

An investigation into political and socio-economic participation challenges faced by people with disabilities in South Sudan

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ABSTRACT

This study investigated barriers to people with disabilities in political and socio-economic participation in South Sudan. The ongoing conflict in South Sudan has disrupted government institutions and the rights of people have been compromised. People with disabilities have been subjected to attitudinal, environmental and institutional barriers. The study through the human development and social contract theories identifies the need to develop people with disabilities and enable their full functionality as well as key aspects to maintain the social contract between South Sudan and its people. People with disabilities have acquired their impairments mainly as a result of conflict and the poor health sector. The government of South Sudan has been unable to popularise disability-inclusive policies and did not ratify the United Nations Convention on the Rights of Persons with Disabilities. The education sector has also been a challenge and people with disabilities have the highest illiteracy levels.

There has not been any compensations to those involved and injured as a result of the conflict and people with disabilities remain poor with no provision of basic services. People of South Sudan depend mainly on agricultural produce but with the crumbling economy, men and women must share responsibilities to survive. Only a few people in the country are employed in industries and people with disabilities are marginalised as they are perceived to be sick. Many people with disabilities are not employed and are unable to provide for their basic needs. Women and young girls with disabilities experience multiple discriminations for being women and having disabilities.

The delay in the popularisation of draft disability policies has prolonged the unbearable conditions, including in United Nations camps. People with disabilities remain excluded from political participation while disabled people's organisations have been advocating for their inclusion. These organisations have received little attention from the government and their sustainability depends on funding from external actors. Conflict aggravates poverty which leads to severe disabilities. The government of South Sudan has little economic potential of addressing disparities and the ongoing conflict becomes a barrier to move to a human-development approach to disability. Non-ratification of the United Nations Convention on the Rights of Persons with Disabilities (UNCPRD) encourages a lack of international compliance. Low levels of disability rights advocacy

as well as the poor education system have hindered the programme of emancipating people with disabilities.

Key words: South Sudan, disability, participation, human rights, civil conflict

DECLARATION

I Tshepiso Ignatious Moshoeu declare that this dissertation for the degree of Master of Arts in Political Studies hereby submitted has not been submitted by anyone before for the degree at this or any other University. I also declare that this is entirely my own work and that borrowed materials from other researchers have been duly referenced and acknowledged.

.....

Author's signature

DEDICATION

In memory of my late mother, Ntebogeng Eunice Moshoeu.

LIST OF ABBREVIATIONS AND ACRONYMS

AIDS:	Acquired Immunodeficiency Syndrome
AU:	African Union
BICC:	Bonn International Centre for Conversion
CEDAW:	Convention on Elimination of all forms of Discrimination Against Women
CESA:	Continental Education Strategy for Africa
Covid-19:	Coronavirus Disease, 2019
CPA:	Comprehensive Peace Agreement
CRC:	Convention on the Rights of the Child
DPI:	Disabled People International
DPO's:	Disabled People's Organisations
GESP:	General Education Strategy Plan
HIV:	Human Immunodeficiency Virus
HRW:	Human Rights Watch
ICF:	International Classification of Functioning
ICIDH:	International Classification of Impairments, Disabilities and Handicaps
IGAD:	Intergovernmental Authority on Development
MYDDRP:	Multi-Year Disarmament, Demobilisation, Reintegration Programme
NCG:	Nordic Consulting Group
NDI:	National Democratic Institute

NDIP:	National Disability and Inclusion Policy
NGO:	Non-Government Organisation
NIEP:	National Inclusive Education Policy
NTD:	Neglected Tropical Diseases
PoC:	Protection of Civilians
R-ARCSS:	Revitalised Agreement on the Resolution of the Conflict in the Republic of South Sudan
RTCC:	Reintegration Technical Coordination Committee
SDG's:	Sustainable Development Goals
Sida:	Swedish International Development Cooperation Agency
SPLA:	Sudan People's Liberation Army
SSDDRC:	South Sudan Disarmament, Demobilisation, Reintegration Commission
UN:	United Nations
UNCRPD:	United Nations Convention on the Rights of People with Disabilities
UNDDR:	United Nations Disarmament, Demobilisation, Reintegration Unit
UNDP:	United Nations Development Plan
UNESCO:	United Nations Educational, Scientific and Cultural Organisation
UNHRC:	United Nations Human Rights Council
UNICEF:	United Nations Children's Fund
UNSC:	United Nations Security Council
UPIAS:	Union of the Physically Impaired against Segregation

VL: Visceral Leishmaniosis

WHO: World Health Organisation

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CHAPTER 1 INTRODUCTION

1.1 Orientation and Background

Disability is defined as an environmental and attitudinal barrier that affects the full participation of people with physical and sensory impairments in society (Goering, 2015:134, UNCRPD, 2006:1). Disability is part of a human condition that can be permanent or temporary in nature and could be experienced by anyone in various phases of life (Rohwerder, 2015:4). Disability is complex to define and has been recognised as an evolving concept by the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006:1).

According to Yeo and Moore (2003:579), there has been a high level of exclusion regarding people with disabilities globally and that the exclusion of people with disabilities is evident due to less self-representative measures within a particular social setting. People with Disabilities have been excluded from social, political and economic activities in many societies. Moreover, continuous exclusion leads to an increased poverty level. Disability and poverty have always been inseparable, and poverty can never be eradicated until people with disabilities equally enjoy their fundamental human rights (Lee, 1999).

Disability is a socially developed concept, designed by people without knowledge of disabilities (Yeo and Moore, 2003). Gultang (1971) in his study contends that, if power could be shifted and all people be afforded equal opportunities to participate in decision-making, development could be realised. Consequently, if people with disabilities could be included in the decision-making processes of international organisations as well as all other programmes for people with disabilities, the world would be crafted differently and universally accessible to everyone (Yeo and Moore, 2003).

People in less developed and other developing countries have limited access to basic resources such as food, health, education, housing, proper sanitation, clean water and employment and they often have to survive in these harsh conditions causing vulnerability to illnesses, injuries, and impairments. In most instances, impairment leads to exclusion creating a disabling environment (Goering, 2015:135).

In the 1980s people with disabilities campaigned through their various organisations for anti-discrimination efforts and inclusion. Governments in different parts of the world received memorandums on various platforms and formats to introduce laws that will protect the rights of people with disabilities. These efforts were due to their continuous marginalisation. Children and women with disabilities experienced an extreme form of discrimination, where children with disabilities were excluded from schooling. Disabled employees were also discriminated against openly by their employers without being given equal opportunities as people without disabilities. Discrimination was institutionalised in all parts of societies, exacerbated by religious beliefs, cultural beliefs and stigmas surrounding people with disabilities. It was not until the 1990s that many governments adopted forms of legislation to protect the rights of people with disabilities (Barnes, 1991:9-147).

In 2011, after almost 40 years of civil conflict between two parts of Sudan, the northern and southern parts, a referendum process took place and members of the community were allowed to decide on their future (Geleta, 2017:17-19). The results supported partitioning which gave birth to a new country, the Republic of South Sudan. In 2010, various disabled people organisations gathered in the central equatorial state on a call to lobby inclusivity in the process of the referendum. People with disabilities were allowed to participate in voting, where people with blindness and physical disabilities could receive assistance while at the polls (Rohwerder, 2018:11).

Bhavisha et al (2018:510) further contend that the world consists of over a billion people with disabilities in both low- and middle-income countries. The process of inclusive political participation involves the ability to vote, the opportunity to be involved in the selection of those seeking votes, and moving to a more party-political form of exercise. Moreover, voting should not only be seen as a key factor that could be achieved to curb challenges of inclusive political processes but also an opportunity to hold government positions in all structures, campaigning and lobbying for votes. Taking part in public consultative processes by the government epitomises a more optimistic level of inclusion. People with disabilities when denied a chance to take part in public affairs are robbed of their effective citizenship while it can be seen as unfair treatment within their place of origin.

The UNCRPD (2006) policy position emphasises “the right to political life” by persons with disabilities paving a way for different nations to familiarise their laws to disability rights by underlining more inclusive policies. According to the National Democratic Institute, (2012), people with disabilities have the rights to vote and be elected while government electoral laws should be aligned to accommodate disability rights and choose to enable environments where every citizen can participate freely and fairly. The World Health Organisation (WHO) (2017) identifies the promotion of positive attitudes, accessible built environment and technologies, good relations, services, inclusive laws, self-definition of ability, social status and level of education as elements that can be scrutinised to see people with disabilities differently than what is being perceived today.

The South Sudan National Elections Act (2012) was established with the purpose of practicing democratic, free and fair electoral processes. The right to participate as a candidate as well as voting is highlighted, including protection to equal participation during electoral processes, (Part A 5(1)). Part (b) of the Act, however, is not explicit on accommodating people with disabilities. The Act further stipulates the right to receive accurate information by the voters to allow them to make better choices at the polls and highlights the importance and protection of all citizens to fairly participate during electoral processes without any form of discrimination.

Virendrakumar et al (2018), argue that people with disabilities may face exclusion before or during the process of elections while people with deafness and blindness might not be afforded equal opportunities to access information while only people with physical impairments could be considered by election administrators and excluded those with sensory impairments. Virendrakumar et al (2018) further highlight the ignorance of political parties during campaigns not considering that their potential voters could be among the masses who are lacking accessible formats to receive information, leading to an uninformed decision at the polls.

Sackey (2015) suggests that many people with disabilities did not find reasonable opportunities to attend even primary schooling and that the lack of education hindered fair participation. Limited financial resources also hampered the situation while political campaigns and registration come at a high cost including financing meetings for

planning as well as advertising material for both media and print taking into account the cost of disability.

South Sudan is a country rich in oil deposits with its exports contributing to eighty per cent of the country's Gross Domestic Product (Geleta, 2017:18). The country also produces flour, lentils, cooking oil, dried fish, maize grain, groundnuts, rice, sugar, salt, onions and petrol which are exported to the neighbouring countries. However, the unemployment rate remained high and the people experienced neglect, including people with disabilities (Rohwerder, 2018:7). The abundance of such resources is then affected negatively by the conflict resulting in poverty, while both conflict and poverty may be seen as interconnected concepts as causes of disabilities (Goodhand, 2001).

According to Virendrakumar et al (2018), while the people of South Sudan opted for independence with anticipation to enjoy peace and stability it did not last long when civil war broke out in 2013. The newly established state, which was in a process of developing and delivering services to its people, was then diverted by the civil war and factors such as factionalism, centralised nomination system, ethnic favouritism and marginalisation of the poor compromised the idea of having an inclusive government (De Waal, 2014). The South Sudanese conflict became a factor in increasing challenges to address the status of people with disabilities (Rohwerder, 2018:6). People with disabilities have long been excluded from social life, political life as well as economic participation (Forcier et al, 2016:4).

South Sudan, with a population of 13.3 Million (South Sudan National Bureau of Statistics, 2019), is estimated to have 1, 2 Million people with disabilities excluding a number of those who have migrated to neighbouring countries such as Uganda. However, censuses are in most cases not accurate as stigmas surrounding people with disabilities have allowed the likelihood of lack of self-representation by people with various kinds of disabilities leading to a lesser number. Disclosing their disability as well as societal beliefs, values, negative stereotypes and inaccessible environments exacerbated the status of accuracy (Forcier et al, 2016, Legge, 2016:1). Al Ju'beh (2015:12) argues that difficulties to obtain census information on people with disabilities using different methodologies is driven by fear of isolation and stigmas. Al Ju'beh

(2015:12) further suggests that different countries employ various methods to collect data, but results are not optimistic.

Al Ju'beh (2015:24) criticises terminology used while referring to persons with disabilities such as “people living with disabilities” as “persons with disabilities” and the continuous use of the medical model to address issues affecting people with disabilities, as that implies that persons with disabilities are sick and are not to be included in activities of societies. Although many researchers have continuously used the term ‘people living with disabilities, the United Nations Convention on the Rights of Persons with Disabilities has made a paradigm shift to address disability issues in a human rights-based model (UNCRPD, 2016). Cooke and Staden (1981) suggest that the extra cost of disability has also been ignored, which worsened the living conditions of people with disabilities.

The constitution of South Sudan (2005) section 47, enshrines a clause which states that; “Persons with disabilities are entitled to enjoy all the rights and freedoms set out in the Bill of Rights, particularly in respect to their human dignity, access to suitable education and employment; and to be full participants in society”. However, various factors contributed to delay the progress in terms of mainstreaming disability (Forcier et al, 2016:15). Berghs et al (2016:2), argue that the poor infrastructure also contributed to excluding persons with disabilities. Inaccessible buildings with steps without ramps, inaccessible public transport, poor education and health features. Also, lack of Braille services where information is transcribed into an accessible format for people with blindness, and lack of sign language services where people with deafness can be accommodated to access information and knowledge, resulted in exclusion (Yeo and Moore, 2003).

Barriers are all limiting elements surrounding an individual, which serves as stumbling blocks to a person's free participation such as inaccessible infrastructure, other people's negative attitude, inaccessible technologies, lack of assisting devices, and general restricting policies and systems (WHO, 2001:214). Thorbecke (2006:16) defines poverty as the unavailability of financial resources to maintain the lifestyle of a person. The social class system within society categorises people according to the standard of living

and affordability, and those who live below the poverty line are seen as living the worst unsuitable lifestyle.

Poverty can directly affect anyone unable to accumulate resources for self-maintenance against the status of the economy and affordability. Thorbecke (2006:16) further explains that there are those living on the poverty line and those who live below the poverty line being at the worst level of poverty within society. Poverty and disability are intertwined and while persons with impairments are disabled by factors such as stigmas and inaccessible environments disabling them to participate fully within societies, push them to exist as dependents on their families (Groce et al, 2011).

Thorbecke (2006:44), further argues that unequal distribution of resources increases high poverty levels even worse within low-income households. This dissertation focuses on, barriers to persons with disabilities to fully participate in political and socio-economic life in South Sudan, a newly crafted state since 2011. The dissertation further acknowledges the current extent of high ignorance in noticing the disabled sector that has been left oppressed, instead of caring for a human condition that does not necessarily disable them to perform all functions. Elements of ignorance and resistance from various fraternities are visible while persons with disabilities face difficult challenges for self-emancipation including addressing issues of stigmas and wrong perceptions.

The focus of this dissertation is on South Sudan mainly to assess the extent of marginalisation in a failed state, as well as potential constructive frameworks supposedly to be in place, should peace and stability develop. Ayazi et al (2013:1-3) suggest that the lack of knowledge about disability has been identified and that moves to the level of ignorance exist where barriers associated with disability are unknown, particularly in least-developed states. Persons with disabilities in conflict zones are either extremely marginalised in the overall public life or they had been left without attention after they had experienced traumatic incidences which left them with impairments. The situation when referring to women with disabilities becomes worsened while systems are unavailable to allow for accessible education, health and businesses in general as well as a reasonable accommodation to participate in public life.

South Sudan is one of the least developed countries with a high level of marginalisation of persons with disabilities. Globally, special attention has not been directed to overturn the insensitive approach of dehumanising persons with disabilities, while in the least-developed African countries, the situation has been worse even though international peace-keeping bodies have provided guidelines to reverse and reconstruct where disability inhumanity has been dominating.

