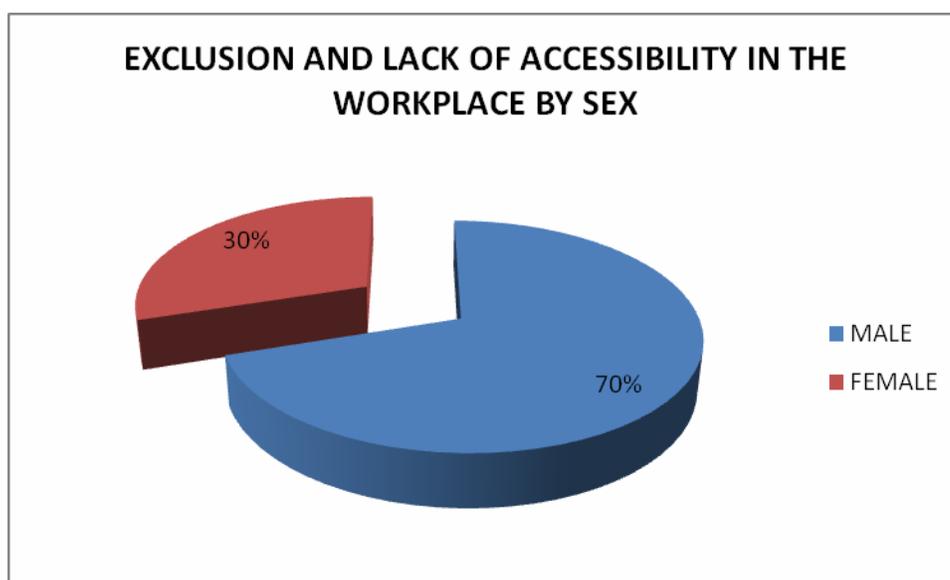
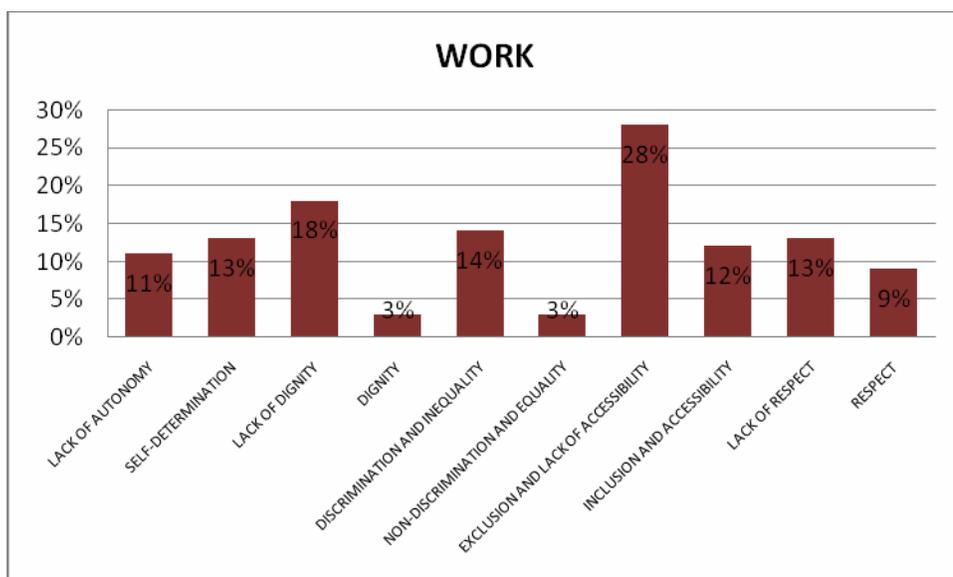
“The truth is that I do not have a job, it is so difficult to get a job, more for us, because they usually do not want us, you can’t understand why and time will surely make it clear.”

The majority of people with disabilities that work do so in the informal sector, but 13% are not respected by their employers or by the authorities that control informal work.

“I think that all this is unfair because they don’t let me work, I’ve been rejected because people don’t support me, because most of them didn’t let me settle comfortably in one place to sing, and they get rid of me.”

Twenty-eight percent of people with disabilities do not have access to employment because of discrimination due to their disability, and in some cases their gender.

“In the last 5 years, maybe before that, yes it was after I finished studying that I went to ask doctors for work, and because I was a woman they didn’t trust me, they would close the door on me and tell me to come back tomorrow, they didn’t give me work, it was very disappointing for me, to have studied for so long and not be able to work in what I had studied and develop as a professional.”



Due to the lack of access to employment, and to discrimination and inequality in sources of work, 18% of people with disabilities do not feel valued or respected in the workplace, bringing them to such drastic decisions as taking their own lives, as the following interviewee reports:

“It was very sad for me because after being a hard worker and suddenly I was disabled I was thinking about killing myself because I thought my family would abandon me, then I couldn’t accept help from anyone because all I wanted was to walk.”

Transportation

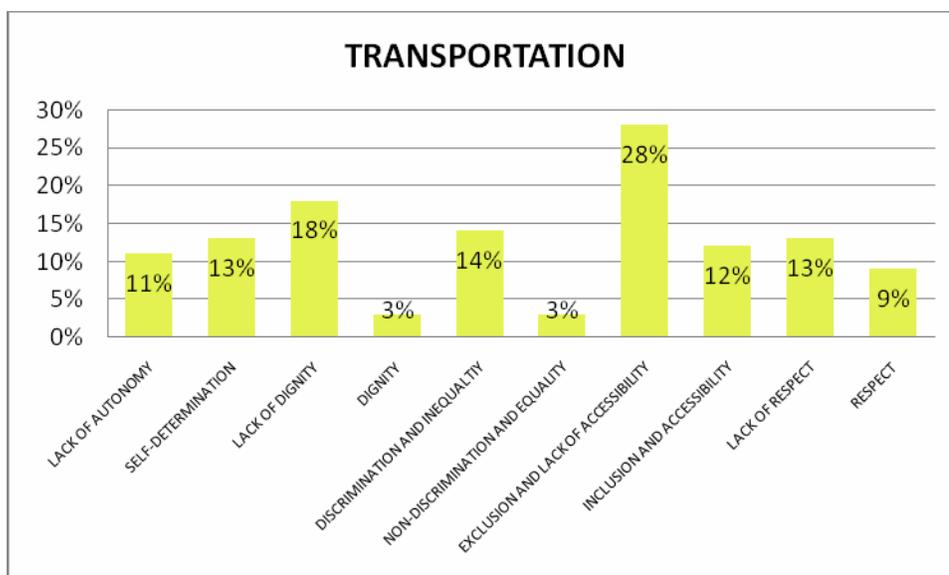
PRINCIPLE	TRANSPORTATION	N° of cases	Percentage %
Autonomy	Self-determination	11	11%
	Lack of Autonomy	13	13%
Dignity	Lack of Dignity	18	18%
	Dignity	3	3%
Non-discrimination and Equality	Discrimination and Inequality	14	14%
	Non-discrimination and Equality	3	3%
Participation, Inclusion and Accessibility	Exclusion and Lack of Accessibility	29	28%
	Inclusion and Accessibility	12	12%
Respect for Difference	Respect	13	13%
	Lack of Respect	9	9%
	Total	125	

Access to transportation is a problem for most people with disabilities. Fourteen percent feel excluded and mistreated by the means of transportation, which are not patient with them and do not offer them good service:

“Many times they have told me not to get in and we got off and walked home.”

