Improved Access and Participation for Persons with Disabilities in Local Governance

Abstract
The disability agenda has only gained adequate attention in the public administration discourse after the United Nations (UN) Convention on the Rights of PWDs (CRPD) was enacted on 13 December 2006, followed by the launching of the Sustainable Development Goals (SDGs) in 2015 which included Goal No. 3 on Good Health and Well Being, and Goal No. 10 on Reduced Inequalities. In the Philippines, Republic Act 7277 known as the Magna Carta for Disabled Persons and Republic Act 10070 which provided for the creation of Persons with Disabilities Affairs Office (PDAO) in local government units are among the laws currently governing disability affairs matters. This paper looks into the status of the implementation of RA 10070 in the Provincial Government of Camarines Norte, Philippines. The researcher used qualitative methodology including key informants’ interview, focus group discussion case analysis and documentary analysis. The paper ends by the establishment of a framework, the Disability-Inclusive Theory or ACCESS Theory, that discusses the conditions and elements affecting the formulation of policies and enactment of local laws that provide access and other means to eventually empower PWDs and enable them to become more active participants in their respective communities.

Keywords:
disability; governance; inclusion; PDAO

Introduction
The rights of People With Disability (PWD) first gained official recognition and inclusion in Philippine government policy making by way of Presidential Decree No. 1509 which created the National Commission Concerning Disabled Persons (NCCDP) issued by President Ferdinand E. Marcos on June 11, 1978. This was followed by the passage of Batas Pambansa Bilang 344 – An Act to Enhance the Mobility of Disabled Persons by Requiring Certain Buildings, Institutions, Establishments and Public Utilities to Install Facilities and Other Devices on December 7, 1982 and approved by President Ferdinand Marcos on February 25, 1983. These
were among the first laws passed specifically addressing the rights of PWDs, albeit BP 344 was limited in the sense that it was only directed to accessibility issues for those with physical disabilities. However, Kwai-sang Yau and McKercher aver that the elimination of physical barriers to access may only address part of the issue. Appropriate enabling environments and individual empowerment are access points that are still needed (Kwai-sang Yau and McKercher, 2004). Following Presidential Decree No. 1509 and BP 344, national laws, Administrative and Executive Orders, Circulars and Presidential Proclamations which directly or indirectly govern such rights of PWDs have been enacted and passed. These numerous measures notwithstanding, including the Philippine Government’s commitment as a signatory of both the United Nations Convention on the Rights of Persons With Disability (CRPD) and its Optional Protocol, mainstreaming PWD rights in the policy making processes at both the national and local governments’ levels remain inadequate.

Phillips (1997) alluded that “becoming a citizen may not make much difference to one’s life. One disadvantaged group after another fought lengthy battles to be included on the list of people entitled to citizenship, only to find that social justice and equality still eluded them’.

**Understanding Disability**

Mitra (2006) contended that disability does not have a single definition (Mitra, 2006, p. 236), strengthened by the World Health Organization and World Bank (2011), in a joint report, averred that ‘defining disability is complicated as it is ‘complex, dynamic, multidimensional and contested’ (WHO & World Bank, 2011, p. 3). Furthermore, the UN Convention on the Rights of Persons with Disabilities (2007) defined disability as ‘... an evolving concept that results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others’. This definition is congruent to what was discussed WHO International Classification on Functioning, Disability and Health (2001), Figure 1, when it said that “disability refers to any restriction or lack of ability (resulting from impairment) to perform an activity in the manner or within the range considered normal for a human being.

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**Figure 1.**
**The ICF Model**

Health Condition

(disorder / disease)

Body Function

Structure (Impairment)

Activities

Limitation

Participation

Restriction

Environmental Factors

Personal Factors

WHO further averred that ‘disability refers to difficulties in any or all three (interconnected) areas of functioning:

- Impairments – problems in body functions or alterations in body structure
- Activity limitations – difficulties in executing activities
- Participation restriction – problem with involvement in any area of life’.