1.2 Research Problem

Persons with disabilities have been excluded from communities for many decades and plans to mainstream disability have been affected by the ongoing conflict in South Sudan. Data shows less on participation of persons with disabilities on Socio-economic and political activities in South Sudan. The form of marginalisation experienced by persons with disabilities carries neglect of human rights where ignorance drives wrong perceptions as well as resistance from the medical model thinking. The plight of persons with disabilities is a human rights issue and society needs to create an enabling environment for inclusive participation. Mitra (2018:12) suggests that through a constructive process of identifying capabilities of persons with impairments, disabilities can be limited for persons with impairments while different specialists from various disciplines are involved in identifying barriers to different forms of impairments.

Political will and access to education are seen as the fundamental resources to inculcate the human rights-based model of disability while many societies are still overwhelmed by the medical model. Persons with disabilities have not been identified as beneficiaries to development programmes and specific services required in South Sudan. Persons with disabilities experience a high level of discrimination and factors such as religious, cultural and societal beliefs have fuelled the conditions. Lack of proper planning by governments, other institutions and ongoing conflicts in some parts of the world have delayed the development and inclusion of persons with disabilities. Various organisations and activists of the disability sector have made concerted efforts that the international community must respond to concerns as advocated.

The idea of mainstreaming disability aligns to the development of individuals and has been at the centre of development since the medical model of disability was seen as a

disabling factor while persons with disabilities remained in a dependency segment of the population. The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006) and its optional protocol was approved by member States in 2006. The optional protocol binds signatories to avoid deviations from the convention in its original form. South Sudan as a newly founded state since its separation from Sudan in 2011 has not ratified the convention.

The National Disability and Inclusion Policy of South Sudan published in 2013 (NDIP, 2013) contains five elements that seek to promote and protect the rights of persons with disabilities and elements, namely:

- Adopted human rights approach
- Non-discriminatory environment
- Equity
- Inclusivity, and
- Mainstreaming

The policy outlines that those to be protected are persons with permanent physical impairments, sensory impairments as well as with intellectual disabilities. The correct terminology is used while crafting the policy indicating optimistic ideas on the approach of mainstreaming and guarding against discrimination. However, persons with disabilities are still subjected to extreme poverty and access to education is unreachable to women, girls, boys and men compared to those without disabilities. There has always been a link among conflict, poverty, disability and exclusion where conflict contributed to a high number of impairments and left those impaired marginalised without provision of standard basic needs resulting in poverty. The policy (NDIP, 2013) also highlights the following as barriers to equal participation in social, political and economic life in South Sudan:

- Stigmas
- Lack of nearby schools

- Poverty
- Pessimistic cultural norms
- Inaccessible roads
- Lack of accessible sidewalks
- Inaccessible infrastructure i.e., schools
- Lack of knowledge to mainstream disability

The founding of the UNCRPD comes as a call for different nations to consider the inherent human rights of persons with disabilities irrespective of any other challenges. The convention further shifts the models adopted by nations to a human rights-based approach. While governments are involved in different areas of curbing challenges and developing disability rights, it is fundamental that they are mainstreamed at the very first stage of planning.

Persons with disabilities remain excluded in South Sudan where inadequate frameworks have been put in place to allow smooth participation during the 2011 referendum (Rohwerder, 2018:3). The disability sector organised itself aligning its demands to the United Nations Convention on the Rights of Persons with Disabilities and raising awareness to the public with the intent to attract policy buy-in which has not been achieved. However, researchers have given less attention to disability and inclusivity.

This dissertation seeks to explore further the exclusion of persons with disabilities in a state overwhelmed by a series of civil conflicts and highlight challenges that could factor in sluggish service delivery during the period of instability. *Thus, what are the barriers to the inclusion of people with disabilities in the political and socio-economic life in South Sudan within the context of a human rights-based approach?* The question becomes the central focus of the study. The government has failed to meet the needs of the entire society due to the civil conflict and persons with disabilities experience extreme challenges as compared to their counterparts. The disabled people's organisations have concertedly advocated for their inclusion during peace talks and government planning

but they have not been successful (Rohwerder, 2018:3). However, it cannot be ignored that a prolonged conflict exhausts resources of the state leaving the entire society in disarray.

The dissertation unfolds by investigating the major causes of disabilities in South Sudan, while causes come in different forms as well as their impact on people with disabilities and highlighting any remedial actions available. Key developmental programmes on shifting from the impoverished status to inclusivity of disability rights are identified. The dissertation also analyses the current policies and their readiness for implementation as well as the status of stability that occurs against emergency interventions made currently by the international community. However, the African context of a social class system, accumulation of wealth through assimilation of elites and organised efforts to centralise political power is also examined.

1.3 Research Questions

Centred on the problem statement above, the following questions are set:

- What are the attitudinal and environmental barriers disabling persons with impairments in South Sudan?
- Which international instruments guide national frameworks on a human rights approach to disability?
- What is the distinction between disability and impairments versus models of disability?
- How does disability inclusion in socio-economic and political participation accelerate state development?

1.4 Aims and Objectives

The main aim of this dissertation is to investigate barriers to people with disabilities on political and socio-economic participation in South Sudan. The specific objectives of the investigation are:

- to present attitudinal and environmental barriers disabling persons with impairments in South Sudan;
- to explore international instruments guiding national frameworks on a human rights approach of disability;
- to distinguish between disability and impairments versus models of disability; and
- to identify frameworks on disability and state development.

1.5 Theoretical Framework

The theoretical approach is expected to demonstrate and highlight the limitations brought by the absence of policy guidelines that enables people with disabilities to fully function through necessary support systems in place (Stein, 2007). Human rights orientated programmes promote the right to participate without hindrance and the promotion of equal treatment is realised. The Human Development Model of Disability theory as well as the Social Contract theory will be adopted to guide the study and demonstrate the contract between the government of South Sudan and its citizenry as well as the identify enablers of functionality to people with disabilities through the benefits of the human development model.

1.5.1 The Human Development Theory

The international position on disability rights is both social and human rights-based to correct historical disparities caused by neglect and unequal provision of resources while the human development theory seeks to identify enablers in an environment (Stetsenko & Arievitch, 2004:475). South Sudan is presented with a set of challenges post-independence and its economy has struggled to stabilise with services to the people being neglected. The human development theory is derived from self-definition to function and an abled environment through transformation programmes embedded in society. An abled environment removes barriers to persons with disabilities and their function becomes visible with effective mechanisms in place and recognising the dissimilarity amongst various types of disabilities.

Human development depends on elements such as societal awareness, occupational differentiation, and urbanisation (Welzel et al, 2003). Inclusivity becomes the driving factor in an organised society with a set of skills supported to participate in the local economy can further benefit from various sets of skills and own local production. The emancipation of people with disabilities in South Sudan depends on their inclusion to demonstrate their skills and fully participate to ensure less dependency. Social and economic inclusion can realise sufficient produce from different sets of skills. The human development model advances human dignity and clarifies values related to human rights, thus it is empirical to connect the relationship between the state with its provision of inclusive programmes and the need for self-dependency.

The right to choose institutionalises the right to choice. The United Nations Convention on the Rights of Persons with Disabilities recognises freedom of choice that allows people with disabilities to determine their choices in both private and public life and these rights need to be effected through state mechanisms. Availability of resources to develop individual people with disabilities becomes the core value of democracy, hence synergies need to be created among economic, cultural and institutional aspects of the human development model (Welzel et al, 2003).

1.5.2 The Social Contract Theory

The political discourses in South Sudan delay the development and provision of resources to the people (Geleta, 2017:18). Non-provision of services to the people is a flawed social contract whilst a well-harnessed contract perpetuates justice (Silvers & Francis, 2005). The social contract theory is underpinned by mutual bargaining between the state and the people. Civil conflicts are predominantly affecting negatively the living conditions of communities and failure by the government to provide services to the people does cause instability and is seen as a failure to commit to the social contract between the two parties.

According to Azam & Mesnard (2001:2), continued escalation of conflict leads to the reprioritisation of resources with a large portion moved to the maintenance of the army to maintain power and control. Kuol & Oringa (2021:6) argue that the social contract can include different groups in society, which will form part of the commitment to create

peace and harmony. The social contract concept is drawn from the notion that sustainability of stability through the implementation of national peace is development orientated to effectively distribute resources.

McCandless (2020) suggests that the arrangement to harness social cohesion should be inclusive and respond to the needs of the people to avoid instability. For the development of peace agreements, policies and state constitutions must effectively uphold human values. Social cohesion needs to be institutionalised to build bridges between societies and encourage living together nurturing social relations.

1.6 Research Methodology

The study examined barriers to people with disabilities to political and socio-economic participation in South Sudan. The approach of research methodology was analytical and secondary sources of data were used for this study. Walliman (2011:70) explains secondary data as information that has been detailed and analysed for use by other researchers. Walliman (2011:71) further highlights the importance of validating the information already analysed by other researchers to sift valuable information from various sources. The methodology looked into different materials and compare them by contrasting arguments from different researchers on a particular concept or phenomenon.

According to Almalki (2016:290), the investigation of a particular concept and the model employed to scrutinise all sources available becomes key to be outlined for a purpose of guiding the study in finding answers. Almalki (2016:290) further suggests that it is fundamental to select models relevant enough to assist in joining together information sourced. The process of data gathering from various sources and exploiting all information becomes key to thoroughly creating a sense of understanding concepts involved as well as presenting a more informed analysis of the study (Creswell, 2007:150).

This dissertation acquired information and scientific evidence from textbooks, journals, government publications, newspapers and other relevant publications and documents. The technique of secondary data gathering was through visiting libraries for books, journals and newspapers and the researcher also utilised available material on the

internet through reliable search engines to browse and download documents for the study.

1.7 Research Design

The study employed a qualitative method which produced an understanding of various concepts. Research is a scientific process of extrapolating reliable information and analysing and writing collected intelligence (Rossman & Rallis, 2012). Creswell (2014:12) suggests that the qualitative method allows for a conscious selection of data material such as documents and visual material to assist the researcher in conceptualising the problem and the research question. When the qualitative design approach is employed, understanding of human behaviour is understood in detail where available information to the researcher is reviewed to find gaps and intelligence to guide the study to its conclusions (Almalki, 2016:291). This study relied on the following data collection outlined by Cooper and Schindler (2011: 151)

- Document analysis - document analysis technique was used to assess historical or modern classified or public records, reports, government papers and opinions.
- Case studies - the case study technique was employed to provide an in-depth relative scrutiny of events or conditions

Marshall and Rossman (2011:2) suggest that the qualitative method of study identifies the context of events and experiences by a particular society and interpret realistic and important aspects of the study.

Creswell (2009:3) suggests that the information collected and the perceptions by society can be drawn into an analysis to test the accuracy of a particular knowledge while the practical part of what is perceived is put into reality against what has been found. Creswell (2009:212) highlights the importance of introducing questions and through theoretical guidance build up knowledge that will lead to the understanding of a particular question. Creswell (2009) further highlights this approach as key to studying ostracised groups with careful consideration of the sensitivity of issues involved while the study presents findings and recommendations to the problem as identified.

Significance of the Study

This dissertation seeks to broaden the understanding of the concept of disability and explore the links among conflict, poverty and exclusion in South Sudan. Plans to include persons with disabilities in South Sudan are outlined in the South Sudan National Policy on Disability and Inclusion. The study explored challenges faced by persons with disabilities in South Sudan as well as identifying disabling factors characterising limited participation in political, social and economic life.

The study also considered capacity building and awareness as tools to curb attitudinal barriers. The dissertation unfolded based on the following assumptions:

- The end of the civil war in South Sudan will enable focus on policy alignment, focus on enhancing development and the National Policy on Disability and Inclusion being implemented without any obstacles.
- The government of South Sudan lacks financial resources exhausted by the civil conflict to invest in disability mainstreaming.
- Capacity building on disability mainstreaming needs to unfold at the government level
- Disability may still be perceived as a medical condition while the National Policy on Disability and Inclusion has not been popularised.
- Efforts are being made to stabilise South Sudan.

1.8 Limitations of the Study

The researcher acknowledges the contribution that could have been made by conducting in-depth and structured interviews. However, because of distance, the international Covid-19 pandemic and financial constraints, the researcher faced challenges to undertake such. The ongoing conflict in South Sudan also become a stumbling block to reaching a reasonable number of participants. However, secondary data was researched to collect data for the study.

1.9 Chapter Outline

The chapters in this dissertation are presented as follows:

Chapter One-Introduction

This chapter outlines the introduction to the study, the background of the study, research problem, research questions, aims and objectives of the study, research methodology and design, limitations to the study, and the structure of the study.

Chapter Two-Theoretical Framework and Literature Review

In this chapter, the theoretical framework to the study is discussed and literature related to political and socio-economic inclusion to People with Disabilities in South Sudan was reviewed.

Chapter Three – Reintegration, Livelihoods and the Right to Education

This chapter provides an in-depth scrutiny of barriers disabling persons with different impairments and further exclusions of persons with disabilities in the public and private sectors on basic requirements such as education, social life, employment and consultative measures. The chapter also provides a specific interpretation of disability against the perceived definition. International tools were thoroughly explored on harmonising inclusivity working towards a human rights-based model on disability.

Chapter Four- The Essence of Inclusive Decision-making on Development.

This chapter presents the benefits of including persons with disabilities in decision-making. The abilities of persons with impairments and the desired enabling environment were also explored. The political process and frameworks of South Sudan are examined. Shortcomings in fair participation are identified and disadvantages of exclusion and its impact on human rights are also scrutinised. The chapter further provides an analysis of disability and development.

Chapter Five- Conclusion and Recommendations

In this chapter, findings are summarised, and the focus is on highlighting the limitations of the study and presents recommendations linked to the findings. Conclusions are also drawn based on the study.

CHAPTER 2 THEORETICAL FRAMEWORK AND LITERATURE REVIEW

2.1 Introduction

This chapter will provide the theoretical framework and literature review of the study. Theories purposely selected to guide the study encompasses the human development theory and social contract theory. Literature review, which seeks to provide available knowledge and information, will cover themes such as major factors leading to physical and mental impairments, evaluating the socio-political status of South Sudan, and conceptualising models of disability. An in-depth review of barriers to people with disabilities on political and socio-economic participation in South Sudan will also be undertaken in this chapter.

2.2 Theoretical Framework

The research question is expected to link political discourses and the political agenda that seeks to address the marginalisation of vulnerable groups, including persons with disabilities and society as a whole (Mertens, 2010). This dissertation will adopt the Human Development Model of Disability theory as well as the Social Contract theory, which will provide conceptualised knowledge in both empirical and theoretical literature

2.2.1 The Human Development Theory

The human development theory refers to an environment that is created to capacitate persons with disabilities to function fully (Mitra, 2018:12). Thus, persons with disabilities in South Sudan have been deprived of basics that could enable them to participate in society. The approach of this doctrine investigates the means that can be enablers to persons with disabilities. There are different types of disabilities that will need different and specific types of support to accommodate them in a particular space. Mitra (2018:34-35), suggests that for the model to be effected there is a need to look into various kinds of disabilities as individuals as people with disabilities are not homogenous. The approach will be to look at a particular disability and establish how those affected are deprived due to their impairments.