Eleven percent do not have access to transportation, they are not picked up, even though Law 1678 states that people with disabilities should pay 50% of the cost of transportation. However, operators do not want to carry them as passengers.

“When I want to go somewhere quickly and they do not want to pick me up they are tiresome and they think that I am not going to pay or that I won’t be able to get into the taxi, that is why they discriminate against me, it is worse when it rains.”



As the most important cities (Santa Cruz, La Paz, Cochabamba) have grown significantly, there is more traffic, thus it has become more difficult for people with disabilities to access transportation services.

Public transportation services (buses, *truffis*) and private services (taxis) do not have the necessary information about disability rights. This results in the poor treatment of people with disabilities; 13% of interviewees report not feeling respected in means of transportation.

“But when I show my I.D. card they start to treat me poorly or sometimes they want me to get out of the seats.”

Class and Disability

This study compared the treatment of people with disabilities with the treatment of the poor, with the following results:

CLASS AND DISABILITY	N° of cases	Percentage %
People with disabilities are treated in the same way as poor people	62	61%
People with disabilities are treated better than poor people	15	15%
People with disabilities are treated worse than poor people	7	7%
Total	84	100%

Most poor people are treated the same way as people with disabilities, meaning that they are also discriminated against and excluded from all aspects that have been studied up to now.

“Poor people are also mistreated badly, with discrimination. I think that that is the right word, discrimination.”

Ethnicity and Disability

Different ethnic cultures in Bolivia are affected by internal discrimination as a result of the customs and traditions of each one and intolerance towards others.

ETHNICITY AND DISABILITY	N° of cases	Percentage %
People with disabilities are treated in the same way as people belonging to other groups	58	57%
People with disabilities are treated better than people belonging to other groups	12	12%
People with disabilities are treated worse than people belonging to other groups	16	16%
Total	86	100%

“People in the countryside and in small towns also suffer because they are treated badly.”

The results show that 57% of interviewees think that people with disabilities are treated the same as people belonging to another ethnic group, meaning they are equally treated with discrimination and exclusion in particular aspects of daily life.

“In the first place the Aymara and Spanish languages do not get along and sometimes people look down on it and say sometimes that they are Indians or peasants and they discriminate against them.”

Gender and Disability

In our Latin American society, considered to be macho, Bolivian women have achieved very important goals and spaces in society, including the right to be elected to positions of power, better-paying jobs, etc.

GENDER AND DISABILITY	N° of cases	Percentage %
People with disabilities are treated in the same way as women	36	35%
People with disabilities are treated better than women	14	14%
People with disabilities are treated worse than women	30	29%
Total	80	100%

“Also, but very little now because now women have shown that they should be treated equally to men with respect to gender but there is discrimination above all amongst the old people, the older people.”

However, despite this the current study shows that 35% of women are discriminated against, not respected, and are treated in the same way as people with disabilities.”

“To date there are very few women that are respected, for example the people that work in cleaning, housework, of course not all, now there is a law that helps them, they have raised their salaries.”

People Without Disabilities

PEOPLE WITHOUT DISABILITIES	N° of Cases	Percentage %
People with disabilities are treated in the same way as people without disabilities	29	28%
People with disabilities are treated better than people without disabilities	7	7%
People with disabilities are treated worse than normal people	53	52%
Total	89	100%

According to this study, 52% of people with disabilities feel that they are treated worse than people without disabilities, because they have low self-esteem and they feel vulnerable demanding the same rights as all human beings.

“They (people without disabilities) are treated better because they are normal, they can get together, they can dance, they can drink, and someone with disabilities cannot socialize with a normal person and that is why they ignore the person.”

“They (people without disabilities) can survive and look out for themselves differently, because we need a lot it is true that if we had support we would also know how to value ourselves but there are a lot of people that do not know how to value themselves that don’t have the ability in their disability and they have a difficult time but not me.”

Twenty-eight percent of people with disabilities assert that they are treated the same as a person without disabilities, enjoying equality in their social environment, while only 7% are treated better than a person without disabilities, for diverse reasons, including economic, social, and cultural factors.

“I think it depends on the place and the social setting you live in, where people are educated or also how people themselves have been treated there are no people that treat people badly, there are people that have everything and treat people badly, just like “normal” people that treat others badly who have everything.”

“Because if you are missing a leg or a finger, you are a lesser human being, in our country we are all still in diapers in other countries no, it is a lack of will to move forward.”

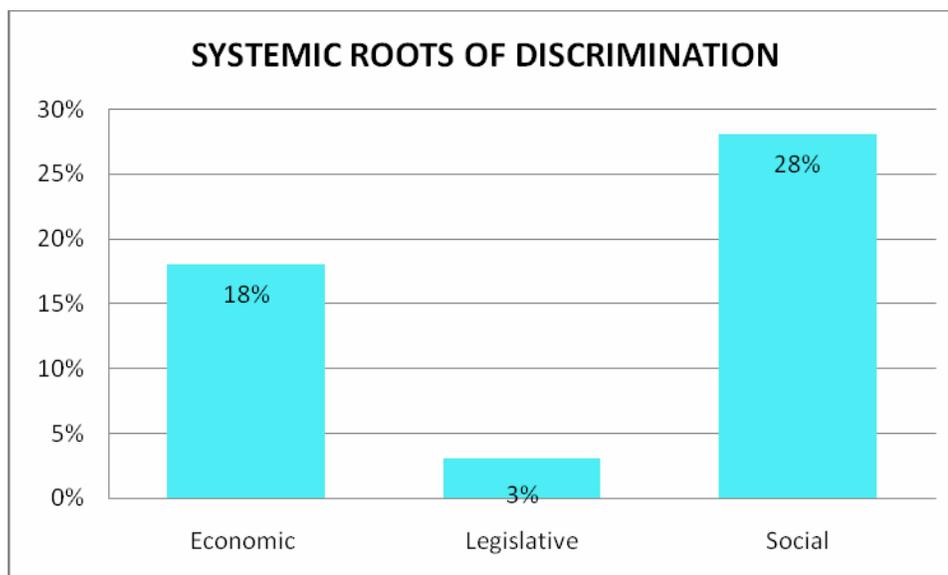
Systemic Roots of Discrimination.-

There are numerous roots of discrimination; however, in this study three principal aspects were considered:

Systemic Roots	N° of Cases	Percentage %
Economic	18	18%
Legislative	3	3%
Social	29	28%
Total	50	100%

Consulting people with disabilities about the roots or causes of discrimination indicated that the majority (28%) think that the main root of discrimination is social, including the family and society’s way of thinking about and seeing disability, as one of the interviewees describes:

“The lack of solidarity, the loss of Christian moral principles, because if people showed a little more solidarity, maybe our lives would be a little easier.”



Eighteen percent agree that the economic factor is a strong root of discrimination, because several people with disabilities were discriminated against and excluded because they did not have the resources necessary to access certain services, including health, justice, education, transportation, etc.

ROOTS	Sex = Male	Sex = Female
1 : ECONOMIC	13	5
2 : LEGISLATIVE	3	0
3 : SOCIAL	19	10

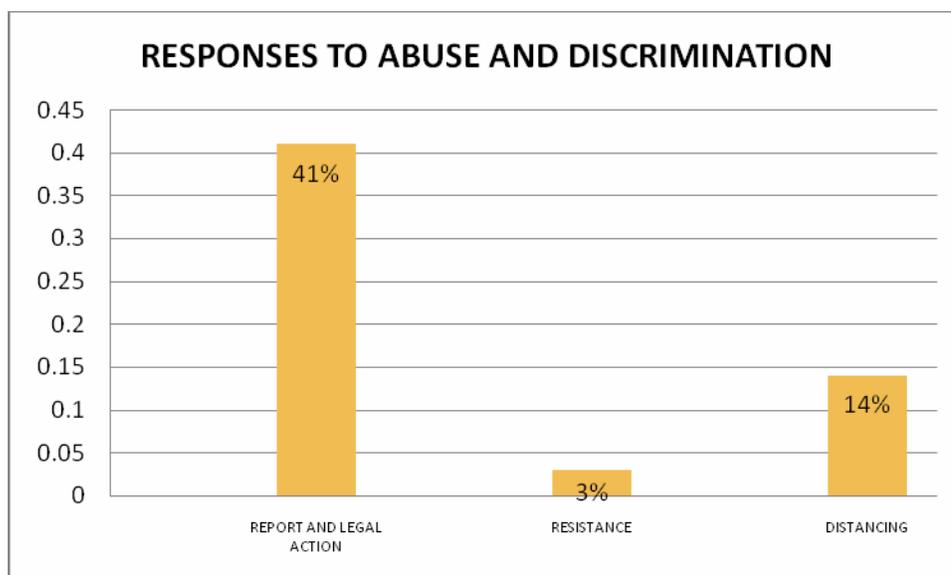
Responses to Abuse and Discrimination

RESPONSES TO ABUSE AND DISCRIMINATION	N° of Cases	Percentage %
Chooses to report and complain about the situation	42	41%
Chooses to return to the situation to try to change it	3	3%
Avoids and seeks distance from the discrimination experience	14	14%
Other ways of responding to abuse and discrimination	0	0%
Total	59	100%

As an answer to abuse and discrimination, 41% of people with disabilities choose to report and complain about the situation, yet it is important to note that the majority of these reports are made to family members and friends who do not take any action with respect to the problem.

“Yes, I talk to my family, my mother-in-law, my priest, about getting divorced, the problems that I had with my ex-husband, and quite a few deaf friends, two in particular that I trust, since in the deaf community there is a lot of gossip.”

“The truth is that I told my brother.”



Another significant percentage, 14%, chooses not to tell anybody, and prefers to take distance from the situation to avoid possible problems that denouncing the problem could bring.

“Not to anyone because I did not want any more problems.”

“No, I didn’t know where and if I did they wouldn’t have listened to me.”

Reasons for Not Reporting

Reasons for not reporting discrimination include:

REASONS FOR NOT DENOUNCING	N° of Cases	Percentage %
Not trusting authorities	12	12%
Feelings of shame and inferiority.	4	4%
Thinking that the authorities need to be bribed	1	1%
Lack of access to justice	3	3%
Lack of economic resources	2	2%
Fear of the consequences	6	6%
Other reasons	7	7%
Total	35	

The non-enforcement of laws and the lack of support from authorities for people with disabilities are the reasons for which 12% choose not to report acts of discrimination and abuse, because they are convinced that legal action will not have any effect.

“Because I think they won’t listen to me, they don’t care, they are not interested in what happens to the people around them and I know that here it is like a jungle; the strong survive and the weak have to die, I honestly haven’t told anyone.

“No, because they will not listen to us, at least the authorities will not listen to us if we say something.

Six percent do not report because they think that the possible consequences could be worse than the problem and that it would not be to their benefit.

“Well, maybe they will not believe me or maybe just maybe the doctors could make a complaint against me.”

Low self-esteem and feelings of inferiority and shame make 11% choose not to report the acts of discrimination they have experienced.

“So that they won’t make fun of me.”

“Because it is in vain, it would be nice to speak sometimes it is embarrassing, sometimes even they discriminate against you, the ombudsperson never bothers with us.

4.3.2 Cross-Sectional Analysis

Below we present comparisons between human rights implications and participant attributes (sex, age, region, and type of disability).