This leads us to a picture that the inability of a person with physical, psychological, psychiatric or other body disorder is not just caused by the body disorder itself but by external factors or conditions that limit a person’s ability in life. Oliver (1998) defined disability as a mere ‘socially constructed phenomenon, rather than solely an individual, physically-based tragedy’.

Francis and Silvers (2016) argued that disability must be seen from the perspective of biology, or as an anomaly in its functioning that places individual sat a disadvantage ‘but also, unless ameliorated or eliminated, detracts from social stability and species survival.’ Al Ju’beh (2017) argued that impairments are mostly irreversible, lifelong and can be supported by rehabilitation and habilitation; whereas causes of disability are reversible and can be addressed by identifying and removing barriers to participation be they attitudinal, social, political or economic. This was supported by Takamine (2004) when he said that it is recognized that the underlying cause of disability in the region is poverty and that over a half of causes are preventable.

Finally, in what can be the clearest illustration of the term disability, Wasserman, et. al. (2016) stated that the term covers such diverse conditions as the congenital absence or adventitious loss of a limb or a sensory function; progressive neurological conditions like multiple sclerosis; chronic diseases like arteriosclerosis; the inability or limited ability to perform such cognitive functions as remembering faces or calculating sums; and psychiatric disorders like schizophrenia and bipolar disorder.

PWD rights are, in fact, fundamental and inalienable human rights. But because of prevailing cultural viewpoints on disability, especially where the indisposition relates to behavior and/or learning ability, PWDs have been largely kept at home, their exact numbers unclear, unmindful of their rights and of the fact that they can be active members of the community. Regrettably, this is not phenomenon is not just occurring in the Province of Camarines Norte, or in the Philippines even. Scotch and Schriner (1997) wrote public debate has been going on for decades about the status and rights of people with disabilities and has been increasingly framed by the characterization of persons with disabilities as a minority group, a collectivity whose disadvantaged position in American society is based primarily on unfair discrimination.

As stated in the Handbook for Parliamentarians on the Convention on the Rights of Persons with Disabilities and its Optional Protocol: From Exclusion to Equality, the Office of the United Nations High Commissioner for Human Rights (OHCHR) reported that “In every region in the world, in every country in the world, persons with disabilities often live on the margins of society, deprived of some of life’s fundamental experiences. They have little hope of going to school, getting a job, having their own home, creating a family and raising their children, enjoying a social life or voting. For the vast majority of the world’s persons with disabilities, shops, public facilities and transport, and even information are largely out of reach” (Byrnes, 2007).

Camarines Norte is a second class province located in the eastern coast of Luzon facing the Pacific Ocean. It has a land area of 2,320.07 km² adjoining the provinces of Quezon and Camarines Sur. Twelve municipalities make up its two congressional districts. Agriculture and
fishery are among the main sources of livelihood in the province, with mining activities confined in the municipalities of Labo, Paracale and Jose Panganiban and tourism in the municipalities of Daet, Vinzons, Basud, Mercedes and Paracale. The Provincial Government of Camarines Norte (PGCN), with a workforce of six hundred sixty-five (665) regular employees serving the offices in the Provincial Capitol and in three hospitals, is currently under the administration of Governor Edgardo A. Tallado. Based on the 2010 Census of Population and Housing, the Philippine Statistical Authority (PSA) reported that the Province has a population of 542,915, roughly 10% of Bicol Region’s population or less than 1% (0.59%) of the 92,337,852 national population (PSA, 2015).

When the writer was still working in the Provincial Government, accessibility infrastructures as required by Batas Pambansa Bilang 344 known as “An Act to Enhance the Mobility of Disabled Persons by Requiring Certain Buildings, Institutions, Establishments and Public Utilities to install Facilities and Other Devices”, are still deficient, often non-existent, in most buildings and other areas for public use; Ms. Jardin (2019) informed the researcher that Special Education classes are present in only SEVEN (7) out of three hundred ten (310) public basic education schools or a dismal 2.2%, and local tertiary institutions offering degree courses and vocational programs still do not have both facilities and manpower to provide education to PWDs, this despite the passage of Republic Act No. 5250 which mandated a training program for teachers of special and exceptional children; the required 1% employment of PWDs in all government agencies and, as encouraged in private corporations following the provisions of Republic Act No. 7277 and 10524, remain unrealized; health facilities and practitioners that will address the special needs of PWDs like mental hospitals, physical and occupational rehabilitation and therapy centers, are still not in place.