The method of identification can include different methods of research and by adding different stakeholders, including affected individuals, medical doctors, rehabilitation experts, and teachers and caregivers to enable filtered results. This theory is of the view that the government of Sudan should develop inclusive frameworks to facilitate capacity building as well as maximum functionality of persons with disabilities. The development of people with disabilities reduces dependency and promotes human dignity allowing them rights to make choices in demonstrating their full potential.

According to Rogoff (2003), human development is influenced by practices and traditions in communities. The environment that people belong to shapes their way of thinking, reasoning, and solving problems through learning from each other. Human development lies beyond economic stability and modernisation recognising constant changes in the way people do things. People are transformed through participation within their respective communities, which in turn allows them to contribute to the transformation around their environment.

Human development is viewed as an expansion of people's capabilities and opening up opportunities through inclusive participation. Human development does not guarantee the total achievement of opportunities but the creation of favourable conditions to allow for self-dependency. The concept is dependent on political will, availability of economic opportunities and correctly managed institutions. The potential posed by people deepens contribution to economic development, thus the importance to capacitate people with disabilities through removing barriers.

Communities with less-skilled people experience overload and production is lessened. Increased levels of education and the opportunity to self-define functionality increases chances of economic development with fewer constraints. Physical and intellectual capacity are necessary for economic development with an enabling environment to allow people with disabilities to choose where they can perform. Human development can be realised through institutionalised programmes that will regulate the lives of people leading to a more inclusive atmosphere.

People will have the ability to function and choose desired aspects in their lives but it is possible through the protection of rights and institutionalised freedoms supported by

adopted policies to enhance human development. The absence of physical and intellectual capacities divert people from political participation due to priority given to self-economic emancipation (Inglehart, 1997). Communities with fewer skills and resources lack motivation to aspire to greater things in life while human development will prompt liberty aspirations putting pressure on the government to preserve freedom through the upholding of rights and provision of resources.

Political and economic changes tend to open space for cultural changes and perspectives as people can experience undesirable conditions leading them to aspire to freedom and liberties to make decisions. The development of people is well channelled by cultural changes on how people transform to do things differently. The importance of this theory is to demonstrate the fundamental aspects of developing people with disabilities in South Sudan to their maximum capacity through the removal of barriers and the development of an inclusive environment.

2.2.2 The Social Contract Theory

The social contract theory intends to illustrate societal basics with which all members of society should characterise. Society and government have a special agreement to govern and to be governed, which is to provide for an environment where all people can enjoy their inherent human rights. Consequently, the government is bound by this contract to equally enforce law and order as well as service its people (Rousseau, 1893). This theory seeks to draw attention to the responsibility of governments to also equally provide to all persons.

The Republic of South Sudan is therefore responsible for the emancipation of persons with disabilities through the provision of adequate support and resources having regards to the costs and barriers of impairments. The relevance of his theory to this dissertation is that it looks into the relationship among health deprivations, personal factors, resources, and the environment which can be enablers to functionality and capacity.

Hobbes et al (1651) argues that while people had lived before without any form of law or any form of regulatory frameworks in place, oppression was practised with impunity. The key elements to form an agreement was the protection of human rights and ambitions to live peacefully. The need for an authority to manage the affairs of a social

setting was to enforce law and order as well as protecting individual liberties, living under common laws and protection of individual freedoms. However, the key to the agreement was the protection of life, respect of the law and the protection of the entire citizenry.

Hobbes (1651) recognises people as selfish while advancing particular programmes to their own self-interest even though they are reasonable to achieve what they seek and effectively accumulate what interests them. Hobbes (1651) further argues that people are to surrender all their rights and liberties to the State which will follow codified rules which will equally apply to the collective. People must be willing to subscribe to designed rules and laws to advance sovereignty and act differently from when men were guided by nature.

Locke (1960:4) argues that natural guidance worked better than the designed model of a State when there was no interference. Nevertheless, the state of nature was binding and men had to abide by it. Locke (1960:7) further argues when the contract was entered into, individual liberties, properties and the right to life, were not surrendered to the authority as these were considered as natural benefits to people. The role of the State in this instance was to protect its people, uphold and enforce law and order, and to protect the rights of all persons equally.

Laws are binding and hold the authority to manage a particular social setting but are bound to be neglected if they do not serve the purpose which could lead to a coup d'état. Locke (1960:8) argues that the laws are created to assure good social welfare of the people and democratic application of rules to ensure fairness and efficient protection of human rights and that their liberties and lawlessness will be punished.

McCandless (2018:48) defines a social contract as an agreement between the state and the people on how resources must be shared, the use of power and the way people should live. A social contract is meant to maintain peace and stability through progressive policies and developed inclusive processes. Inclusive ownership creates a reactive environment where causes of conflict could be identified and addressed. McCandless (2020) argues that the current ongoing conflict in South Sudan is a result

of a lack of the relationship between the state and people. Efforts for peace negotiation are non-inclusive resulting in the absence of a social contract.

A social contract as a concept paves a way for responsive and inclusive peace agreements which will be more binding to all parties. Social contracts preserve sound political bargaining with views from all parties where inclusive peace agreements assist to lay a strong foundation on inclusive policies which are meant to protect the wellbeing of people as well as their rights. A social contract as a theory can be used to study the connection between education and social participation in a fragmented environment like South Sudan.

2.3 Literature Review

2.3.1 Interweaving causes of Impairments

According to the South Sudan National Disability and Inclusion Policy (2013), the government of South Sudan with its current challenges has identified car collisions, eye disease, conflict, poliomyelitis, mental illness, snake bites, physical violence and abuse, hypertension, and HIV/AIDS as causes of impairments. It is also noted that impairments can be acquired at birth considering various health factors. However, it has been acknowledged that the ongoing conflict exacerbated the problem characterised by the high level of poverty, lack of health services, high unemployment rate and exclusion in the education system and the absence of knowledge sharing to address attitudes towards persons with disabilities.

It is estimated that conflict is responsible for twenty per cent of persons with disabilities in South Sudan where people could not receive immediate medical attention after an attack, particularly women and children who experienced injuries while escaping an attack by armed forces. Yet, landmines, sexual abuse and unbearable situations in the bushes while hiding from the militants led to injuries or diseases causing impairments, while persons with disabilities were at a higher risk of being exposed to violence and traumatic events compared to persons without disabilities. There are health cases that could have been prevented or treated to avoid impairments such as tuberculosis, cataracts and polio. Maternal health also became a contributing factor to impairments catalysed by lack of health services (Rohwerder, 2018:12).

Overall, maternal health has received much attention globally, which is to reduce child and mother mortality as well as contribute to the agenda of reducing poverty as outlined in the Sustainable Development Goals. South Sudan remains with maternal health challenges due to lesser resources, poor health services, and infrastructure. According to Singh et al (2009:24), while prioritising the maternal health burden is a significant contribution to poverty reduction and economic growth, in low and middle-income countries a challenge to reach the status of other developing countries is experienced.

The outcomes of a conflict such as destroyed infrastructure and inadequate apportioned resources to health facilities hinder proper development and actual focus to improvement the health sector (Roberts et al, 2008). Singh et al (2009:13) further suggest that during pregnancy women and children are at risk of being left with impairments ensued by various medical complications which may occur and, as a result, those affected will be left with disabling environments and exclusion from economic and social participation.

South Sudan has the worst infrastructure as a result of the conflict and the effect of the conflict also made the country the most disadvantaged economically. Resources are limited and health facilities are not up to standard to instantly cater for those injured in the war or generally provide health care services. The conflict led to many people fleeing the country but there has been some returning only to find poor conditions awaiting them. There has been less awareness and information sharing about war and its causes to impairments and post-conflict there has not been many programmes set in place to manage the impact of war which ultimately in some instances led to various impairments as a result of the exposure to conflict (Ayazi et al, 2013:2). The conflict has left many households with no provision of basic services, injuries and impairments. Trauma is also one of the contributors to impairments (Lado, 2011:36).

In South Sudan, leading causes of trauma were vehicle accidents and gunshots. The post-traumatic events left by involvement in the conflict has not received adequate attention particularly to address traumas. The delayed access to trauma treatment then leads to psycho-social disabilities. Currently, there are no facilities to accommodate people with disabilities who had only been treated for trauma, but not those with cognitive or physical disabilities to rehabilitate them for a long term recovery.

Impairments are caused by various factors and some are neglected tropical diseases (NTD) which could also be fatal such as visceral leishmaniasis (VL) which is associated with poor health conditions, civil unrest and poverty. South Sudan is home to NTD's and malaria including other infectious diseases such as leprosy.

According to Groce et al (2011:1497), conflict leads to poverty and there has been much evidence on the relationship between poverty and disability. Disability makes poverty visible when the need for the provision of necessary support arise. People with disabilities face discrimination daily with no support mechanisms in place including reasonable accommodation provisions. According to Trani et al (2011), governments that fail to plan for risk management mechanisms often face challenges when they are hit by crises. The commitment and obligation to provide for citizens must be harnessed relations between people and the government.

During humanitarian crises children become more vulnerable, disabled, displaced or even killed due to neglect, and the nature of the conflict itself is characterised by different incidences. Trani et al (2011) further argue that when good policies are in place, they make the best intervention even though situations differ as well as the outcome. Tigere and Moyo (2019:64), suggest that there are specific laws to deal with disabilities in South Sudan but the challenge has also been worsened by little information on disability prevalence to draw an accurate conclusion on the deficits of policy implementation. Tigere and Moyo (2019:64) further suggest that the inclusion on disability programmes is feasible once the incorporation is embedded at the planning level where the actual inclusion must take place.

People with disabilities are marginalised due to stigmas and discrimination linked to their inherent condition of impairments while inaccessible aspects of life create a disabling environment that hinders their full participation to enjoy life equally as others (Gilbert, 2016:14). Fernandez (2017:8), argues that non-ratification of the United Nations Convention on the Rights of People with Disabilities (UNCRPD) leads to further failure to popularise disability-inclusion policies. The negative commitment by the government drives the general population to a lack of interest in understanding the need to include people with disabilities and iron out the issues seen as barriers.

The disparities visible in South Sudan are heightened by a continuous conflict and people with disabilities remain impoverished with no recourse mechanisms in place while the state opted to ignore means to build a relationship with its citizens and understand their needs. People with disabilities remain discriminated against without being empowered to fully participate in society and are still viewed as sick people who cannot function independently. Traumatic events have mostly contributed to various impairments and it becomes a responsibility of the state to re-establish inclusive plans and address these imbalances. People with disabilities are trapped in a cycle of poverty and disabilities which could only be broken through constructive and inclusive interventions.

2.3.2 Evaluating the Socio-political status of South Sudan

The aberrant political status of South Sudan has been continuously fueled by the interest in its rich mineral resources such as oil, gas and mining which drew the attention of both state and non-state actors (Akuey, 2018:221). The incorporation of Independence in 2011 brought a paradigm shift to the socio-economic and political status of South Sudan. In some instances not only mineral resources attracted crime but also wild trafficking and ivory poaching, which has been Africa's nightmare for a long time, as well as illegal charcoal production which found its way to further distract the anticipated stability of the country.

In Africa, there has been much interest in state resources by elites for self-beneficiation while the proletariats remained poor. External groups have always played a role in financing instability and attracted those holding power, including organised labour. The social class system as articulated by most researchers from the West has not found a simple characterisation to fit different levels of social classes amongst communities in Africa (Thompson, 2010:99). Capitalists determine economic control and influence those holding political power to direct state resources in their favour while the power is assimilated and all interest groups are re-organised to follow what has been negotiated on the table. Thompson (2010) further argues that within the ruling elite there are always different interests by various power blocs leading to civil conflicts.

Historically most African leaders have been misappropriating state resources for self-enrichment. The case of accumulation of wealth through abuse of State power and control of strategic functions of government has not always been to display wealth but to invest in lucrative projects to reduce the gap between the bureaucrats and well established wealthy individuals. In the process, traditional leaders the organised civil society representatives are captured into the system and the working class remains neglected. Competition for state resources leads to chaos when government leaders and their competitors do not find common ground, tensions tend to escalate and lead to an armed conflict all in the name of economic and political power. In Africa, unlike in the West, there are elements of ethnicity and national identity that are likely to divert peacemaking efforts which would further limit chances of bargaining through negotiations.

According to Buzan (1993), the environment, politics, economy and the military become essential to understanding the security status of a particular setting. This notion then implies that to understand the underlying root causes of instability, which affects the wellbeing of society and consequently neglect the rights of all persons, all aspects involved cannot be left aside. Aspects identified are intertwined and need to be carefully analysed, such as all criminal activities, unresolved political differences and scrambling for natural resources (Akuoy, 2018:223). Conflict as one of the causes of disability cannot be ignored when basic services to people are not provided. Berghs (2018) argues that society and unfavourable environments become disablers of a person with physical impairments when contributing factors remain unresolved.

According to Heymann et al (2014), inequalities result as barriers to equal participation by persons with disabilities. Yeo and Moore (2003) suggest that inequalities between persons with disabilities and persons without disabilities need to be attended to in particular to address discrimination and exclusion. Inclusion of the vulnerable groups cannot be postponed while awareness to break barriers for participation can be achieved with limited resources and difficult working environments such as during civil conflicts.

The ongoing instability in South Sudan since the civil war broke out in 2013 has diverted the country to manage and roll out optimistic plans as supposedly planned for when the

referendum process was agreed upon, leaving the state in disarray (Mamdani, 2016:6-9). In the international political context, whilst South Sudan found its independence the idea was to develop its legal frameworks and, as a member of the United Nations, align its national frameworks to the international humanitarian standards such as signing off the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) and its optional protocol, which it has not ratified (Rohwerder, 2018:8).

The impetus to development programmes for disability has seen activists recommending to all governments to ratify the UNCRPD (Aldersey, 2013). The UNCRPD seeks to “promote and protect the rights of persons with disabilities and ensure full and equal enjoyments of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity”. Akuey (2018:220) argues that South Sudan has all the signs of a failed state and inherited dysfunctional governance in 2011, and reasonable time and space was not afforded to allow the state to focus on governance as prescribed by the Westphalia order.

The 2011 independence through a referendum as an effort to give South Sudanese independence was expected to reconstruct and reassert reforms. The country moved into another intra-state conflict due to the scramble for resources which opened up other illegal opportunities. The political atmosphere continues to be unstable while those affected by the conflict remain poor without being supported. The long-term effects of the conflict left people with disabilities more discriminated against. The state has been continuously involved in peace talks but the implementation of agreements has not been realised. Protection of disability rights finds expression in both regional and international instruments, which the country paid little attention to for the creation of national legal frameworks.

2.3.3 Contextualizing Models of Disability

The Medical Model

The medical model of disability can be traced back to the 19th century as a response to address physical and mental impairments differently from cultural and religious practices. Historically when the medical model was introduced, which was seen as a breakthrough in the field of health sciences, persons with physical and mental

impairments were characterised and likened to sick people who had a medical problem and were then to be subjected to medication and isolation (Thomas and Woods, 2003). The model worsened stigmas and unacceptable terminologies such as invalid, cripple, handicapped and retarded emanated from this practice (Creamer, 2009).