ACCESS TO JUSTICE	AGE					SEX	
	Below 18 y. old	18 - 25	26 - 35	36 - 50	Over 50	Male	Female
1 : Respect	0	0	0	0	0	0	0
2 : Self-determination	0	0	0	0	2	2	0
3 : Lack of autonomy	0	1	1	2	0	4	0
4 : Lack of Dignity	0	1	1	2	0	4	0
5 : Dignity	0	0	0	0	0	0	0
6 : Discrimination and Inequality	0	0	2	5	3	8	2
7 : Non-discrimination and Equality	0	0	0	0	0	0	0
8 : Exclusion and Lack of Accessibility	0	1	5	8	4	10	8
9 : Inclusion and Accessibility	0	0	1	1	0	2	0
10 : Lack of Respect	0	1	2	2	2	6	1

ACCESS TO JUSTICE	TYPE OF IMPAIRMENT				
	Mobility	Sensory - Blind	Sensory - Deaf	Mental	Intellectual
1 : Respect	0	0	0	0	0
2 : Self-determination	2	0	0	0	0
3 : Lack of autonomy	4	0	0	0	0
4 : Lack of Dignity	4	0	0	0	0
5 : Dignity	0	0	0	0	0
6 : Discrimination and Inequality	10	0	0	0	0
7 : Non-discrimination and Equality	0	0	0	0	0
8 : Exclusion and Lack of Accessibility	11	4	3	0	0
9 : Inclusion and Accessibility	2	0	0	0	0
10 : Lack of Respect	6	0	1	0	0

The largest group of people that do not have access to justice is of males between 36 and 50 years of age, who report not feeling respected by authorities. There is also a significant percentage of people with physical disabilities that are excluded and not treated equally.

EDUCATION	AGE					SEX	
	Less than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Less than 50	Male	Female
1 : Lack of autonomy	0	2	6	1	0	5	4
2 : Self-determination	0	0	3	0	1	2	2
3 : Lack of Dignity	0	1	2	1	1	3	2
4 : Dignity	0	1	0	0	0	0	1
5 : Discrimination and Inequality	0	1	9	2	0	7	5
6 : Non-discrimination and Equality	0	1	1	0	0	2	0
7 : Exclusion and lack of accessibility	1	2	9	11	4	15	12
8 : Inclusion and Accessibility	0	1	6	3	1	6	5
9 : Lack of Respect	0	2	3	0	1	5	1
10 : Respect	0	1	2	0	0	2	1

EDUCATION	TYPE OF IMPAIRMENT				
	Mobility	Sensory - Blind	Sensory - Deaf	Mental	Intellectual
1 : Lack of autonomy	5	2	2	0	0
2 : Self-determination	3	0	0	1	0
3 : Lack of Dignity	4	0	1	0	0
4 : Dignity	0	1	0	0	0
5 : Discrimination and Inequality	10	2	0	0	0
6 : Non-discrimination and Equality	1	1	0	0	0
7 : Exclusion and lack of accessibility	18	2	5	1	1
8 : Inclusion and Accessibility	7	2	1	1	0
9 : Lack of Respect	4	1	1	0	0
10 : Respect	2	0	0	1	0

As is evident from the tables above, it is generally males who do not have access to education. As in the previous case, it is people with physical disabilities who have less access to the education system, whether it is formal or higher education.

INFORMATION AND COMMUNICATION	AGE					SEX	
	Less than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Older than 50	Male	Female
1 : Lack of autonomy	0	0	1	1	0	2	0
2 : Self-determination	0	0	0	1	0	1	0
3 : Lack of Dignity	0	0	1	1	0	2	0
4 : Dignity	0	0	0	0	0	0	0
5 : Discrimination and Inequality	0	0	0	0	0	0	0
6 : Non-discrimination and Equality	0	0	0	1	0	0	1
7 : Exclusion and lack of accessibility	0	0	5	9	3	10	7
8 : Inclusion and Accessibility	0	1	1	3	2	6	1
9 : Lack of Respect	0	0	0	0	0	0	0
10 : Respect	0	0	0	0	0	0	0

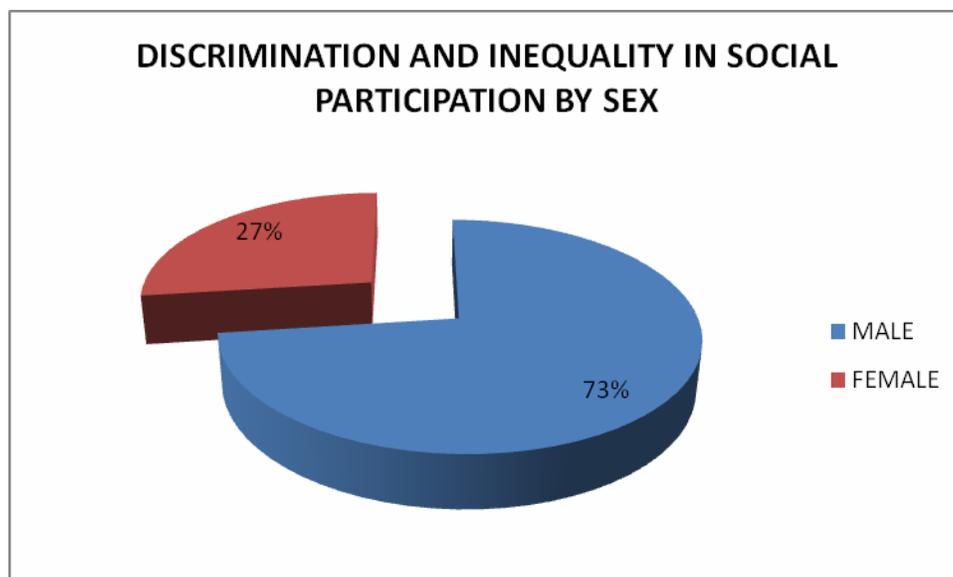
INFORMATION AND COMMUNICATION	TYPE OF IMPAIRMENT				
	Mobility	Sensorial - Blind	Sensorial - Deaf	Mental	Intellectual
1 : Lack of autonomy	1	1	0	0	0
2 : Self-determination	1	0	0	0	0
3 : Lack of Dignity	1	1	0	0	0
4 : Dignity	0	0	0	0	0
5 : Discrimination and Inequality	0	0	0	0	0
6 : Non-discrimination and Equality	0	0	1	0	0
7 : Exclusion and lack of accessibility	8	4	5	0	0
8 : Inclusion and Accessibility	4	1	2	0	0
9 : Lack of Respect	0	0	0	0	0
10 : Respect	0	0	0	0	0

Males from 36-50 years of age have a higher percentage of isolation and lack of accessibility to information and communication. This is because more men were interviewed than women, and because men participate less due to employment reasons, thus they are more excluded from information and communication systems.