Disquieting even was the absence of an updated and reliable official data on the actual number of PWDs in the province. This deficiency has a direct bearing to the delays in the policy making on and implementation of the rights of PWDs. The foregoing considered, it is evident that policy making in the Province of Camarines Norte was only partially disability-inclusive as a matter of practice.

On July 15, 2014, responding to the call of the Provincial Council on Disability Affairs made thru its lead convenor, Dr. Rex Bernardo, himself a PWD, the Sangguniang Panlalawigan of Camarines Norte enacted Provincial Ordinance No. 20-2014 titled “An Ordinance Organizing and Establishing the Camarines Norte Provincial Persons with Disability Affairs Office (CN-PDAO) in Accordance with the Provisions of Republic Act No. 7277, known as the Magna Carta for Persons with Disabilities, as Amended by Republic Act No. 10070, and Appropriating Funds Therefor”.

However, as previously stated, mainstreaming the rights of PWDs in all levels of policy making both in the government and private sectors remain inadequate. The researcher, fully convinced that the PWD sector is the largest marginalized group in the Province of Camarines Norte and elsewhere, and that work must be done to ensure that policy implementation is consistent with laws providing for their rights, conducted a study on this issue, particularly on the status of the operations of the PDAO in the province of Camarines Norte and the quality of the services it provides based on PDAO’s functions, with the end view of formulating a policy proposal that will address gaps in governance practices, particularly in the crafting of PPAs among the different offices and divisions in the Provincial Government of Camarines and to develop innovations in policies to promote full inclusion of PWDs in the operations of the Provincial Government. Barnes and Oliver (1995) however, argue that even a comprehensive legislative programme which establishes a suitable
framework for the enforcement of policies which ensure the integration of disabled people into the mainstream economic and social life of the community, and provides public confirmation that discrimination against disabled people for whatever reason is no longer acceptable. In other words, legislation which emphasizes civil rights rather than individual needs and focuses on the disabling society in which we live, and not upon individual disabled people (Barnes and Oliver, 1995). The same call for legislation has been echoed in Australia. There is a problem making the spirit of the documents tangible, because there are no overarching legal requirements obliging governments, individuals or agencies to provide specific services. Quite simply, what is a 'right' when it means nothing legally? (Young and Quibell, 2000).

Methods

This is a qualitative research which utilized the following methods: Key Informants’ Interview, Focus Group Discussion, Case Analysis and Documentary Analysis. Structured questions were prepared by the researcher in interviewing eight (8) individuals and the same questions were the main points during a focus group discussion which was conducted with members of the local disability council. The cases of seven (7) local government units on practices and/or programs for PWDs have been thoroughly analysed by the researcher. Lastly, papers discussing inclusion of disability rights and involving greater participation of PWDs in the over-all policy-making

Results and Discussion

The Local Government Code (LGC) of 1991 did not include among the mandated local government unit offices or departments the Persons With Disability Affairs Office, or PDAO. It was only on April 06, 2010, when then President Gloria Macapagal-Arroyo signed into law RA 10070-ESTABLISHING INSTITUTIONAL MECHANISM TO ENSURE THE IMPLEMENTATION OF PROGRAMS AND SERVICES FOR PERSONS WITH DISABILITIES IN EVERY PROVINCE, CITY AND MUNICIPALITY, AMENDING REPUBLIC ACT NO. 7277, OTHERWISE KNOWN AS THE MAGNA CARTA FOR DISABLED PERSONS, AS AMENDED, AND FOR OTHER PURPOSES, that the creation of the aforementioned office became mandatory.