The medical model concludes that persons with impairments can no longer function normally in society and their impairments will always be a burden that will disallow them from functioning as able-bodied persons. Lee (1991) argues that disability is not caused by diseases rather inaccessible services to persons with disabilities. Evidence draws attention to the use of the medical model in South Sudan where persons with disabilities are excluded from societal activities. Persons with disabilities are excluded from employment due to an assumption that they could no longer function and produce any work. Moreover, health professionals are seen as experts who can determine the functionality of persons with disabilities (Smeltzer, 2007).

The adoption of the international classification of disability by the World Health Organisation (WHO) in 1980 was following the medical model. Impairments were defined as “any loss or abnormality of psychological, physiological, or anatomical structure or function” which in essence implied that impairments were disabling effects that would disadvantage people with impairments from performing normal activities. The model overlooked the environmental and long-term effects of the disabling environments that had a negative impact (Ngwenya, 2006).

The medical model allows for the medicalisation of disability and much focus is invested on the medical dimension rather than the social-economic environment that could be as well influenced by the cultural norms within societies. The model further subjects people to health treatment and rehabilitation ignoring the extensive exclusion from their communities. The approach only emphasises the recovery from such impairments that will only then allow for their integration into societies. Moreover, people born with impairments or who had them at a later stage in life will be categorised as sick and will undergo treatment without any opportunity to demonstrate other abilities which might not be affected by the impairments, including providing necessary tools that could limit the impact of impairment on functioning.

The medical model ignores the cultural context as a disabling factor. The World Health Organisation developed the International Classification of Functioning, Disability and Health (ICF) in 2001, which adopted the biopsychosocial model of disability as a shift from the medical model to the social model. The biopsychosocial model recognises that the environment can create disability with recognition of the relationships identified with the health status of an individual and the social and physical environment as contributors to disability (Bickenbach et al, 1999).

The Biopsychosocial model of disability

The World Health Organisation formed the International Classification of Impairments, Disabilities and Handicaps. (ICIDH) in 1980 to classify various impairments and the relevant treatment which could be necessary. The installation ICIDH was seen as the enforced implementation of the medical model of disability and was not well received by the disability sector globally. The World Health Organisation shifted its focus to develop the International Classification of Functioning, Disability and Health (ICF) in 2001, which in its conceptual framework practical grounds was to transform from the medical model after criticisms of the medical model (Barnes, 2011:9).

The ICF continued to identify impairments as the functioning of the body and participation in society. The aim to adopt different principles was to be able to identify different types of impairments including their impact on people who had them. The objective was to achieve disaggregated data accordingly and classify different impairments for both statistical and intervention purposes. The environmental and personal backgrounds will then determine how each individual will be impacted upon by the barriers and how governments' stance on disability will determine corrective measures which enable people with impairments to receive services and support required without excluding the importance of their independence.

The ICF regard the social model as the gateway to accept the interaction between cultural and social inclusion in the context of participation. However, concerns have been raised on the social model that it does not cover much on the rights element. Disability has been used as a term to cover impairments and the ICF resorted to using the biopsychosocial model to collect systematic health information on impairments and

treat the analysis differently from subjecting people with disabilities from prolonged rehabilitation and exclusion from participation.

The World Health Organisation positioned its approach on identifying the functioning element of people with impairments rather than only focusing on the impact and the medical factors. The approach identifies challenges to be brought by impairments and impacts on people's daily lives linked to social and environmental factors. It is important to note that an improved health system can reduce the number of impairments as some are caused by poor health facilities. The biopsychosocial model becomes fundamental in the health dimension of disability and the approach enables more factors to be examined which impact the lives of people with disabilities (Dantas et al, 2020:3-4).

The Social Model

This model of disability is a socially constructed practice and found its roots in the 1960s and 1970s where societies were responding to dealing with impairments and finding ways to address diseases causing impairments. The model spread due to a lack of knowledge and awareness as well as a proper understanding of disability (Yeo & Moore, 2003). Unlike impairment, disability is an unfavourable condition created by a society where people without disabilities take over the lives of persons with disabilities such as deciding on their ability to work and receiving an acceptable income and taking decisions on behalf of persons with disabilities.

The model was used in a manner that disadvantaged persons with impairments to fully participate in society. An option to rehabilitate those affected was used and constructive mechanisms to address disabling environments were ignored, such as environmental changes to allow for inclusive participation as well as awareness plans and programmes to educate society on impairments (Barnes et al, 2010:163). Disability is treated homogeneously while persons with disabilities are still marginalised in South Sudan (Rohwender, 2015:5).

In 1976 a manifesto document was published by the Union of the Physically Impaired against Segregation (UPIAS) as an outcome of a discussion between UPIAS and the Disability Alliance in November 1975. The manifesto document was titled Fundamental Principles of Disability and outlined principles which both parties had common

understanding and agreement on namely, disability being created by environmental and attitudinal barriers, inclusive consideration of issues affecting persons with impairments, the emancipation of persons with disabilities, including the provision of skills and necessary resources to allow full participation in society. Persons with disabilities are oppressed as a collective when treated homogenously.

The frameworks developed to address impairments isolate persons with disabilities in political, social and economic participation (UPIAS, 1976). Persons with disabilities deserve better education, decent employment, and accessible housing and infrastructure. The idea that disability is a socially constructed concept strengthened the medical model of disability at the time (Retief & Letsosa, 2018:3).

This model refers to societal attitudes as driving factors to marginalise persons with disabilities within a particular social setting, while medical experts are to determine the functionality of a particular affected individual than allowing self-definitive opportunity to demonstrate ability and participate fully in society (Mitra, 2006: 237). People with disabilities are then entirely subjected to the medical approach of determining their ability to function without being given the space and support through well-planned mainstreaming programmes to determine the extent of the disablement by the environment.

The Human Rights Model of Disability

In 1948 the United Nations adopted the Universal Declaration of Human Rights and the human rights model on disability was later argued for inception, with reference to the universal design (Berghs et al, 2016). The model took as its departure the perceived attitudes which imply that a person who has an impairment cannot participate in socio-economic and political activities due to the nature of challenges that might be brought by impairments. The model, unlike the medical model that helps medical practitioners and rehabilitators to address the medical elements of disability, seeks to develop a more human rights-based approach on disability. The calls by the human rights groups and the disability organisations to abandon the medical model saw the change towards the human rights orientation.

The political atmosphere is mostly informed by the political activities within any nation and the outcome of the political position of any ruling party will inform how rights should be protected and thus calls for the views of people with disabilities to be considered through their involvement in political activities. The global position on human rights protection includes those of women and children and that civil rights should be inclusive of disability rights. Content is usually informed by contemporaneous socio-political movements, such as civil rights, women's rights, children's rights, and, of course, disability rights (Berghs et al, 2016). People with disabilities have rights to independent living, access to a built environment, participation in the economy, equal access to employment as well as enjoyment of all the rights.

Burke (2010), suggest that human rights tools in most instances contribute to responses to upholding human rights as desired by a political environment. The human rights law gradually developed after World War II and more people and organisations were able to make inputs on responsive plans on human rights. The adoption of human rights agreements such as the Convention on the Rights of the Child (CRC) and the Convention on the Elimination of All Forms the Discrimination Against Women (CEDAW) was meant to look into specific challenges on human rights violations but most were results of experiences which did not factor in the disability dimension. The United Nations on the Rights of Persons with Disabilities (UNCRPD) seeks to demonstrate an implementation approach on the protection of disability rights.

The Economic Model of Disability

This model diverts from exclusion and outlines different approaches to disability. The model looks into disabling factors to persons with impairments by governments to draw up policies that are in line with disability mainstreaming (Jordan, 2008). However, South Sudan as a newly developing state dominated by internal conflicts has not factored disability mainstreaming into planning. This model in some instances has been seen as looking only at reducing the cost of disability and analysing the benefits of programmes developed but failing to delve into issues that may be seen as ostracizing to persons with physical impairments.

The economic model respects the notion that persons with impairments are disabled by environments and seeks to highlight elements such as reasonable accommodation and

equal rights to persons with disabilities while looking at the capacity of those who have the ability to perform identified duties and contribute to the economy (Smart, 2004). According to Stubbs (1999), studies in which persons with disabilities are involved, their inputs tend to be more legitimate and those which are exclusive tend to distort the real issues affecting persons with disabilities. In South Sudan disability is still regarded as a medical model where persons with disabilities are excluded from economic participation with a view that their working capacity is compromised (Rohwerder, 2018).

Interactional models

Interactional models employ mixed approaches to deal with impairments and manoeuvre from advancing one particular model to address issues of disability. Persons with disabilities can be affected by both the environment as well as health conditions and respectively there is a need to attend to both. Interactional models view disability as a multifaceted phenomenon and while they seek to create an enabling environment for persons with disabilities, all factors need to be considered. The Social model recognises the marginalisation of persons with disabilities arising from societal attitudes and inaccessibility only emphasising the societal norms and standards as barriers to persons with disabilities.

The cost of disability is generally ignored and willingness to provide reasonable accommodation is low. Persons with disabilities are neglected and not offered a chance to demonstrate their ability to perform their skills and capabilities. Interactional models emphasise the functionality of individuals and seek to view disability differently by looking at all aspects involved rather than relating to one aspect which might compromise the outcome. Personal relations and interactions, government policies, societal attitudes, personal and psychological factors, built and natural environment as well as technological revolution hinder the participation of persons with a disability when it is not inclusive and not crafted to fit into the universal design.

Al Ju'beh (2015:84) argues that exclusive systems discriminate against persons with disabilities and disability right movements have been vocal about systems that seek to impact negatively on disability. Disability occurs when a person with an impairment is unable to perform functions that an abled-bodied person could perform. Lack of financial resources can increase the challenge even though it is acknowledged that assistive

devices are costly but mainly do assist to allow a person with impairment to perform general functions.

Trani and Loeb (2012:20) and Mitra (2006:236) suggest that age, gender and the type of impairment also determine the ability of persons but it is acknowledged that persons with the same type of impairment can experience different challenges. It becomes fundamental for persons with disabilities to be afforded a chance to demonstrate their ability and their capability level be fully exploited considering that limited resources and freedoms are seen as disabling factors.

2.4 Conclusion

The medical model subjects people with disabilities to be unable to function in society leading to social exclusion. However, persons in South Sudan do not receive the quality health care they deserve making them vulnerable to poverty as well as increasing factors that hinder their full participation and contribution to communities they belong to. The social model, on the other hand, promotes equity and is based on supporting people with disabilities to equally find their footing within a social setting. Moreover, while the economic model promotes inclusive economic participation, the interactional model uses mixed models to attend to specific aspects to remove barriers.

The attitudes of people on disability need to be changed because they disadvantage the chance of people with disabilities on employment attainment in all economic, social and political value chains. The United Nations Convention of the Rights of Persons with Disabilities adopts both the human rights and social models. The social models emphasise that societal, attitudinal and physical barriers disable people with impairments to exercise their full rights in their respective communities. The social model further suggests that the discriminating society disables people with impairments, and not because of them having such impairments (UNRCDP, 2006).

Interactional models use different enabling models towards the implementation of disability rights programmes and the development of policies while the biopsychosocial model shifts from the medical model. However, the economic model of disability looks into barriers to economic participation and recognises the impact that could be achieved when equal opportunities are correctly institutionalised through the eradication of

discrimination. The rights of children with disabilities are equally fundamental and their early childhood needs to be prioritised at early stages to be able to identify their capabilities as well as allow them to make life choices equally to their counterparts. Moreover, the implementation of the UNRCDP articles is important to champion the emancipation of people with disabilities in promoting and protecting their rights. People with disabilities require to be developed and supported for self-independency with their rights upheld (Degener, 2016:9).

2.5 The Status of Persons with Disabilities

2.5.1 Access to Education

According to Smith and Liesbet (2014), South Sudan ranks the weakest in terms of general access to education. Smith and Liesbet (2014) further suggest that half of the primary school-going age children are not enrolled. Smith and Liesbet (2014) argue that at the secondary level the situation is the worst and a large number of children who enrolled in general drop out. Groce & Kett (2014: 8) suggest that children with disabilities experience the worst form of environmental discrimination and only a small number would attain education. Groce and Kett (2014:8) further suggest that children with sensory impairments are likely to be less fortunate unlike those with physical impairments.

According to Rimmerman (2013:22), persons with disabilities globally have been subjected to an ostracizing setting such as institutions consisting only of elders with impairments and special schools which are poorly managed serving as dumping sites for children with impairments. The exclusion of persons with Disabilities poses more economical effects while human potential and capacity can be neglected (Polack, 2014). According to Forcier (2016:21), an inaccessible built environment, in general, contributed to marginalisation. Persons with disabilities are unable to access sports facilities that are not universally designed to suit different types of disabilities where talent could also be lost.

Rohwerder (2015:12) further suggests that women, children and girls experience a double form of discrimination and inequalities. In South Sudan, children with multiple impairments, psychological impairments and girls with disabilities have a limited chance

to access schooling. Moreover, limited access is driven by a lack of skilled teachers, poor infrastructure, distance, and negative attitudes by society in general. Transport and communication services are inaccessible to persons with disabilities and most schools in South Sudan are far from the initial residential area.

The South Sudanese National Disability and Inclusion Policy (2013) is a human rights-based piece of legislation that seeks to promote among others fair and equal participation in education by people with Disabilities. This policy highlights the need for persons with disabilities to be educationally capacitated and be included in the workforce to reduce economic vulnerability. This should follow from an awareness within the education discipline and also improved schools infrastructure while asserting *scholarships for people with disabilities. The future of children to understand their rights and be informed on political participation at a later stage will be largely determined by education attainment. Reconstructing disability elements in all educational programmes and managing accessibility from the early childhood level will serve as a foundation that will also ease their development in special schools programmes at all phases.

Moreover, conducting disability audits, providing accessible means of communication such as Braille will be key to mainstreaming disabilities. Budget adjustments and allocations as well as the introduction of sign language in an educational training curriculum together with the review of current legislation are key priorities outlined in the policy (NDIP, 2013). Sida (2014:2) suggests that besides the current national policy on disability and education there are no other legal frameworks to implement the policy position. Sida (2014:1) further suggests that war veterans have experienced and witnessed the effects of war and have been vocal on protecting the rights of persons with disabilities which have been ignored. The national policies do not necessarily address challenges to children with disabilities, which enhances more negative attitudes on disability. Policies require implementing programmes that require a budget and it is through political will and commitment where positive outcomes could be realised.

2.5.2 Socio-economic Status in context

The prolonged intra-conflict in South Sudan had an impact on the livelihoods of people where the provision of services to the people had been neglected. The economic status

of South Sudan has continues to collapse contributing to poverty and poor health services. This inhabitable environment has left many children malnourished with high poverty levels in rural areas, including 70% of people in urban areas living below the poverty line. The Covid-19 pandemic has worsened the conditions and the country is struggling to keep up with the pressure (Avis, 2020:2). According to the World Health Organisation (2018), more people were prone to diseases and injuries caused by the conflict and that the management of such cases takes longer for people to recover.