SOCIAL PARTICIPATION	AGE					SEX	
	Older than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Older than 50	Male	Female
1 : Lack of autonomy	0	2	7	13	1	13	10
2 : Self-determination	0	0	8	7	3	12	6
3 : Lack of Dignity	0	3	12	20	3	23	15
4 : Dignity	0	0	4	6	2	9	3
5 : Discrimination and Inequality	0	3	13	13	6	23	13
6 : Non-discrimination and Equality	0	0	0	5	1	3	3
7 : Exclusion and lack of accessibility	1	2	14	22	5	31	14
8 : Inclusion and Accessibility	0	4	9	12	6	24	8
9 : Lack of Respect	1	2	8	20	4	25	10
10 : Respect	0	0	3	6	2	9	2

The group most vulnerable to isolation and to not participating fully in social, recreational and cultural activities are males between 36 and 50 years of age. This same group is not respected and valued in their social environment, because they are considered a burden for society, and in order not to deal with them they prefer to push them to the sidelines.

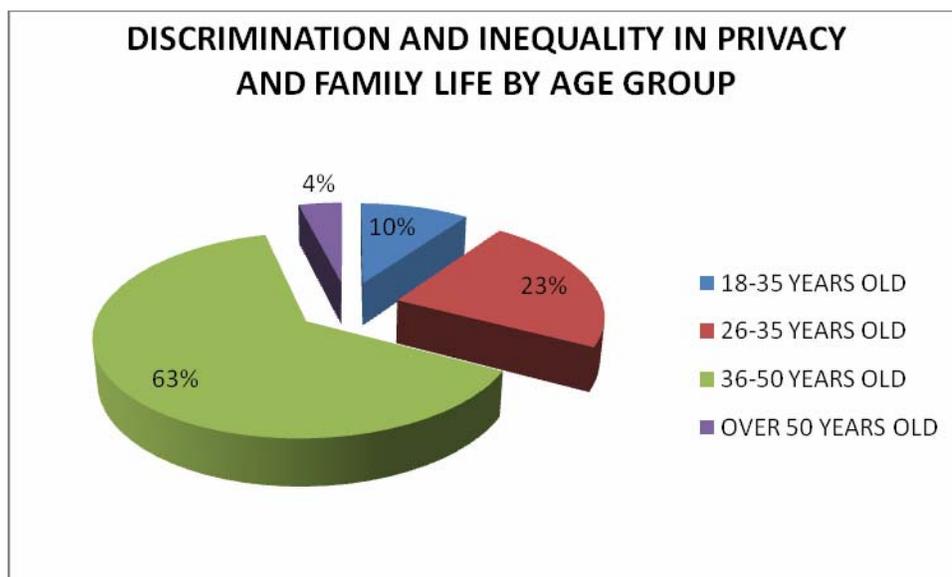
In general, and in all age groups, more males feel excluded and treated unequally in the social sphere, keeping in mind of course the margin of error that may be present in the unequal distribution of the sexes.



PRIVACY AND FAMILY LIFE	AGE					SEX	
	Less than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Older than 50	Male	Female
1 : Lack of autonomy	0	1	4	7	0	7	5
2 : Self-determination	0	2	6	8	1	8	10
3 : Lack of Dignity	1	3	9	15	3	17	21
4 : Dignity	0	0	1	3	0	3	2
5 : Discrimination and Inequality	0	4	6	10	2	13	15
6 : Non-discrimination and Equality	0	1	1	0	0	2	2
7 : Exclusion and lack of accessibility	0	3	12	17	6	23	25
8 : Inclusion and Accessibility	1	1	9	13	6	15	23
9 : Lack of Respect	1	4	8	9	0	13	12
10 : Respect	0	1	2	7	2	8	8

Women between 36 and 50 years of age are the group most isolated and excluded from their family environments. In most of the cases studied, it is because the women have been abandoned by their partners and they have to raise their children by themselves.

Similar results were obtained (12 females and 13 males) in which the interviewees said that they are not respected by their families, in many cases due to selfishness and the lack of patience of family members with respect to their relatives with disabilities.



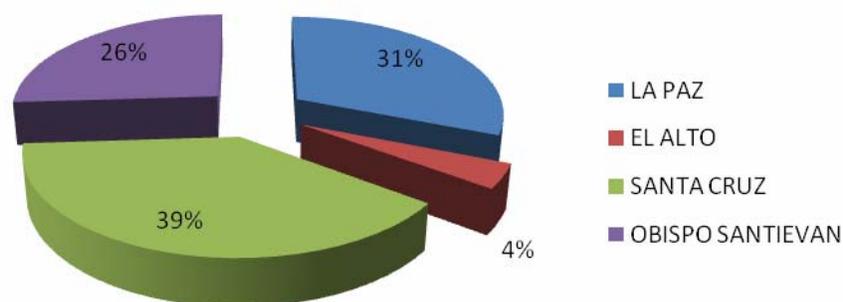
PRIVACY AND FAMILY LIFE	TYPE OF IMPAIRMENT				
	Mobility	Sensorial - Blind	Sensorial - Deaf	Mental	Intellectual
1 : Lack of autonomy	4	3	0	0	1
2 : Self-determination	3	4	0	0	0
3 : Lack of Dignity	7	3	0	1	1
4 : Dignity	2	0	0	0	1
5 : Discrimination and Inequality	3	4	0	0	1
6 : Non-discrimination and Equality	0	0	0	0	0
7 : Exclusion and lack of accessibility	8	4	0	1	2
8 : Inclusion and Accessibility	2	4	0	1	1
9 : Lack of Respect	6	4	0	0	0
10 : Respect	2	2	0	0	0

People with physical disabilities have the greatest difficulties in accessibility, participation, and respect within the family, due to their need for space and greater levels of care.

HEALTH AND REHABILITATION	AGE					SEX	
	Less than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Older than 50	Male	Female
1 : Lack of autonomy	0	0	3	3	0	3	3
2 : Self-determination	0	0	1	2	0	2	1
3 : Lack of Dignity	0	0	2	4	0	4	2
4 : Dignity	0	0	1	1	0	1	1
5 : Discrimination and Inequality	1	0	6	7	1	10	5
6 : Non-discrimination and Equality	0	0	0	0	0	0	0
7 : Exclusion and lack of accessibility	1	2	5	12	3	15	8
8 : Inclusion and Accessibility	0	0	4	2	5	5	6
9 : Lack of Respect	0	0	4	3	0	3	4
10 : Respect	0	0	1	0	0	0	1

With respect to health and rehabilitation, 35% of males do not have medical care, while a similar percentage (25%) is found in women. The reasons are similar; they are isolated and excluded from health and rehabilitation services mainly due to physical disabilities (wheelchairs, crutches, etc.) and for economic reasons.