Section 1 (b) (1) of the law reads that the PDAO must be established to "Formulate and

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Source: Provincial Disability Affairs Office Annual Accomplishment Report, 2018
implement policies, plans and programs for the promotion of the welfare of PWDs in coordination with concerned national and local government agencies;" and thereafter enumerated the functions of the PDAO which are all mainly focused on the promotion of the welfare of PWDs in their respective localities.

The Passage of the law notwithstanding, compliance to it remained low with most LGUs opting to prioritize the establishment of other offices with mandates outside the LGC, such as the Disaster Risk Reduction Management Office (DRRMO).

The Department of the Interior and Local Government, through the Bureau of Local Government Supervision (BLGS) released its PDAO 'profiling' data based on the LGU Local Governance Performance Management System (LGPMS) in 2017. The significant findings were:

- Cities are the most compliant with 82% of the 143 cities having a PDAO.
- Municipalities come second with 63% of the required LGUs (1st to 3rd income class) reported to having created PDAOs.
- All municipalities combined though would bring down the percentage to 56%, closer to the performance of provinces at 58%.
- Income class does not seem to affect province and city LGU’s decision to establish offices.
- For municipalities, the effect of income and the corresponding income-based requirement of PDAO or focal person designate seem to affect LGU establishment of a PDAO.
- More than eight years after the enactment of the RA 10070, many LGUs have yet to comply. That translates to 33 provinces, 25 cities and 630 municipalities. (BLGS, 2017)

Having established the Provincial Disability Affairs Office (PDAO) in the Provincial Government as earlier stated, Camarines Norte is well on its way towards practicing genuine disability-inclusive in its policy-making processes.

Following the establishment of the Provincial Persons with Disabilities Affairs Office (PDAO), Dr. Rex Bernardo, a PWD whose life’s circumstances place him in the best position to know what needs to be done for the PWD sector in Camarines Norte, was appointed its head on July 23, 2015.

Known in the local community and in the bigger PWD community at the national level for his unrelenting attitude and impassioned dedication towards the attainment of a disability-inclusive society, Dr. Bernardo immediately started to draw plans for his office, and on many occasions, pressed for allocation of funds and implementation of those programs.

First among his actions was to come up with a reliable database of PWDs, disaggregated as to type of disability. The following table is its summary:

In 2018 as well, the Center for Local and Regional Governance (CLRG), the research, training and consulting center for local governments of the University of the Philippines, conducted an “Assessment of local mechanisms for programs and services for persons with disabilities (PWDs) – Focus on PDAO”, a study project which used among other methods case studies of seven (7) LGUs, namely Iloilo Province, Camarines Norte Province, Angeles City, Mandaluyong City, Valenzuela City, Carmona Municipality (Cavite), and San Lorenzo Ruiz Municipality (Camarines Norte).

In the said study, CLRG summarized its findings on the Camarines Norte Provincial Government’s efforts towards inclusion as follows:

For people with dignity: The Camarines Norte PDAO
The Camarines Norte’s attention to persons with disability dates back to the creation of its Social Welfare Services Office, and has been enhanced through various mechanisms like the Provincial Committee for the Welfare
of Disabled Persons (PCWDP, 2002) and PCWDP’s reorganization to the Provincial Council of Disability Affairs (PCDA, 2012). It was only in 2015 when the CN-PDAO was created and operated under the PSWDO. CN-PDAO officially became a separate office (under the Office of the Governor) in 2017. Currently, CN-PDAO has its own dedicated budget. After the two-year transition period, CN-PDAO’s separation from the PSWDO has indicated signs of awkwardness between the two offices, although both are open to collaborative engagements in the future.

Appointment of the PDAO Head has gone through a complex yet interesting process. The current Head receives an SG 18 salary, lower than what the law provides. CN-PDAO is composed of four employees, but it has only one plantilla position (Head). The major initiatives of the CN-PDAO in the last two years include municipal awareness orientation, organization of PWD associations/federations, advocacy radio program, accessibility audit with DPWH, wheelchair lift, retrofitting of provincial government access facilities, and securing scholarship slots for PWDs (p.30).