South Sudan experienced a cholera outbreak in 2016 and the poor health conditions have made it difficult for the country to handle such an epidemic in the midst of other health-related conditions and the collapse of the economy. Access to health facilities is poor with only 22% fully operational health facilities. Moreover, challenges on shortage of health professionals and shortage of medication have exacerbated the ability to provide health services to the entire population. Avis (2020:5) further argues that mental health and other chronic diseases such as HIV/AIDS have received less attention due to shortages in drugs and relevant health-related services. These disastrous conditions have increased the number of disability causing related diseases such as meningitis and kala-azar while cases which are psychosocial increased contributing as well to the rise in mental health.

The people of South Sudan have survived economically through agriculture and the climatic conditions such as floods have destroyed arable land with more diseases affecting livestock. Moreover, the country has limited support to vaccinate livestock, and systems used to detect future threats have found serious challenges in the South Sudan agricultural sector. These challenges have started to exert pressure on many families and households' livelihoods are difficult to withstand the pressure. The potential of sustainable livelihoods has been erased and more outbreaks of diseases are expected to hit the country amidst Covid-19. The World Bank (2020), suggests that the current ongoing conflict has affected prospects of investment and the profits accumulated from oil trade have dropped, affecting the Gross Domestic Product (GDP) of the country. The decline in the economy means fewer employment opportunities for the people. Moreover, food prices had increased the poverty level. The WHO (2018) suggests that more infections in the country will affect social cohesion and school attendance with the

fear of being infected. The attitudinal barriers will also rise, particularly to those who have contacted any disease.

The projected outbreaks bring about challenges for those who have been subjected to concentration camps, sexual violations and gender-based violence. People with disabilities, older persons and people with chronic diseases are at risk of experiencing more negative impact. Most funds that have been prioritised to address past disparities and education may be directed to respond to disease outbreaks. Disease outbreaks have a long-term impact on economies and response mechanisms may fail to adequately support struggling households. More infectious diseases can put pressure on South Sudan to implement restrictions on travelling and market trading periods which at a later stage will create more rising prices and retrenchments.

The vulnerable environment may open space for political antics and the inability to provide the necessary support to the population might lead to more disruptions such as riots. Diseases outbreaks are unexpected and time might be needed for a scientific response that could lead to impatience by communities leading to tensions and violence. The worst-case scenario could be the situation being dragged to a political game where more resources will be diverted to sustain political power. The conditions in South Sudan have negatively impacted people with disabilities. The government of South Sudan lacks sufficient data on people with disabilities which affects correct projections of the budget that needs to cater for disability-based programmes.

The country has proved its incapacity to provide for people with disabilities and international aid has not been sufficient to address these challenges. Women and children with disabilities become more vulnerable to sexual abuse due to them being neglected and ostracised. Employment opportunities are never earmarked for people with disabilities, leading to poverty and malnutrition. There have not been sufficient food security programmes to provide for this vulnerable group with no support for self-sustainability. The conditions caused by disease outbreaks will increase the current gap notably inaccessible protection of civilian sites. Empowerment of people with disabilities remains an idea leading to socio-economic vulnerability.

2.6 Barriers on disability inclusion

Attitudinal Barriers

Barriers to participation by persons with disabilities are a result of inaccessible environments and marginalisation due to negative attitudes (Rohwerder, 2015:33). According to Schulze (2010:173), persons with disabilities are not considered when programmes are being developed and only four per cent of persons with disabilities benefit from international cooperation globally. Attitudinal barriers are driven by negative attitudes and lack of knowledge on disability. Societal norms and standards as well as cultural practices, which sees impairments as witchcraft, perpetuate stigmatisation and discrimination and persons with disabilities remain marginalised.

Lack of progressive social cohesion programmes as well as protected rights are a result of denying persons with disabilities opportunities to participate in decision-making as well as during planning. Persons with disabilities are deprived of their fundamental human rights and opportunities to live fully. Stigmas create a disabling environment leading to bullying and undermining the existence of other persons with disabilities.

Mont (2014:24) suggests that low- and middle-income countries have higher levels of negative attitudes compared to high-income countries. (Konopi et al, (2019:244) suggest that South Sudanese are still lagging behind due to the non-popularisation of disability policies. Disability is still viewed from a medical model perspective making people with disabilities continuously face discrimination including the inability to find employment. South Sudanese with disabilities remain poor with only support from international assistance.

Environmental Barriers

Environments that are not accessible to persons with disabilities are seen as disabling and barriers to participate fully (Rohwerder, 2015:33). Built and natural environments are key to assisting in the smooth mobility of persons with disabilities and those who might require such access. According to the WHO and the World Bank (2011:262), the lack of the provision of accessible infrastructure denies persons with disabilities the opportunity to participate in society. Persons with different kinds of impairments require

different kinds of accessibility as well as opportunities to determine the type of assistive means.

Moreover, inaccessible communication platforms may restrict persons with disabilities to acquire relevant and important information. Media platforms carry information on knowledge and opportunities aimed at changing the lives of the people. It becomes fundamental that communication systems become disability accessible to accelerate inclusivity (Wapling & Downie, 2012:21).

Konopi et al (2019:243) argues that physical environments in South Sudan are a barrier to smooth participation by people with disabilities. Built environment such as schools, hospitals, recreational facilities and government offices are not accessible to people with disabilities and impedes their participation. South Sudan has no policy on transport infrastructure which would consider the needs of people with disabilities.

Institutional Barriers

State institutions and private organisations develop laws that exclude elements of disability inclusion resulting in marginalisation. Laws that are not necessarily explicit on the promotion and protection of the rights of persons with disabilities are seen as exclusive and inconsiderate to fully implement enabling policies that can allow persons with disabilities to function and participate fully without any hindrance (Wapling & Downie, 2012:21). According to Al Ju'beh (2015:87), in some parts of the world persons with intellectual disabilities are highly marginalised.

The World Bank (2011:6) suggest that countries do not consider the needs and inclusion of persons with disabilities when developing legislation leading to discrimination. Negative impact by legislative frameworks which might not have been consciously intended to discriminate against persons with disabilities, is the result of inability to consider the rights of all sectors in discriminating laws by governments and other institutions.

South Sudan developed the National Disability and Inclusion Policy even though progress is stagnant. Sluggish implementation of policies and insufficient political support delays progress (NCG, 2012:85). Attitudes towards persons with disabilities

within organisations can accelerate exclusion. Internalised barriers can include a lack of positive relations with persons with disabilities as well as undermining their capacity resulting in low self-esteem. According to Bruijn et al (2012:16), the further exclusion is a result of not considering the extra cost that comes with an impairment such as reasonable accommodation and assistive devices which other organisations see as extra costs to their budget. Ignorance and the notion that disability inclusion needs additional sophisticated programs carry wrong perceptions and generally serve as catalysts for marginalisation (World Bank, 2011:263).

2.7 Overview of International and National Frameworks on Right to Political Life

2.7.1 Regional and International Protocols

According to UNHR (2010:5), men, children and all persons with disabilities have for a long time been ostracised within societies due to their impairments while abilities within them were not recognised. Disability is a Human rights issue and persons with disabilities are like everyone entitled to enjoy their fundamental and inherent human rights. South Sudan has not yet ratified the United Nations Convention on the Rights of Person with Disabilities. However, the situation in South Sudan has been identified as critical while the civil conflict has been ongoing. Persons with disabilities have been left without any assistance while armed forces had been attacking civilians leading to impairments, torture or death (Mednick, 2019:2).

In 1981 the World health Organisation undertook a study to investigate the prevalence of disability exclusion and the level of poverty imposed on persons with disabilities. The study resulted with conclusions that almost in every country, on average, 10% of populations consist of persons with disabilities. Metts (2000) suggests that figures changed as methodologies shifted around economic statuses particularly where, in developing and developed countries, the number of persons with disabilities was calculated and estimated to be less than in poor and non-industrialised countries.

According to Yeo (2001:8), concluding results were not accurate due to a lack of information and misguided information. In some instances, results were conflicted, indicating more disability prevalence in richer countries. However, conflicted results were due to more flexible participation in the study of richer countries than poor

countries where persons with disabilities are still hidden and at that point data is lost where only persons with visible disabilities could be included during the study.

South Sudan's drafted a transitional constitution in 2011 which assured protection of human rights and the approach was to capture all rights in the bill of rights chapter. The constitution of South Sudan ensures the protection of disability rights through article 30 (1) and (2), highlighting an obligation by the government to ensure people with disabilities fully enjoy their fundamental human rights and freedoms equally as others. The constitution further binds duty bearers to ensure the provision of services such as good health care, education and access to employment (Konopi, 2019:232-233). In 2006 United Nations member states adopted the United Nations Convention on the Rights of Persons with Disabilities and its optional protocol (UNCRPD, 2006).

The convention is based on eight principles that are to guide member states on promotion and protection of rights for persons with disabilities. The optional protocol, when ratified, commits a member state not to impede on reasonable frameworks that provide for human dignity, self-definition, inclusivity, non-discrimination, respect for human diversity, equality, reasonable accommodation and recognition of human capability (Oyaro, 2015:348). Persons with disabilities have always been part of inclusive human rights by societies but the convention brought about explicit guidelines at an international level to institutionalise its legal muscle.

According to the UNCRPD (2006), the Convention on the Rights of Persons with Disabilities encapsulates all other disability rights legislation efforts by the United Nations since 1981. The protocol came into effect in 2008 after member states had ratified it. However, the African position of the rights of persons with disabilities has its footprints in 2003 when the African Union (AU) held its Ministerial Conference on Human Rights resolved on drafting a protocol on Persons with Disabilities and the Elderly. The call came after deliberations were put forth by member states that the overall picture was that vulnerable groups were highly neglected and disenfranchised.

The African Commission on Human Rights and Peoples' Rights delegated its working group on disability to draft both protocols on Persons with Disabilities and the Elderly. The Working Group continued by drafting separate protocols on disability and older

persons to allow reasonable expression of all the rights for both sectors even though the draft Protocol on Persons with Disabilities had its gaps and was to be withheld and reviewed in 2011. The call to review the African Protocol on Disability was after the adoption of the United Nations Convention on the Rights of Persons with Disabilities which came into effect in 2008.

South Sudan has ratified the UN Convention on the Rights of the Child (CRC), the UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and its optional protocol, the Convention against Torture and Other Cruel Inhuman or Degrading Treatment or Punishment and its Optional Protocol. Optional protocols is side agreements that commits member states not to divert and tremble upon rights enshrined in the convention. South Sudan has not been playing its role in monitoring the harmonisation and domestication of these international conventions (Konopi et al, 2019:231).

The African Charter on the Rights of Persons with Disabilities and the Elderly provides for special protocols to be effected to strengthen compliance. The United Nations Convention on the Rights of Persons with Disabilities will not receive similar expression globally particularly in Africa due to extreme poverty levels in Africa. The African Union Charter on Disability Rights worsens the situation for persons with disabilities in Africa where they experienced callous treatment resulting in this disenfranchised sector remaining poor, neglected and illiterate. It is without a doubt to highlight the religious and cultural beliefs which restrict persons with disabilities to participate fully and enjoying their fundamental human rights. This situation led to a level where children with disabilities have been locked away within households to avoid discrimination from the broader society.

The draft African Union Protocol on the Rights of Persons with Disabilities had its gaps due to inclusive drafting while disabled peoples' organisations have reflected on the fact that a blatant exclusion of the disability sector was experienced, resulting in a product which did not carry expert opinions. The African Unions' Disability Rights Secretariat, the African Decade, did not play a role in drafting the first draft protocol on the Rights of Persons with Disabilities.

The Draft Protocol left out several African elements which could not be expressed in the United Nations Convention on the Rights of Persons with Disabilities. However, several opinions were to either allow countries for the domestication of the United Nations Convention on the Rights of Persons with Disabilities due to the long process of implementing a treaty as well as its impact on financial resources (Viljoen, 2010:75-93). However, the need to provide separately for the elderly and persons with disabilities has been highly applauded due to different needs by both sectors while combining the two in one protocol could be detrimental.

Viljoen and Begion (2010) argue that an effective way to domesticate a protocol, there is a need to develop reporting frameworks by countries for States to adequately receive guidance on what should be done. The efforts to force countries to comply are never simple but reporting guidelines opens a platform between the disability sector and relevant bodies such as the African Commission of Justice. The adoption of the African Union Protocol of Disability Rights should be separated from ratifying the UNCRPD and its optional protocol as the African Union protocol familiarises its principles at a continental level rather than generalised opinions linked to European lifestyles.

The National Democratic Institute (2012) argues that the United Convention on the Rights of Persons with Disabilities (UNCRPD) recognises persons with disabilities as right holders transitioning from a dependency and blatant presumptions that persons with disabilities lack desire to fully participate in the entire spectrum of life including socio-economic and political participation. The convention (UNCRPD) with its fifty articles provides for states to swiftly mainstream disability ascending from protected human rights enshrined under supreme state laws. The UNCRPD directs states to fully implement the articles as outlined and with its optional protocol non-compliance is unnegotiable.

The African Union through the African Union Disability Institute developed an implementation machinery at a regional level that will be responsible for monitoring African countries on the implementation of all treaties linked to Disability Rights. According to Rohwerder (2018), Disabled People Organisations (DPO's) in South Sudan were constantly involved in drafting the National Disability and Inclusion Policy of 2013 and the Inclusive Education Policy but budget constraints and the absence of

political buy-in compromised the implementation phase. Most African countries have organised the disability sector either in a form of forums or councils to use their experience and expertise on crafting responsive tools for the right holders. The disability sector participation at the regional level accelerates consultation attitude, as well as strengthens the monitoring and coordination of commitments made by countries on protection of the rights (Sida, 2014:1).

2.7.2 The Status on Inclusive Political Participation

Virendrakumar et al (2018) argue that while the UNCRPD seeks to close the gap of exclusion and allow persons with disabilities to demonstrate their ability and fully participate in all aspects of life including political processes, South Sudan has done less to support and implement the directives of the UNCRPD which it has not ratified. Political participation becomes an important trait in decision-making for the state to democratically function without violating the rights in an autocratic style. Persons with disabilities are subjected to neglect economically while they require the same needs as abled-bodied persons. However, Persons with Disabilities may require additional support due to their impairments. In an electoral process, barriers may occur at different stages at any time. Limitations to participation may be exacerbated by inaccessible infrastructure, stigmas, societal ignorance as well as financial resources.

The current international democratic system of voting underpins the participation of people to influence decisions by governments. An electoral process varies from standing as a candidate, campaigning for a political office as well as deciding on a ballot for a preferred candidate. Persons with disabilities are eligible to become part of the process without any restrictions. People with disabilities have not received reasonable accommodation to be included in electoral processes and the general environment has acted as a barrier to political participation (Groce et al, 2011:1499).

Forcier et al (2016:4) argue that persons with disabilities have been alienated while self-representation has not been considered. The disabled people's organisations in South Sudan have been vocally advocating for a five per cent representation on all government institutions but less attention has been given to it. Persons with disabilities continue to be underrepresented and their inputs are unlikely to be included during

government planning processes. In 2018 the government of South Sudan's renewed the Peace Agreement which will then form the foundation of state building and excluded people with disabilities during its drafting with the final signed version silent of disabilities (IGAD, 2018).