DISCRIMINATION AND INEQUALITY IN HEALTH, HABILITATION AND REHABILITATION BY REGION



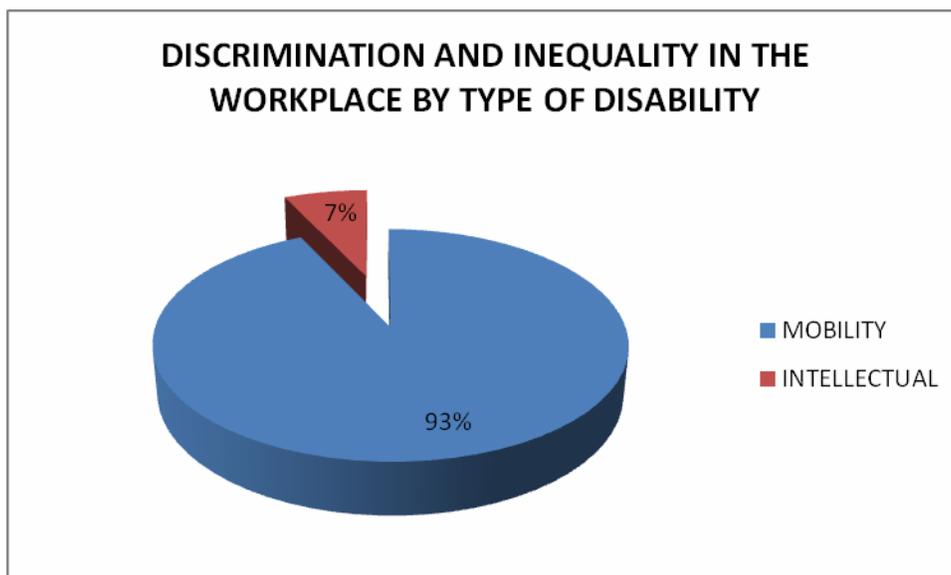
HEALTH AND REHABILITATION	TYPE OF IMPAIRMENT				
	Mobility	Sensorial - Blind	Sensorial - Deaf	Mental	Intellectual
1 : Lack of autonomy	5	1	0	0	0
2 : Self-determination	3	0	0	0	0
3 : Lack of Dignity	5	1	0	0	0
4 : Dignity	2	0	0	0	0
5 : Discrimination and Inequality	12	2	1	0	0
6 : Non-discrimination and Equality	0	0	0	0	0
7 : Exclusion and lack of accessibility	21	1	0	0	1
8 : Inclusion and Accessibility	11	0	0	0	0
9 : Lack of Respect	6	1	0	0	0
10 : Respect	0	0	1	0	0

INCOME SECURITY AND ASSISTANCE SERVICES	AGE					SEX	
	Less than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Older than 50	Male	Female
1 : Lack of autonomy	0	0	0	0	0	0	0
2 : Self-determination	0	0	0	0	0	0	0
3 : Lack of Dignity	0	0	1	0	0	1	0
4 : Dignity	0	0	0	0	0	0	0
5 : Discrimination and Inequality	0	0	1	1	0	2	0
6 : Non-discrimination and Equality	0	0	0	0	0	0	0
7 : Exclusion and lack of accessibility	0	2	2	9	1	9	5
8 : Inclusion and Accessibility	0	2	1	4	2	8	1
9 : Lack of Respect	0	0	1	0	0	1	0
10 : Respect	1	0	0	0	0	0	1

INCOME SECURITY AND ASSISTANCE SERVICES	TYPE OF IMPAIRMENT				
	Mobility	Sensorial - Blind	Sensorial - Deaf	Mental	Intellectual
1 : Lack of autonomy	0	0	0	0	0
2 : Self-determination	0	0	0	0	0
3 : Lack of Dignity	1	0	0	0	0
4 : Dignity	0	0	0	0	0
5 : Discrimination and Inequality	2	0	0	0	0
6 : Non-discrimination and Equality	0	0	0	0	0
7 : Exclusion and lack of accessibility	11	2	1	0	0
8 : Inclusion and Accessibility	7	2	0	0	0
9 : Lack of Respect	1	0	0	0	0
10 : Respect	1	0	0	0	0

Isolation and lack of accessibility to social protection programs is experienced by more men with physical disabilities (43%) (wheelchair, crutches, etc.); this marginalization is due to discrimination by program staff and also due to a lack of information about the existence of such programs, which do not disseminate information about their services to the people who would benefit from them.

WORK	AGE					SEX	
	Less than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Older than 50	Male	Female
1 : Lack of autonomy	0	2	1	7	1	8	3
2 : Self-determination	0	0	3	6	3	9	4
3 : Lack of Dignity	0	0	3	11	4	12	6
4 : Dignity	0	0	1	2	0	2	1
5 : Discrimination and Inequality	0	0	5	5	4	11	3
6 : Non-discrimination and Equality	0	0	1	2	0	1	2
7 : Exclusion and lack of accessibility	0	0	7	18	4	21	8
8 : Inclusion and Accessibility	0	0	2	4	5	9	3
9 : Lack of Respect	0	2	2	6	2	9	4
10 : Respect	0	0	3	5	1	6	3

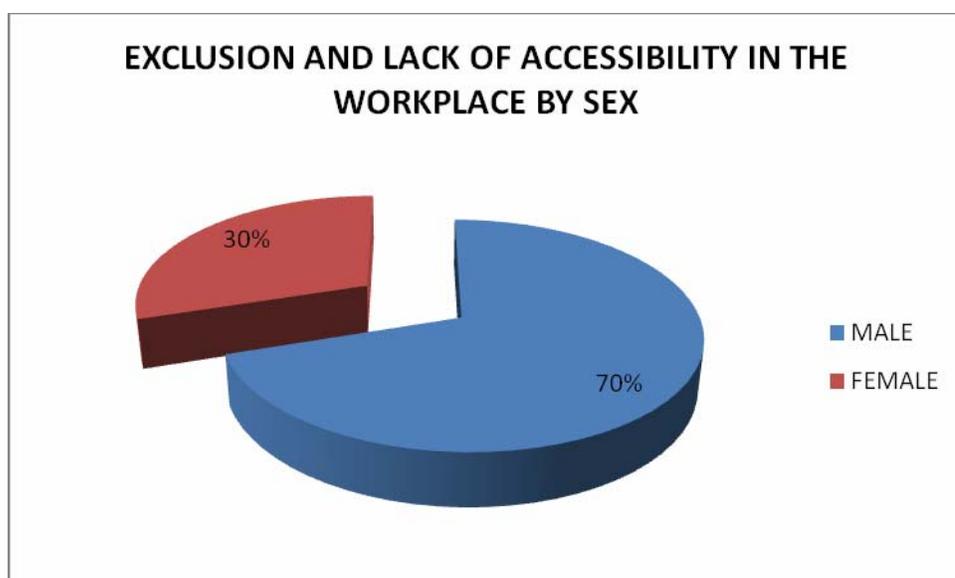


Work is another field in which people with disabilities feel discriminated. Overall, in the work section of this study, the percentages are higher for men (taking into account, of course, the margin of error). Twenty-four per cent of men do not have access to employment and 22% of women suffer the same problem.