Only two years after the appointment of Dr. Bernardo, the Philippine Foundation for the Rehabilitation of the Disabled, Inc. (PFRD) conferred the 2017 Apolinario Mabini Award for Local Government to the Provincial Government of Camarines Norte. Part of the letter it sent to the provincial government reads:

...your Province has qualified with the standards of a Local Government Unit that has rendered exceptional services to the mass of citizens with disabilities within its jurisdiction in the last two years.

We commend you for your efforts and hard work in implementing policies and projects that address the needs and encourage the advancement of your PWD constituents.”

This came after CN-PDAO undertook these significant activities as indicated in the Office’s Annual Accomplishment Report, cited here in verbatim:

A. Promotion of People’s Participation and Empowerment

The UN Convention on the Rights of Persons with Disabilities (UNCRPD, 2006) of which the Philippines is a signatory, provides a paradigm shift in looking at disability. Persons with disabilities are not viewed as “objects” of charity, medical treatment and social protection; rather they are “subjects” with rights, who are capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society.

The following are the participatory processes and mechanisms used to engage different stakeholders in implementing programs and services to persons with disabilities:

1. Issuance of Provincial Executive Order No. 2016-01: “Creation of a Technical Working Group to draft and formulate an Annual and Decade Work and Financial Plan supporting Presidential Proclamation No. 688 declaring the period of 2013-2022 as the Philippine Decade of “Make the Right Real” for persons with disabilities (PWDs)” Consequently, the TWG - which represented all departments and offices under the Provincial Government, crafted the Provincial Plan of Action (PPA) for PWDs titled “Make the Right Real Program for PWDs”. This holistic approach in the formulation of the PPA ensures that the participating entities of the provincial government can claim ownership on the strategies that they have committed on the various program and service delivery mechanism.

2. Active partnership with different stakeholders in promoting the aims and goals of Make the Right Real Program for PWDs through the following mechanisms:

   a. Regular conduct of the quarterly meetings of the Provincial Council on Disability
Affairs (PCDA) whose membership consist of the different stakeholders, such as the MSWDO, MDAO, SB Chairpersons on Social Services, head of PWD municipal associations, academe and other government agencies. PCDA was created by Executive Order No.2012-08.

b. Partnership with the provincial chapter of the Philippine Councilor’s League (PCL) to ensure that the proposed legislations pertaining to the welfare of the PWDs shall be supported and disseminated among its membership in the entire province.

c. MOA signing with the Camarines Norte State College (CNSC), the province’ largest tertiary school, to assist in the implementation of Inclusive Education on its five campuses located in five different municipalities. The comprehensiveness and reach of the partnership goals means more and more PWDs shall be given free and quality education in the near future.

3. Technical assistance and leadership training were provided/facilitated in the organizing of various municipal PWD associations and Disabled Peoples’ Organizations (DPOs), ensuring their effective participation in the decision-making at the municipal level.

4. Provincial Government Offices Orientations. The Provincial PDAO conducted an office to office orientation on the rights and privileges of PWDs as claim holders and not as recipients of charity. The orientations also made a positive impact on the respective offices’ decisions to allocate funding on PWDs based on their mandate as their contribution to the Provincial Plan of Action’s “Make the Right Real” Program.

5. Government Agencies Orientations. The Provincial PDAO conducted disability
6. Schools Orientations. The orientations provided awareness on the school administrators and faculty members the need to create an inclusive environment to students with disabilities. As a result, facilities were upgraded to enhance mobility of PWDs and focal persons were appointed to look at their specific needs.

7. Municipal Visitations. The Provincial Government through the Provincial PDAO conducted a series of municipal visitations to ensure that the legislations pertaining to the PWD sector are being implemented at the LGU level.

The effect of the offices, agencies and schools orientations, municipal visitations and advocacies in radios and social media certainly changed the perspectives and stereotypes of the people in communities towards persons with disabilities. The people in the government and public service are now more aware that the PWDs have rights and they are claiming those rights, not begging for it. In a more general perspective, people are now more respectful in their attitudes towards the persons with disabilities.