During the 2011 referendum, the government of South Sudan explored mechanisms to encourage participation from the disability sector, unfortunately only those with sensory and physical impairments were given attention excluding those with intellectual disabilities (Sida. 2014:1). The disabled people's organisations have been encouraging and putting pressure on the government to include them in public affairs and the movement has been constantly involved in the South Sudan National Dialogue (Rohwerder, 2018).

According to Vhumbunu (2018), the government of South Sudan announced the National Dialogue in December 2016 that aimed at opening up discussions from local up to the national level and identifying factors that impede peace processes. The dialogue was planned to unfold from the end of 2018. Vhubumu (2018) suggests that the national dialogue aimed to convene consultation engagements consisting of all affected sectors both inside and outside the Country. Persons with disabilities are at most risk during armed conflict and are usually neglected (Rohwerder, 2018).

The government of South Sudan had arranged its general elections in 2015, unfortunately with the intensive destabilised political environment, postponement became an alternative. The Parliament had approved the extension of the President's term to 2021 to allow for a smooth transitional arrangement (Nyadera, 2018:2). South Sudan is not explicit on disability but founded in its principles on free and fair elections. The National Elections Act stipulates the promotion of non-restrictions to participate freely as candidates and voters during the election period (National Elections Act, 2012).

The South Sudanese National Disability and Inclusive Policy, 2013, admits undesirable conditions faced by persons with disabilities in the country and the policy seeks to concretise rights protections based on research and analysis available. The Policy further highlights barriers restricting persons with disabilities to fully access polling

stations, reasonable accommodation on communication, including consideration of accessible facilities.

According to NDIP (2013), the policy finds its basis on the United Nations Convention on the Rights of Persons with Disabilities among other guiding legal frameworks. The policy directs the government to adhere to disability mainstreaming and facilitate the provision of disability user-friendly services at all levels as inclusive. The policy further directs removal of all barriers such as inaccessible electronic services, transportation and built environments. The UNCRPD, (2006) guides countries to make provision for persons with disabilities to secretly cast a vote during elections and referendums. The constitution of South Sudan protects all citizens on their right to vote and stand for elections but there has been no evidence of people with disabilities who participate in these structures (Konopi et al, 2019:242)

The prolonged civil conflict which broke out in 2013 slid the country into disaster with several attempts to reach an agreement. Thiong (2021) suggests former rebel leader Dr Riek Macher had returned to the capital of South Sudan at the beginning of 2020 and was later sworn in as the vice president in efforts to reach a constructive peace deal. Parties to the conflict had the responsibility of implementing a renewed 2018 Peace Agreement between February 2020 and February 2021. Only a little progress has been identified on implementation of the Peace Agreement where the government was able to be reconstituted which was to be followed by commissions and Parliament.

UNCRPD (2006) further instructs countries to respect the inherent human dignity to be enjoyed by persons with disabilities by allowing for open participation during elections and participation in national affairs through democratically elected individuals. South Sudan experiences an African general crisis where newly developing states are diverted from real governance issues to the power struggle and battle of different ideologies (Nyadera, 2018:8).

2.8 CONCLUSION

This chapter presented the theoretical framework and literature review. Theories examined were the human development theory as well as the social contract theory which are to be adopted to guide the dissertation. The human development theory

mainly directs the study to scrutinise stigmas and perceptions by societies on how they view disability and neglect optimistic relations that can support persons with disabilities and include them in societal activities. The social contract theory guides the study on the relation and the contract that binds both societies and government where resources are distributed equally and law as the order of the day supposedly to be inclusive to all persons. The literature reviewed, looked into the major causes of physical impairments and other contributing factors as a starting point where a problem has to be identified to find a solution.

The literature also delved into the socio-political status of South Sudan to identify the progress and current dynamics where national policies and international status were examined. Models of disability used in various countries were highlighted to interrogate and identify the world best models and that which is currently used in South Sudan and their effects. International frameworks on Disability Rights, as well as the status of political participation were examined. The literature emphasized conflict as a cause of poverty and exploited knowledge on how poverty and conflict exacerbate disability. The country has not committed its focus on domesticating international instruments on human rights protection whilst the UN Convention on the Rights of Persons with Disabilities remain unratified. The political space has not been conducive allowing for inclusivity whilst the constitution reaffirms protection of all rights.

CHAPTER 3 REINTEGRATION, LIVELIHOODS AND THE RIGHTS TO EDUCATION

3.1 Introduction

This chapter seeks to provide considerable scrutiny on barriers disabling persons with different impairments and further exclusion to persons with disabilities in the public sector as well as access to basic requirements such as education, social life, employment and consultative measures. Persons with disabilities will be located amidst the ongoing conflict to explore their participation and exploitation. International frameworks will be assessed against actual tools in place and thoroughly exploit processes planned to harmonise inclusivity working towards a human rights-based model on disability. The ability to function depends on sufficient supporting policy frameworks which are to be developed and implemented by the government as a commitment to services to the people. People with disabilities remain excluded while their plight will be explored in this chapter.

3.2 People with Disabilities amidst Intra-State Conflict

According to Blanchard (2016:4), the United Nations has categorised South Sudan as one of the crucial areas in need of humanitarian assistance placed on level three making it the only country in Africa to be categorised in that level. Sikorski (2017) suggests that the prolonged civil war and the war, in general, left many South Sudanese impaired mainly due to injuries and the non-responsive health service. The instability has crippled many key sectors aimed at delivering services to the people. Disabled people have been temporarily allocated campsites managed by the United Nations to provide shelter and food. The human development theory suggests a need to develop people with disabilities to function without being deprived from services aimed at improving various aspects of their individual lives (Mitra, 2018:17)

The conflict accounts for 2.7 million internal and external displacements, more than 50 000 deaths and about 160 000 migrations. South Sudan's government army has also been implicated in serious human rights violations including killings and sexual abuse. The status of instability in the country opens up for human rights violations and many

have been victims of violence directly and indirectly. The international peacekeeping response has been criticised for being less effective, including internal interventions to curb the increased momentum of the conflict.

Blanchard (2016:4) further suggest that host countries such as Uganda and Sudan have been receiving asylum seekers and other migrants with a high number constituted by women and children. Displacements have called for more humanitarian support pressuring a country with limited resources. Most displaced people have lost their financial support with consistent high food prices in South Sudan. Displaced people with disabilities temporarily living in campsites were unable to find job opportunities while some resorted to trading outside camps due to their inherent disabilities (Human Rights Watch, 2017). Almost 40% of South Sudan's population requires financial assistance with many being subjected to extreme hunger due to prowling on food reserves donated by international donors such as the United States as the largest financial contributor.

The campsites are accommodating an estimated number of 250 000 people with disabilities, erected to provide for the protection of civilians during the ongoing conflict. Many people with disabilities had joined those who have migrated to neighbouring counties and across the country, particularly to rural remote areas. It has been estimated that more than one million people with disabilities have fled the opportunity to be accommodated at these sites. Human rights agencies have committed to providing reasonable services to the elderly and people with disabilities as they constitute a population segment at high risk and vulnerable during the conflict (Sikorski, 2017).

The dynamics and new developments of the conflict leave people with disabilities at high risk and they could be victims to attacks at any time due to the physical inability to escape quickly as well as the disabling environment. Many incidences had been reported where campsites will experience an attack and, as a result, people with disabilities would be killed but not necessarily because of their inherent impairments but the disability to react quickly. Sikorski (2017) suggests that people with disabilities at campsites had also been subjected to unreasonable and unfavourable conditions against the main objective of protecting human dignity.

Most people with disabilities have physical impairments as a result of the conflict but they are expected to move from time to time to collect food and other necessities without being provided with reasonable accommodation according to their needs. Neighbours have been providing support to people with disabilities on occasions where people with disabilities could not be able to do on their own but a small fee would then be paid to the neighbour.

South Sudan is challenged with providing security at the protection of civilian sites despite the collapsing humanitarian support provision. In other areas such as Northern Bahr el Ghazal extreme hunger has already spread the area and people are faced with serious starvation. Blanchard (2016) suggests that the International Monetary Fund has advised on economic reforms and peace agreements to stabilise the political environment paving a way to the new dawn. Donors have realised concerns over corruption and warned the government of South Sudan on its catastrophic route.

The campsites, in the way they had been erected, are not accessible to people with disabilities as they have not been developed according to the universal access standards and have not even been adjusted to meet their needs. According to (Human Rights Watch, 2017), protection of civilian sites is located in the United Nations bases to ease access and management even though some groups had camped outside the United Nations bases to avoid possible attacks by rebel groups. It becomes difficult for the humanitarian team to reach them as they are mainly located in remote areas where resources are limited as well as the scarcity of resources. The camps in remote areas also house people with disabilities and the elderly but they are at more risk of not receiving humanitarian aid. Those in remote areas will be prone to infectious diseases as they are now unable to receive the humanitarian aid package which includes health services.

According to Legge (2016), organisations for social relief channel their services to persons with disabilities who mainly acquired their impairments due to the conflict's direct effects. Persons with disabilities accessing services at humanitarian campsites have not had it easy. Discrepancies are identifiable between persons with disabilities and people without disabilities. According to the International Organisation for Migration (2018), there is a lack of accessible communication formats to persons with disabilities

as well as a low literacy rate which limits people with disabilities to be active in the protection of civilians' campsite life. The approach used to identify persons with disabilities fails to recognise the fact that not all disabilities are visible, which impacts access to services.

Humanitarian actors had developed data-collecting systems for the elderly and people with disabilities including orphans classified as people with special needs. Those who had camped at remote areas contributed a little where data collection assists in accounting for several people in need as well as specific allocation on aid. Community leaders had played a role in providing data even though that information could be inaccurate at times. The insufficient information about people with special needs will then pose challenges to humanitarian actors to allocate support efficiently. Government and rebel forces have also been identified as an obstruction on the provision, characterised by raiding, attacks and looting resources meant for the needy (International Organisation for Migration, 2018).

The approach by humanitarian actors to the assistance is generic to all without consideration of different impairments. The sanitation apportionment lack consideration of people who could not use toilets without physical support or those using wheelchairs. The built environment has become not accessible and people with impairments are being disabled to move and function easily due to such barriers. However, with the support provided by humanitarian actors at the protection of civilian sites, it becomes difficult for people to move in and out of sites and restrictions are also limiting social engagements and participation contributing to depression and mental health (Sikorski, 2017).

International Organisation for Migration (2018) argues that women with disabilities are more vulnerable at the protection of civilians' sites as they are often subjected to violence and abuse. Women in South Sudan show high levels of illiteracy compared to men. Disabled peoples movements are less visible at the campsites and do not play a role in humanitarian coordination mechanisms to strengthen the adequate representation of specific issues relevant to persons with disabilities.

The humanitarian system present at South Sudan's protection of campsites has not prioritised the rights of persons with disabilities and ensured consultative platforms are in place for easy access of services to persons with disabilities. Persons with disabilities face challenges of being part of the small community within the humanitarian areas and basic services such as sanitation, water, health, schools and food redistributions platforms are inaccessible. The sites aimed at providing humanitarian assistance to displaced people become a nightmare and several illegal activities are happening while the rights of people are violated.

3.3 Child combatants and the Intricacies of Peace Building

According to De Berry (2001:94), civil conflicts attracted young children as child soldiers with the precedence of multiplying all over Africa. Participation of children in armed conflicts had destroyed their future endeavours denying them their childhood. Poverty and lack of employment including security had pushed children to opt for joining rebel groups. Cairns (1996:131) suggests that while child combatants are victims of the entire process, considering their decision-making capacity should also be held responsible for their actions employed during conflicts. Given the conditions in South Sudan, children in some instances voluntarily participate in conflict to provide protection to their families and earn a living. Women and people with disabilities are often subjected to killings and abuse during conflicts while people with disabilities will likely be used as human shields. More women with disabilities experienced sexual abuse during these undesirable circumstances (Priddy, 2019).

Many child combatants would join the rebel movement to facilitate the cause they believe in be it political or economic. The socio-economic and political situation in South Sudan creates a platform for such decisions while their participation is opposed to the United Nations Convention on the Rights of Children, article 38. Child soldiering is prevalent in South Sudan and its practice cannot be understood given the acceptance by the local community. Most boys start as early as seven years old being gun bearers for the older soldiers and ultimately learn the territory to become combatants. The SPLA has a long history of exploiting young boys and using them as combatants (Leonardi et al, 2010). Once taken away from their families, boys are educated and undergo military training. The war had also resulted in making many children orphans and those will then

be taken to undergo military training including boys who will be voluntarily delivered to the armed forces by their relatives.

Childhood to adulthood traditions had also catalysed the process as among other ethnic groups such as the Nuer and the Dinka, young boys undergo the initiation process where young boys are marked on their faces and then introduced to adulthood, also expected to undertake adulthood responsibilities. This tradition will include boys between 13 years and 18 years even though scarification could lead to infections rendering the affected being temporarily unfit to carry on into the military training (Human Rights Watch, 1994). South Sudan had accounted for approximately seventeen thousand child soldiers in 2002, who were actively involved in armed groups (Ensor, 2013:157). In war-infested countries all over the world, voices of children have continuously been ignored and it is not by a contented choice that children will choose to belong in a violent environment with age playing a huge role in vulnerability. The existence of poverty and the violent environment would ultimately shape the thinking of children not overlooking different customs of recruitment into rebel groups.

Lamb and Stainer. (2018:2) argue that the government of South Sudan adopted the Disarmament, Demobilisation and Reintegration (DDR) programme in 2005 following the signing of the Comprehensive Peace Agreement (CPA). In 2005 South Sudan had not yet been independent of Sudan and at the time both countries had developed DDR commissions to execute the programme. The process aimed at creating an enabling environment to coordinate peacebuilding activities and did not explicitly outline specific details and the strategy. Yet, the process had aimed at coordinating reintegrating programmes for small groups such as the elderly combatants and people with disabilities (Munive, 2013:20).

The Comprehensive Peace Agreement (CPA) led to the drafting of a template based on highlighting the initial activities of reintegrating ex-soldiers (Lamb, 2012). The framework only focused on small groups to be disarmed and reintegrated into the community. The details on the framework focused on children who participated in the armed conflict as soldiers and those who had aged while in the army with the inclusion of those who got impaired as a result of the conflict. However, while South Sudan and

Sudan had not moved to divide two parts of Sudan, both had to develop national DDR commissions to be represented on the processes outlined in the framework.

The first year of implementation was dedicated to the small groups identified, including people with disabilities who were now not essential to the cause. In 2007, the DDR National Strategic Plan was launched to direct the implementation of the framework in the process on an interim level and without proper planning to operate beyond the plan (Lamb, 2012). The programme lacked sufficient financial support and donors were reluctant on directing funds to kick-start the process. The implementation process was delayed and replaced by a Multi-year Disarmament, Demobilisation and Reintegration Programme (MYDDRP) in 2009, which received funding from the United Nations focusing on disarming ninety thousand ex-soldiers.