The main reason for discrimination comes from employers. However, when they have the opportunity to work, 14% of men do not feel respected at work and 16% of women, who receive

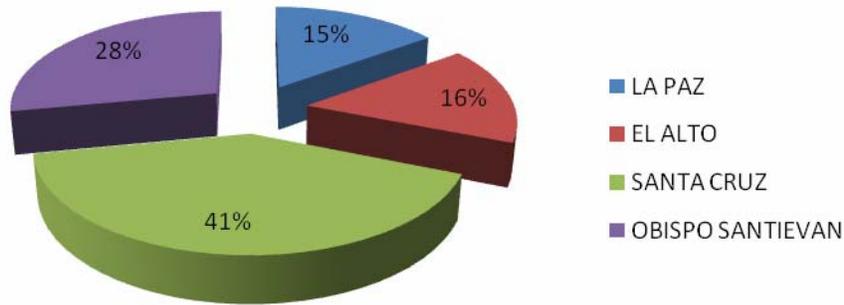
better treatment from their employers and colleagues. People with physical disabilities (wheelchairs, crutches, etc) experience the greatest accessibility difficulties in the workplace.

WORK	TYPE OF IMPAIRMENT				
	Mobility	Sensorial - Blind	Sensorial - Deaf	Mental	Intellectual
1 : Lack of autonomy	5	0	5	1	0
2 : Self-determination	9	0	3	0	1
3 : Lack of Dignity	12	2	4	0	0
4 : Dignity	0	1	2	0	0
5 : Discrimination and Inequality	13	0	0	0	1
6 : Non-discrimination and Equality	1	0	2	0	0
7 : Exclusion and lack of accessibility	20	2	6	0	1
8 : Inclusion and Accessibility	4	3	3	1	1
9 : Lack of Respect	5	2	4	0	2
10 : Respect	3	1	4	1	0



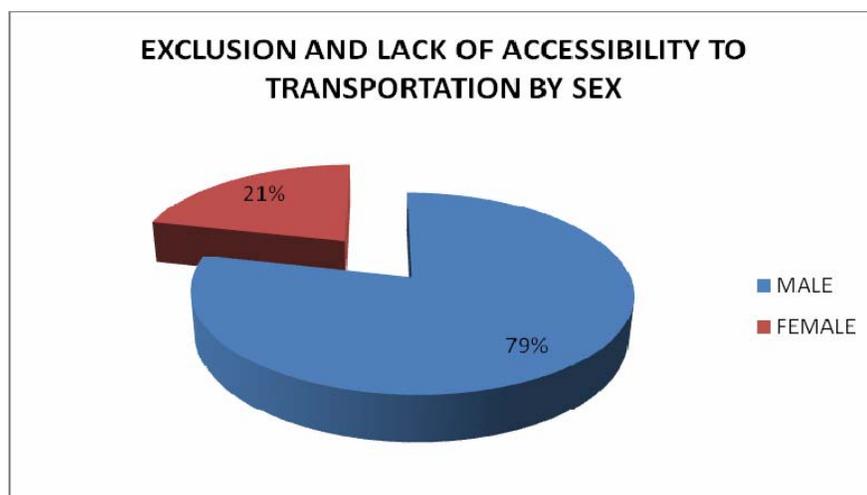
The area with greatest isolation and lack of employment opportunities for a person with disabilities is the city of La Paz, due to the type of terrain and the geographical location (altitude, cobblestone streets, steep hills).

EXCLUSION AND LACK OF ACCESSIBILITY TO TRANSPORTATION BY REGION



TRANSPORTATION	AGE					SEX	
	Less than 18 years	From 18 to 25	From 26 to 35	From 36 to 50	Older than 50	Male	Female
1 : Lack of autonomy	0	1	2	4	1	6	2
2 : Self-determination	0	1	1	4	0	5	1
3 : Lack of Dignity	0	2	4	4	1	8	3
4 : Dignity	0	0	0	0	0	0	0
5 : Discrimination and Inequality	0	1	5	7	1	11	3
6 : Non-discrimination and Equality	0	0	0	1	0	1	0
7 : Exclusion and lack of accessibility	0	3	12	10	1	22	4
8 : Inclusion and Accessibility	0	0	0	0	0	0	0
9 : Lack of Respect	0	1	5	5	2	10	3
10 : Respect	0	0	0	0	0	0	0

The lack of accessibility to transportation is striking, especially for males, with 35% that cannot access public or private transportation services. Fewer women lack access to such services (25%), because vehicle operators are more tolerant towards them.



TRANSPORTATION	TYPE OF IMPAIRMENT				
	Mobility	Sensorial - Blind	Sensorial - Deaf	Mental	Intellectual
1 : Lack of autonomy	8	0	0	0	0
2 : Self-determination	5	1	0	0	0
3 : Lack of Dignity	11	0	0	0	0
4 : Dignity	0	0	0	0	0
5 : Discrimination and Inequality	13	1	0	0	0
6 : Non-discrimination and Equality	1	0	0	0	0
7 : Exclusion and lack of accessibility	19	5	1	0	1
8 : Inclusion and Accessibility	0	0	0	0	0
9 : Lack of Respect	10	2	1	0	0
10 : Respect	0	0	0	0	0

People with physical disabilities (using wheelchairs, crutches, etc.) are most excluded from access to transportation services, because of no access to transportation, because they have the greatest problems getting into a car or boarding a bus (public transit), especially those who use wheelchairs who need assistance and time, which operators are not willing to offer. Since they cannot access public transit, they have to use private means of transportation (taxis), which implies increased expenses.

Recommendations from Interviewees

The following table outlines a series of recommendations suggested by people with disabilities interviewed for this study. The recommendations are intended to improve their treatment in society and to put an end to such discrimination and exclusion.

RECOMMENDATIONS	Number of Cases	Percentage %
Parental Support	8	6%
Economic Support	15	11%
Social Support	24	18%
Create awareness	24	18%
Legislation	34	25%
Political Representation	6	4%
Respect	13	10%
Other	11	8%
Total	135	

Twenty-five per cent of people with disabilities say that it is necessary to enforce and implement the laws that guarantee their rights and conditions of equality.