8. The upgrading of facilities and structures in the government and private buildings and establishments, the appointment of MDAOs and the increase of budget allocations to PWD programs and services, the mainstreaming of PWD concerns in regular programs and activities of the Provincial Government would certainly create positive changes in the lives of PWDs. Little by little, this small ripples would ultimately create an ocean of change that would benefit the lives of the PWDs, their families, and the people in their community in the near future.

Overall, the following aspects, included in the figure below as formulated by the researcher in 2018, greatly affect the achievement of genuine inclusion of disability rights in the overall decision-making processes in local government units:

1. Authority and Responsibility

Formulation of policies is a fundamental function of the state and where such authority rests, an equal amount of responsibility consequently exists. At the national level, according to the website of the National Council on Disability Affairs, the Republic of the Philippines has fourteen mandates governing issues that affect PWDs. In addition, the Philippines is a signatory of the United Nations Convention on the Rights of Persons with Disabilities. What appears to be inadequate are local initiatives to fully implement measures to ensure that a shift in paradigm, from exclusion to inclusion, may be achieved.

One of the major issues facing advocates of PWDs rights promotion is the presumption that the PWD sector is so small that it may not be very reasonable to allocate government resources to them considering the cost of their apparent needs. In this regard, the following points may be raised:

a. Data available on the actual number of PWDs remain inaccurate. This is so because despite living in the 21st century, there are still people who find shame in disability, again, particularly when the indisposition relates to behavior or intellect. Under this circumstance, PWDs are not regarded as citizens who have potential/s to contribute to society and remain "hidden" in homes, away from perceived prying eyes of the community.

b. When considering the "size" of the PWD sector, policy makers should not confine their sense that the only people who will benefit from PWD programs are the PWDs themselves only. Instead, a bigger community, those affected by their disabilities like other family members and/or their caregivers, are bound...
to enjoy the benefits of properly planned and effectively implemented programs for PWDS.

A perfect example of this would be, if a blind PWD will have access to a disability-inclusive transport system and may be able to move from house to school on his own, his/her care giver may then be able to engage himself/herself in other activities that will allow him/her to earn or be productive in other ways.

And if, because of government intervention, like provision of equipment and other forms of support to help educate PWDS, this blind individual obtains the skills or degree necessary to help him/her, and he/she does actually finds gainful employment, then his/her family's financial obligations will be augmented, if not totally eliminated.

c. PWDS do not require separate facilities. The point is that it is not necessary to build separate facilities for PWDS but to INTEGRATE the support system they need in these facilities to become fully functional individuals.

Children with special needs do not need new schools. Schools must be designed in such a way that learning will be possible for them.

PWDS do not need roads and bridges of their own. They ask that ramps be made available for them on existing roads so that like everybody else, they will be free to move about and not be confined in one place because of their disability.

2. Cultural Views and Practices

The prevailing cultural regard for disability, especially in rural areas, is that it happens as a consequence of a curse, or that having it itself is a curse. Even granting the limitations and hardships one who has a disability must endure, efforts must be made to correct the aforementioned cultural viewpoint on disability. Disabilities, be they physical, mental and/or behavioral, are all biological conditions and not a settlement for a wrongdoing.

Accordingly, if the viewpoint on the existence of disability is changed, so will the basis of the formulation of public policies and programs, this time from pity to the fact that the provision of services for PWDS must be based on respect for their basic rights as enshrined in the 1987 Philippine Constitution and in The International Bill of Human Rights.

EQUITY in government budget, particularly in the planning of the allocation for senior citizens and PWDS in the annual budget of local government units, pegged at at least 1%, must be observed.