The process was aimed at rolling out in two batches including people with disabilities who could nominate a family member to receive the reintegration package on their behalf. The second, grouped people with disabilities with the old, sick and diseased to be identified as the group that was unable to make decisions. The United Nations (UN) Mission in South Sudan assumed its responsibilities in 2011 to carry out the directive and mandate of the United Nations Security Council Resolution 1590 effected in 2005 on supporting the newly formed government and the DDR programme (Lamb & Stainer, 2018:8). The first phase of the MYDDRP implementation process was concluded a year after the referendum had been successful. In 2013, civil war gained momentum and the second phase was disrupted.

Preston et al (2008:8) suggest that the CPA was developed in such a way that the national government and involved institutions would roll out the programme and be capable of implementing a smooth process, while the international community would only be involved to resource the programme. The South Sudan DDR programme was comprised of government officials while the Bonn International Centre for Conversion was responsible to provide technical support and lead the programme until all aspects outlined had been achieved. UN agencies were tasked to create and harness partnerships with all parties affected by the process such as the Sudan People's Liberation Army. Mobilisation of resources was to be conducted by the team as constituted and also define objectives of the process. The Reintegration Technical

Coordination Committee (RTCC) was then developed comprising of all organisations to benefit from the DDR programme.

Ballantine et al (2019) argue that the decision-making body was based in Khartoum before the initial referendum had been carried out. There was little role-playing by other stakeholders, particularly from the side of South Sudan due to the centralisation of the entire process by Sudan. The framework had then to be carried out in an environment where tensions were still high and trust could not be synchronised between parties to the conflict. Breitung et al (2016) suggest that South Sudan lacked relevant expertise for the programme, hence Sudan dominated the entire process with only one side deciding on critical actions.

Sida (2014:1) argues that there is little concern about people with disabilities particularly those who had been impaired due to the conflict, or for being involved in the armed conflict. However, war veterans have been vocal on the rights as enshrined but given no attention, as processes on decision-making could not consider the inclusion of affected people with disabilities. Forcier et al., 2016 argue that people with disabilities are never taken seriously within their communities and the entire programme.

The framework to forge reintegration becomes a difficult process due to unwillingness and lack of inclusive coordination. The United Nations Mission in South Sudan task on the Commission to implement the framework of the DDR was key although the approach had never been conducted anywhere else hence the mission lacked indications of success. The approach on coordinating international actors and other activities became a handful, leading to the collapse of planned functions of the commission. Clashes arose among key activators due to the actual implementation process of the DDR, including lack of coordinated communication and loyalty on the initiatives and tasks as activated (Lamb & Stainer, 2018:8). Stakeholders could not meet on the occasions set by both parties due to tensions which were largely about the process of implementing the DDR and centralised power.

The United Nations Disarmament Demobilisation Reintegration Unit (UNDDRU) that was formed to harmonise activities of all United Nations activities, did not assist the process creating a more destabilised environment with its efforts where tensions could

be seen from different actors until its disbandment in 2010. The DDR Strategy was explicit on tasks and activities and the Sudan People's Liberation Army and Sudan's Armed Forces were tasked to coordinate disarmament processes that were to retrieve arms from ex-soldiers (Lamb & Stainer, 2018:9). The national DDR institutions were then tasked to provide the necessary support to their programme towards its success.

The United Nations Mission in South Sudan was brought into play to support the process and develop a voluntary programme on disarmament and destruction of arms retrieved. The decisions on these activities were not formalised and tensions between institutions were not addressed for a more successful process to unfold. A prejudiced approach to the process could be identified within these bodies leading to the Sudan People's Liberation Army (SPLA) to engage in a more forceful disarmament process from both the ex-soldiers and surrounding communities. The forceful disarmament has accounted for one thousand six hundred people's lives with three thousand arms retrieved (Young, 2007).

The United Nations had been terrified by the outcomes led by the SPLA actions and could not denounce it publicly to safeguard the peace agreement (Young, 2007). The United Nations Mission was faced with a complex matter to harness peaceful relations with community-based organised bodies to forge a voluntary disarmament process that excluded SPLA. The approach was to be less aggressive and coordinate with local communities which resulted in at least one thousand four hundred arms being retrieved voluntarily (Daboh et al, 2010).

The voluntary process of surrendering arms is in other instances a result of security issues within communities and civilians faced with livestock theft resort to firearms for their protection (Gebreselassie, 2018). International and National actors could not find common ground and executing activities on a parallel approach was created by lack of commitment by parties and compromising their standing positions without violating the rights of civilians. Parties had yielded some results from their processes of disarmament but the process could have been managed more successfully if there was the willingness and if affected individuals were involved in the process (Lamb and Stainer, 2018:8).

According to Breitung et al (2016), South Sudan DDR commission had in their plan to demobilise ninety thousand soldiers. Children, women, the elderly and people with disabilities were always prioritised by the DDR as the first group including their families (Lamb & Stainer, 2018:8). The demobilisation process was followed by the formation of a team comprising of SPLA representation, UN military observers, the SSDDRC and the UNDDRU, which was to authenticate the entire demobilisation process. The team had established sites for demobilisation while stakeholders would be delivered to the location to be cleared as civilians and transported back to their respective communities. The United Nations mission and the South Sudan DDR commission had been afforded the responsibility of funding and maintaining the sites of demobilisation.

SPLA was reluctant to demobilise its combatants with a view that the CPA was more of surrendering the arms rather than a more maintainable peace treaty. (Lamb and Stainer 2018:9) suggest that the SPLA had managed to source a huge sum of funds from donors and its members have a provision of a monthly wage with the demobilisation process, which will then affect employment opportunities of soldiers. South Sudan faced with a high rate of unemployment had no plan for the retiring combatants and reduction of the SPLA forces meant a lessor influence and power on the politics of South Sudan (Munive, 2013).

According to De Waal (2014), the size of the SPLA had increased by 30% between 2009 and 2013 due to the developments threatening its sustainability and influence. Demobilising the SPLA was a huge task as most militants from other forces had been included in the SPLA payroll following the CPA in 2005. The SPLA had then decided to neglect its relationship with the UN bodies and tension further escalated within these DDR coordinating groups. The team formed to coordinate the demobilisation process lacked a common vision and constructive solutions beyond the demobilisation process.

According to the UNDP (2013), most civilians had taken advantage of the situation and many had benefited illegitimately from the programme due to the compromised authentication processes which were supposed to have been effected successfully but tensions with the verification team has already collapsed the process. The demobilised group was then targeted to benefit from the reintegration programme. The United Nations Development Programme (UNDP) had taken responsibility to reintegrate the

ex-combatants and join forces with UN Mission and the South Sudan DDR commission. United Kingdom, Canada, Italy, Netherlands, Sweden, Norway and Japan funded the process and the UNDP managed the funds with other team members focusing on the actual reintegration activities.

The participants in the process were to receive financial support to enable them to feed themselves once integrated into their communities. The support options included farming both with crops and livestock, development of small entrepreneurship, and vocational and adult education (Lamb & Stainer, 2018:10). According to the UNDP (2013), only 12 525 out of 34 000 targeted benefactors of the programme had been reached with the due date of the DDR programme. The second phase of the reintegration was proposed and did not succeed due to a lack of funds and commitment from those mandated to roll out the programme. There had been a competition of power within the UN counterparts and the relationship was highly compromised with very slim chances of succeeding.

The SPLA had also lacked commitment towards nation building as opposed to re-establishing both political power and control. The CPA signed in 2005 had committed to reconstruct the nation and build a new state addressing primary causes of the conflict to reach sustainable solutions. The government of South Sudan has been faced with the responsibility of realising a peaceful and democratic environment. Lack of inclusivity in the peace-making processes had led to the collapse of necessary planned activities to be carried out by international and national actors (Geleta, 2017:4).

Relevant civilian structures could not be included in more constructive peacekeeping processes while favouritism moved to a selection of favoured ethnic groups and rural areas being completely excluded from decision-making. However, many participants would be allowed to engage in small businesses and adult education (Lamb & Stainer, 2018:9). The Revitalised Agreement on the Resolution of the Conflict in the Republic of South Sudan (R-ARCSS) drafted 2018, which had not been effected, had committed to an inclusive approach on facilitating peace and stability while people with disabilities would be recognised to participate in the newly formed government (IGAD, 2018:67). Lack of trust from all stakeholders has then collapsed both the agreements leading to a continuous instability

3.4 The Cost of Violence on women and Young Girls

Ballantine et al (2019:8) suggest that violence on women and girls perpetuates a danger for their health and wellbeing. Violence against women and girls has various effects and have largely been seen as a contributor to both the economic and social wellbeing of society. South Sudan, due to its weak capacity to improve on its development of the country challenged by an ongoing civil conflict was unable to recognise violations created by the unconducive environment in which the socio-economic effects of violence against women and girls have not been recognised even internationally. The domino effect of this spread through to families as it created dependency and disrupted participation at all levels in South Sudan.

Rohwerder (2018:3) argues that during conflict people with disabilities become more vulnerable and due to their various impairments they are often affected and left stranded when the situation escalates. Escalation of the conflict means people with disabilities will be left behind without any care. Ballantine et al (2019:19) also suggest that violence, which can come in a form of physical violence, sexual violence, psychological violence or economic violence, impacts upon the mental health of those affected where most women are left with reproductive complications and depression.

The conflict in South Sudan has allowed for lawlessness and less focus has been invested in protecting the rights of women and children. Rohwerder (2018:9) argues that women with disabilities are unlikely to be married but men take advantage of sexual intimacy, leading to pregnancy. Women who have been sexually abused are more likely to be pregnant and experience miscarriages or give birth to premature babies. Furthermore, sexual violence in some instances where children are present during the ordeal, children tend to be affected cognitively leading to their childhood development being compromised (Ballantine et al, 2019:22).

Poverty is rife in South Sudan and many women depend on their abusers to survive. Women and their families are affected by violence from their abusers which is often carried to their families causing children to skip school attendance due to the psychological effects the abuse comes with. Many women are absent from work due to violence and the risks of losing their employment increase.

Gender-based programmes in South Sudan have not been given much attention to address the disparities. Gender roles are still defined by the culture where boys and men are responsible for heading families, herding cattle, hunting and fishing while women will be responsible for cleaning cooking, fetching water and crop production. The way of living within different communities will define how they relate to gender roles in urbanised areas, cultural standards tend to be relaxed. However, most South Sudanese live in rural areas where traditional norms are still highly upheld.

According to Care (2016:6), young girls and boys follow the initiation traditions of scarification even though girls had now been reluctant to compromise their beauty. Traditional leaders had accepted the exemption of girls from this practice even though boys had continued. The rural communities have upheld their traditions where young boys and girls undergo scarification at their puberty stage and are marked by a sharp object on their faces, a culture linked to initiation. Men who have not gone through this initiation process would find it difficult to have a wife and this practice will then vary from different ethnicities with the actual tradition portraying strength by men to provide security and protection to their families.

The societal standard linked to tradition perpetuate a notion that men are superior to women and the entire practice revolves around gender disparities contributing to a high level of violence and abuse. Women will be subjected to this practice as a way of showing their beauty by these marks. Scarification is seen as a symbol of entering the adult stage although marks on women will mostly attract only men from the same tribe (Wol, 2017). Forcier et al., (2016:4) suggest that people with disabilities are often ignored and excluded from social participation.

Care (2016:6) suggests that the economic muscle for a particular family is demonstrating the ability to acquire a lot of cattle. The norm of keeping cattle becomes important in South Sudan which marks the potential to survive unfavourable economic conditions. The society, particularly in rural areas identify cattle as a price for the bride which makes cattle to be more worthy but inviting theft and other criminal elements such as cattle-raiding. Rohwerder (2018: 9) argues that people with disabilities are considered vagabonds and will often not be married.

The activities around cattle-raiding led to many deaths where men would have to demonstrate their ability to protect. In some instances young girls will be abducted during this chaos to be exposed to sexual violence. Abduction of young girls will often benefit abductors either for their sexual interest and childbearing or be sold at a price to other men to perform wifely duties. Married women and girls become properties of families to the groom and the culture of physically abusing women to discipline them has continued to be practised. In most instances, those born with disabilities will be killed at birth with the attitude that disability is a sign of punishment or bad omen (Care, 2016:15).

Persons with disabilities are often not involved in ethnic activities due to the stigma and it increases discrimination due to lack of knowledge. Women are seen as objects by men and are required to obey, including to sexual activities. Forcier et al (2016:18) suggests that women with disabilities would often be subjected to sexual violation resulting in pregnancy then left without any support. South Sudan has not adopted any specific policy on domestic violence but there are other laws that can be utilised to address these practices.

The community-set standards in rural areas put women in danger and with their gender being dominated they are deprived of making decisions within their communities. South Sudan's independence brought about a number of laws that were aimed at protecting and promoting the dignity of citizens but the dominating culture in rural areas has ignored this set of laws (Forcier et al, 2016:18). Most women had a handful of responsibilities back at home to care for their children while their men had gone to war. Many laws are set nationally for the protection of women and young girls, also recognising historical disparities.

Yet, different ethnicities have their own set of customary laws recognised by the judicial system which mainly controverts the national position on women rights. Most girls are introduced into marriage at a very young age of fifteen years without consent, leaving them exposed to huge household responsibilities. Attitudinal and institutionalised norms do not consider women with disabilities as fit for marital responsibilities (Care, 2016:6; Rohwerder, 2018:9).

The government has not managed to popularise national laws and the implementing institutions such as the police force know little about the protection of women's rights. The local customary laws would allow physical punishment to women when accused of adultery whilst polygamy becomes acceptable within these communities. The effects of the South Sudanese war include impairments and several people have been victims to such incidences. South Sudan's National Inclusion Policy of 2013 have not corrected the inequalities of people with disabilities due to the absence of policy awareness programmes and the propagation of new sets of laws.

The stigmas surrounding parents bearing disabled children had led to marginalisation driving people with disabilities to be at multiple risks within societies. People with disabilities will often avoid leaving their homes to attend to particular needs with fear of being targeted, especially girls with disabilities who will fall victim to sexual violence. Lack of provision of necessary resources to people with disabilities during conflict has led to frustrations and neglect (Sullivan & Knutson, 1998).

3.5 People with Disabilities accessing Education

South Sudan's educational system has long been largely affected by the civil war, positioning its capacity as one of the worst in the world. People with disabilities have been subjected to discrimination in their everyday lives, including institutional barring to access equal education. Basic human needs come as a privilege to persons with disabilities rather than a human right. The stigma around disability denies parents of children with disabilities a chance to send their children to local schools. This institutionalised discrimination has been embedded in the societies, and persons with disabilities continue to endure these purported injustices. Persons with disabilities are either ridiculed or commiserated leading to low self-esteem as well as fear to fully become part of the schooling community and society in general (Barnes, 1991).

In South Sudan, schooling opportunities for children with disabilities are minimal, particularly for those living in rural areas and with multiple impairments, such as intellectual and psychological disabilities (Rohwerder, 2018:10). Barnes (1991) suggests that institutional discrimination is highlighted when planned national policy frameworks benefit people without disabilities, with no inclusion of people with

disabilities. The actual practice portrays unfair discrimination against people with disabilities while policies are internally modelled in such a way that it fails to address barriers, limiting the participation of people with disabilities. Policy frameworks fail to explicitly address the provision of assistive devices as well as planned frameworks to remove barriers.