“For example, the person with disabilities that suffers discrimination... whether the people who mistreat the person with disabilities are authorities or members of society, they should be legally charged according to the penal code, because we have the right to live just like any normal person... This would be respecting our rights.”

“We should get together and demonstrate, or there should be a decree or a code of conduct to ensure that we are treated well, by law, our rights should be recognized.”

Creating awareness in the population is a recommendation suggested by 18% of the people with disabilities interviewed in this study, with the objective of reducing societal abuse and discrimination towards them:

“We need to open people’s minds and tell them that people with disabilities can do many more things than, if we have more potential than, quote, common people”.

“Inform people, be sociable, more communication. Above all, so that family members will accept a person with disabilities in their family.”

4.4 Conclusions

In general, people with disabilities suffer constant abuse and exclusion. Just like other vulnerable groups, they are not free of barriers and they face multiple forms of discrimination as a result of their disabilities.

People with disabilities seem to be more excluded and isolated in family and social settings than in other spheres. In fact, more than 50% of people with disabilities reported having felt discriminated against in their social and family environments and being unable to actively participate in these spheres.

There are many obstacles and barriers in education and work, especially for those with physical impairments (wheelchair-users), who face greater work-related discrimination and exclusion. These problems create the need to enter the informal labour market with low wages and a poor quality of life.

Standard of living

Protection services, social assistance and health care in most cases are neither directed nor supervised by the state. As a consequence, people with disabilities are limited economically and isolated from accessing such services.

It is important to note that the public centres of provision of these services are the main sites of exclusion and discrimination against people with disabilities.

In the street, when using public transportation or public facilities, people with disabilities are more exposed to abuse and discrimination. People with physical disabilities are the most vulnerable group, as they are not respected and receive poor treatment in all means of transportation.

There is a lack of information in Bolivian society about how to treat people with disabilities and many are insensitive and take advantage of their disabilities to exclude them and not respect them for their differences.

In terms of responding to abuse and discrimination, people with disabilities do not report such situations out of fear of the possible consequences. In fact, the people with disabilities that decided to report instances of abuse and discrimination were neither taken into account nor compensated for the ill-treatment they suffered, despite the existence of Law 1678 which protects them.

Based on their experiences of discrimination and oppression, the majority of the people with disabilities interviewed in this study recommended the application of existing legislation to address and put an end to the discrimination and abuse they face, in addition to the creation and implementation of new laws that would ensure equal rights. Many interviewees also suggested creating awareness in the population in order to receive better treatment and be socially respected.

Chapter 5. Conclusions and Recommendations

Based on the results mentioned above, the majority of people with disabilities interviewed (almost all) suffer discrimination, exclusion, isolation and inequality in all spheres of society (family, education, health care, employment, etc.).

The following recommendations are presented to meet this need:

5.1 Immediate Applications of Results

As specific conclusions for immediate application, the current monitoring study will be useful for us to:

- ✓ Have statistical data that will allow us to design projects to apply for funding.
- ✓ Disseminate the results obtained to raise awareness and present the issue to society.
- ✓ Have statistical information that will integrate the sector and strengthen the institution.
- ✓ Develop prevention programs and strategies against discrimination.
- ✓ Develop strategies to include the demands in the P.O.A. of city governments and prefectures.
- ✓ Design health projects, programs and new employment initiatives.

5.2. Recommendations for Plan of Action

Taking into account the results obtained from the field research and based on the study's conclusions, it is clear that it is necessary to promote human rights equality and the social inclusion of people with disabilities, to meet their needs and assist them in their economic and socio-cultural development.

Raising awareness about the proper treatment of people with disabilities among the Bolivian population is a task that must be taken on directly by the government through the Ministry of Education, so that respect for differences begins right from childhood, in addition to planning and promoting strategies that will inform society about the rights of people with disabilities.

Also advisable is the inclusion of social policies that respond to their needs through governmental and related organizations. These include the inclusion of people with disabilities in social protection and human development programs, and the active participation of people with disabilities in their social environment, in addition to the development of laws and national policies that ensure their rights.

D.R.P.I. TEAM – BOLIVIA

Project Coordinator

- ✓ Mr. Jaime Estívariz Bustillo

Project Sponsors / Technical Support

- ✓ Mr. Jaime Estívariz, President, Bolivian Confederation of Persons with Disabilities (C.O.B.O.P.D.I.)
- ✓ F.E.C.R.U.P.D.I., Santa Cruz Federation of Persons with Disabilities
- ✓ F.E.D.E.P.D.I., Departmental Federation of Persons with Disabilities (La Paz)
- ✓ Dr Marcia Rioux, Canada, Co-Director and Principal Investigator, Disability Rights Promotion International (D.R.P.I.)
- ✓ Dr Bengt Lindquist, Sweden, Co-Director and Principal Investigator, Disability Rights Promotion International (D.R.P.I.)

Analysis and Research Team – Bolivia

- ✓ Andrea Atipobo Solano, Social Communications
- ✓ María Eugenia García Peña, Social Worker
- ✓ Adriana Velásquez, Social Worker

Additional Technical Support

- ✓ Rita Samson, Project Coordinator, D.R.P.I.
- ✓ Paula Pinto, Doctoral Candidate (Sociology), York University, D.R.P.I. Consultant.

Monitoring Teams

SANTA CRUZ

Site Coordinators

- ✓ Lucio Temo Rodríguez
- ✓ Mario Torrico Canaviri

Monitors

- | | |
|-------------------------------|--------------------------|
| ✓ Marco Antonio Alemán Quispe | ✓ Armando Escobar Lino |
| ✓ Juan Espinoza García | ✓ Sandra Borja Calderón |
| ✓ Carlos Loli Cortez Vásquez | ✓ Sheila Arteaga Juárez |
| ✓ Shilem Zulema Suca Argote | ✓ Elizabeth Cáceres Impa |

LA PAZ

Site Coordinators

- ✓ Teclo Gonzales Puquimia
- ✓ Alfonso Huarecallo Gonzales

Monitors

- | | |
|--------------------------------|-------------------------------|
| ✓ Julio David Rodríguez Ch. | ✓ Sonia Francisca Mujica M. |
| ✓ Daniel Pozo Durán | ✓ Felipe Laura Alí |
| ✓ Lukas Fernández Flores | ✓ Eusebia Gladys Vargas Laura |
| ✓ Flora Virginia Siñani Mamani | ✓ Gladis Quispe |

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