3. Capacity Development

Current local government programs for PWDS are mostly focused on the provision of assistive devices and other dole outs for them. This may be attributed to the fact that policy makers are mostly elected officials and may opt for visible or tangible outputs which are easy to discuss during campaign periods. The necessity for these devices notwithstanding, what PWDS need are opportunities to adequately capacitate them, including basic education and other methods of skills acquisition. These include special education programs with provisions to meet the needs of PWDS. For example, a child with mobility problems may be intellectually capable to join regular classes. Access points like ramps, lifts, specially designed chairs and lower boards may be all he/she will need. A child who is blind, on the other hand, will need to be in a separate class, or join a regular class but with someone who is trained to teach the blind. Additional resources like converter from written text to audio materials, braille printer and the like may also be necessary. The point is that if the state genuinely wants to capacitate children with disabilities, they should not lump them together in the same classroom without regard for the differences in their needs. Skills acquisition, on the other hand, must not be limited to those that prepare PWDS for jobs as
masseuse or computer technicians. While these are decent work, current technological trends must be used to ensure that individuals reach their full potentials, as was the case of Stephen Hawking.

Capacity development programs must be formulated with EFFECTIVENESS as a core underpinning to ensure a matching of limitations and capacities on one hand and appropriate training on the other hand.

4. Empowerment and Independence of PWDs

The main aim of advocating programs for PWDs is to prepare them for a life that will eventually allow them some level of independence from both the state and their care givers. This means making them capable of enjoying daily routines that people without apparent disabilities are able to do. For example, a teacher like myself, after receiving proper education, found gainful employment. For a similarly educated PWD, the challenge does not end with becoming employed. The question of whether he/she will find transportation to and from work is a serious issue, particularly in the Philippines where all means of public transportation absolutely do not provide support to PWDs. The question of whether public funds must be utilized to serve a small number of citizens brings us back to the issue that human rights must be enjoyed by all, not just by a majority of citizens. ACCOUNTABILITY in the formulation of policies must therefore be observed as this does not just include monetary and property use but may also include the repercussions of one’s decisions and actions on the welfare of his/her constituents or of those affected by such actions.

5. Social Responsibility

Dr. Bernardo’s case best represents the outcome of giving adequate and appropriate access to PWDs. Educated and with a considerable social capital, he continues to use both to raise awareness on the plight of PWDs, to pressure policy makers towards the formulation and actual implementation of inclusive measures, and to recruit other citizens to help in the promotion of causes for PWDs. Using stories of his own battles and victories, he relentlessly reaches out to other PWDs, especially the young, to convince them that their disabilities should not deter them from living meaningful lives.

A crucial point here is Dr. Bernardo’s decision to not limit the fruits of adequate access to PWDs on himself but rather, to endeavor spreading its effect on other PWDs. The viewpoint that one must ‘give back’ is not common, not even among the affluent whose paved journey to success is incomparable to what somebody with a disability and limitation must take.

6. Shift

The Centers for Disease Control and Prevention defined inclusion as “Including people with disabilities in everyday activities and encouraging them to have roles similar to their peers who do not have a disability is disability inclusion. This involves more than simply encouraging people; it requires making sure that adequate policies and practices are in effect in a community or organization.”

The World Bank also stated that “Global awareness of disability-inclusive development is increasing. The United Nations Convention on the Rights of Persons with Disabilities (CRPD) promotes the full integration of persons with disabilities in societies. The CRPD specifically references the importance of international development in addressing the rights of persons with disabilities. To date, 174 countries have ratified the CRPD, which carries the force of national law. In recent years, an increasing number of bilateral donors have also developed disability policies to guide their international aid. Similarly, at the national level, the number of disability discrimination laws and constitutional provisions have increased significantly.”
Conclusion

The researcher therefore concludes that, given the achievements of the Provincial Government of Camarines Norte insofar as mainstreaming inclusion of PWD rights in its policies and programs is concerned, the establishment of a PDAO in every LGU in the country is necessary. Needless to say, the shift from exclusion to inclusion must be evident in all aspects of public administration to ensure that nobody is left out in any country's quest for development. President John F. Kennedy said in 1963, "Freedom is indivisible, and when one man is enslaved, all are not free".

References