According to Tamashiro (2010:5), lack of food provision contributes to child mortality and various types of disabilities. The conflict has worsened these conditions while a high number of children are left malnourished. Sufficient provision of food becomes fundamental for children's growth and lack thereof creates imbalances during the stages of growth. Children in war-infested areas are subjected to poor early childhood development and are restricted to fully functioning at the schooling level with risks of death. Underfeeding increases vulnerability to diseases and compromised immune systems. Children who suffer from malnutrition are prone to infectious diseases which could affect their lives including disturbed growth and mental functionality. Tamashiro (2010:5) suggests that long term effects could lead to the inability to participate at the schooling level. Moreover, malnutrition invites deficiencies such as iron and iodine which becomes long-term effects impacting on cognitive functionality.

Rohwerder (2018:2) argues that children with disabilities are stigmatised and vulnerable during conflicts with no commitment to provide for services such as education and health. Conflict disrupts a normal healthy lifestyle. The conflict has affected the economic industry, disrupting other economic activities such as farming. The poor are left with no choice but to survive on limited resources due to price hikes. Social interactions are affected during conflicts and the capacity to find food is narrowed. Grajeda and Perez-Escamilla (2002) argue that stressed mothers are unable to take care of their children effectively thus leading to malnutrition.

According to Legge (2016:13), many school-going age children and those with disabilities spend their days at home and do not access primary education as required by international standards. South Sudan poses good policy positions but due to its internal disturbances led by the civil conflict, not much had been done about education. South Sudan has only a few special schools while professional disability mainstreaming teachers are lacking (Legge, 2016:4).

There has not been a process of training specialised teachers in disability mainstreaming to move into a more inclusive education system. According to (UNESCO, 2017:67), only 1.7 per cent of children with disabilities against all primary school-going children have been registered in the 2015 Education Management Information System (EMIS). School dropout within the children with disabilities category had registered a high of 48 per cent in 2011 (Faehnders, 2018).

Legge (2016:4) suggests that children from well-off families with various impairments like sensory and physical impairments have a chance of accessing education, indicating social class disparities disadvantaging children with disabilities from poor backgrounds. Young boys and girls with disabilities as unlikely to attend primary education in reasonable time compared to their peers, where those disabled children who find the opportunity are likely to attend at a later age. Moreover, children with multiple, psychosocial and intellectual disabilities have a very limited chance to have their fair share in becoming pupils.

According to Groce et al (2011:1498), the inability to access schooling by children with disabilities poses a great future challenge. The impact of not attending primary schooling will invite poverty into their lives. According to Barron and Ncube (2010:12), there are established relations between illiteracy and poverty, while those without proper education may transfer poverty to their children with inadequate resources to sustain their livelihoods. There are few educated persons with disabilities in developing countries who qualify to enter into the job market as well as making informed decisions on a sustainable livelihood through any other means.

Groce and Bakhsh (2011: 1154) suggest that less priority on education is given to people with disabilities while much focus might be on the disability itself. Moreover, many countries focus on developing their general education for their entire population and move later to include people with disabilities through planned programmes. People with disabilities will later experience social exclusions such as social networking, participation in social media resources and other of developmental activities desired by any other person. Marginalisation caused by illiteracy affects people with disabilities in their adulthood with lower levels of quality of lifestyles and they remain isolated because of their inability to either articulate or merge with their peers (Trani et al, 2011:1200).

Legge (2016:4) suggests that factors such as disability type, lack of teachers' experience, family economic background, built environment accessibility, access to transport as well as attitudes contribute to limiting the participation of children with disabilities in the educational system considering discrepancies amongst different types of disabilities. UNESCO (2017:21) suggests that children with disabilities are bullied daily leading to dropping out and inability to focus. South Sudan has not made progress in availing policy frameworks that will address the provision of assistive devices to pupils with disabilities while schools buildings have not been modified to fit the level of accessibility. Lack of awareness on inclusive education has led to many parents reserving their children to attend school. This is exacerbated by institutionalised discrimination, stigmas and poverty among communities encouraging marginalisation. Most parents have little knowledge that children with disabilities can be part of mainstream education with appropriate support and assistive devices in place (UNICEF, 2016:7).

Stewart (2010) argues the outspread of discrepancies that are visible within societies add fuel conflict. UNICEF (2016:2) suggests that children have the right to equal opportunities irrespective of their gender, race, disabilities, social status, religious beliefs including other protected rights. Children are further entitled to enjoy fair opportunities without prejudice to develop their full potential in participating within a particular setting. Moreover, education frameworks need to take into consideration removing restrictions that block equal child development to fully protect the rights of all marginalised groups.

Access to basic services becomes a right and provision thereof becomes fundamental. Children are part of vulnerable groups and the early development lies in well-crafted policies inclusive of people with disabilities. UNICEF (2016:4) suggests that, to break inequalities, all schools should be well-funded with equal shares depending on the number of pupils per school. Schools in rural areas need to be given more attention by improving infrastructure to ensure accessibility in all forms.

South Sudan has an approved special educational needs policy and a national strategy navigating to an inclusive path on disability (Izizinga, 2017:16). The inclusive policy position seeks to address factors impeding access to education by children with

disabilities. The policy document outlines priorities to be unpacked over the period of five years inclusive of learners with disabilities. According to Rohwerder (2018:11), mobility devices have been provided to children with disabilities where inclusive programmes have been implemented. In 2017 the government of South Sudan approved a five-year General Education Strategic Plan to advance learning and support to children with special needs.

The General Education Strategic Plan was developed to advance the rights enshrined in the constitution of South Sudan to increase literacy levels and develop people through knowledge for a more informed citizenry. The strategy outlines poverty, bullying, negative attitudes, long distances to schools and lack of teacher experiences as barriers that contributed to a high number of non-schooling by children with disabilities in South Sudan (GESP, 2017:22). The strategy has been aligned with the African Union's Continental Education Strategy for Africa (CESA) 2016-2025, the Convention on the Rights of the Child (CRC) and the Sustainable Development Goals (SDGs). The strategy has further developed an implementation framework that will ensure equitable and improved access to education, considering both adults and children. Appropriate support is well established by the strategy and the conflict has been noted as one of the obstacles for reaching targets.

Moreover, plans to institutionalise advocacy and inclusive programmes reaching more persons with disabilities to access education have been crafted. Children with disabilities who managed to access schooling until tertiary level experienced challenges relating to barriers by built environments and assistive devices for ease of learning (Legge 2016:4). The global approach to education has shifted to be more inclusive and national governments have been compelled to comply, particularly with more resources manoeuvred to quality and free education accessible to all including vulnerable groups. According to Srivastava et al (2015:179), the World Conference of 1990 held in Thailand adopted the programme called "Education for All" which seeks to be inclusive and champion the global communication on education.

The programmes aim at achieving far-reaching objectives such as enabling young people to access significant opportunities within the broader spectrum of public schooling. The World Bank (2011:216) suggests that in achieving inclusive education

there is a need for consistent and substantial leadership to enhance sustainable programmes. Srivastava et al., (2015:190) suggest that the approach on including persons with disabilities should not be seen as a burden to the system while it aims to produce an increased level of literacy and eased social cohesion.

According to UNICEF (2016:1), South Sudan has developed education policy frameworks and syllabi which could be more detrimental than the objective. The observation is informed by choice in languages of instruction, curricula which are not aligned to the national implementation programmes, including other irrelevant education programmes about the need for cattle farming as already 85% of the country's population is involved in farming including cattle farming. UNICEF (2016:1) further argues that the development of curricula needs to link with contemporary developments in the changing world. The approach in the educational content lacks good driven approaches to curb poverty and develop young people in creating them to be more marketable at a later stage in life, thus hampering inequalities.

However, several policy frameworks in South Sudan have been aiming to reduce inequalities with less attention given to specific policy strategies linked to the international agenda such as driving young people to focus more on other opportunities rather than herding cattle which makes them become less competitive in the job market. Yet, good programmes focusing on developing young girls and children with disabilities have been championed while conflict has been taken into cognisance as the main barrier. Lack of resources failed good policy positions and the education sector has received fewer resources to function fully. In South Sudan, teachers' satisfaction has not been prioritised as many face salary discrepancies, equal access to job opportunities, including less access to development workshops while many continue without proper skills and tools to teach pupils with disabilities.

Bakhshi et al (2013:7) argue that inclusive education implementation frameworks should consider teacher manuals and training as well as the availability of adequate resources to achieve positive goals. Removal of attitudinal barriers such as socially embedded programmes could also be prioritised to address unfair discriminations and concocted beliefs. There have been continuous concerns on benchmarking inclusive education

frameworks on the western countries by developing countries but lack of resources unsubstantiated the approach.

According to UNICEF (2016:25), the gap between distributions of budget against planned activities is identified as creating setbacks on the implementation level. The approach in budget allocation fails to recognise areas of need with less attention given to the Technical Vocational Education and Training sector. Developing countries have not been doing well on implementing inclusive education programmes but efforts are continuous (Groce & Bakhshi, 2011:115). Forcier et al (2016:18) suggest that acquiring education is important to people with disabilities to access decent employment opportunities as many jobs require graduates at different levels.

South Sudan rates the highest in Africa with low levels of education attainment with only half a quarter of the population can only read and write although figures have been steadily increasing (Deng, 2006:12). Women are by societal setup expected to head families and take responsibility as wives. There are various factors that destructs the self-empowerment of women through education, such as early marriage, gender-based violence, minimal number of qualified teachers, sexual harassment, lack of finances, absence of female hygiene products, pregnancy, lack of information and many of which women are subjected to by societal norms and standards that includes lack of special services to young girls with disabilities (Oxfam, 2017:29). Faye (2010:12) suggests that education has always been identified as key to driving social transformation and development. Education becomes an important tool to develop people allowing for constructive development of a state. Oxfam (2017:11) further argues that although women are bombarded with household responsibilities, their level of decision-making is suppressed.

Most children with disabilities are not attending schools because of the scarcity of special schools and non-accommodating environments in mainstream schools. Disparities in education differ according to South Sudan's regional demarcations on 0.7% to 2.7% for learners with special needs. Young girls with disabilities in the capital have more chance of attending special schools compared to other cities and areas. The availability of special schools allows for specific attention and support to learners with disabilities, which will include accessible infrastructure and assistive devices as well as

trained teachers relevant to inclusive education WEI, (2016: 17) suggests that women and young girls are often not prioritised in policymaking to balance disparities as women face multiple discriminations within their communities.

According to UNICEF (2016), almost half of young girls in South Sudan lack opportunities to attend primary schooling with a total of three million having dropped out due to societal pressures. South Sudan's strict legal system limits the equal rights of women due to its principles and traditions. Women are expected at an early age to learn household duties and even head families at a young age, leading to an institutionalised system of denying women an opportunity to be educated. Rohwerder (2018:2) states that while disability is greatly stigmatised in South Sudan and ostracised to protect them from communities and families who will inflict various forms of abuse, from verbal, physical and sexual abuse. Yet, there have been community-based programmes to rehabilitate those affected and remove negative attitudes within communities towards people with disabilities.

There is a huge gap in literacy between girls and boys in South Sudan with only twelve per cent of female teachers constituting the total number of teachers in the country. The enrolment rate for girls is at its lowest and due to limited female teachers, the environment during teaching and learning becomes hostile leading to girls dropping out from school. In South Sudan, the enrolment rate for girls in primary school is lower than that of boys, and there is also a significant gap in literacy between boys and girls. There are gender issues that affect children at the schooling level where girls will be more comfortable approaching female teachers for assistance than their male counterparts. At least forty-eight per cent of teachers in South Sudan have only completed primary education rendering the education of very poor quality.

The financially-challenged families choose not to send their children to school or only select from the family who should attend, which in most instances will be boys whereas girls must remain at home helping with household chores. Girls are left at a very difficult position without having any foundation to self-emancipate. The Global Partnership for Education Fund has invested in South Sudan's education system to improve learning, teaching, planning, and to put in place good management mechanisms. Rohwerder

(2018) further argues that women and girls with disabilities in particular circumstances become more vulnerable for being women with disabilities.

Throughout history, people with disabilities were to be provided for according to what was decided on without their input on specific matters. Some of the programmes which became more isolating such as residential institutions for the disabled people only and special schools for children with disabilities started to receive special attention to determine the effectiveness of these programmes (Schulze, 2010:16). Compounded marginalisation became the term used to classify these isolating programmes where relevant identified support and sets of expertise ensure that good services are not wasted but reach people in need.

3.6 National and International Instruments towards Inclusive Education

3.6.1 National Inclusive Education Policy

South Sudan has a National Inclusive Education Policy (NIEP) approved in 2014 to address the needs of children and youth with disabilities. The policy aimed at an inclusive approach to accommodate all learners without marginalising those who might have been historically excluded (MoGCSWHAD, 2014:5). Moreover, the policy proposes a framework that will provide lifelong education for all children. UNESCO (2005:13) defines inclusive education as the process of supporting identified learners with diverse disabilities and putting necessary measures in place to accommodate all children in a learning environment. The process requires changes in curricula and the built environment to be accessible with the process being supported by local communities for the inclusion of people with disabilities. It becomes fundamental to develop responsive programmes that will address the injustices which have been institutionalised. The national policy highlights systems to be in place for removing barriers within the education sector. Children with disabilities have a right to education irrespective of their distinctive disabilities which may hinder their participation.

The policy includes children with disabilities in rural and remote areas (MoGCSWHAD, 2014:9). The policy paper seeks to amass the broader education system to create an enabling environment for inclusion. The policy directs changes in policy frameworks cascading to the school level and be aligned with the current international guidelines.

Learner performance within children with disabilities has not been satisfying due to the conditions persons with disabilities are, in general, subjected to. The policy further outlines aims to provide necessary programmes on a support base and create networks that will address stigmas around disabilities.

The government of South Sudan ratified the United Nations Convention on the Rights of Children (UNCRC) in 2015 and became the twenty-third state to be a party to the international human rights treaty. Linked to the national inclusive education policy, the country's objective is clear to create collaborative efforts in ensuring all stakeholders take part in mainstreaming disability at school level. The ratification of the convention (UNCRC) is seen as a critical step by South Sudan to uphold the rights of children. Article 2 of the convention states that all state parties through policy frameworks, should aim to remove barriers that obstruct the participation of children in learning, irrespective of their race, colour, ethnicity, religion and disabilities. States are directed to ensure measures are in place to unlock constructive mainstreaming programmes to protect children in all aspects.

The national policy (NIEP, 2014) addresses processes of identifying children with different types of disabilities and make provision for reasonable accommodation in accordance with specific needs, recognising the non-homogenous aspect of disabilities. According to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006), article 24, recognises and protects the right to education of persons with disabilities. The UNCRPD (2006) directs all state parties to ensure children with disabilities participate in the education sector without any discrimination.

Rohwerder (2018) argues that while the National Disability and Inclusion Policy and the Inclusive Education Policy have been developed, there are fewer chances of implementation characterised by a lack of political will and insufficient funding towards education in general. South Sudan sits with internationally compliant policies on education which have been on hold due to the disruptions by the internal conflict delaying their propagation.

The right to education is a fundamental right in international human rights law. The ability to articulate issues and improve literacy levels depend on education hence

leading to effective understanding of other laws such as the right to live, the rights to basic services, social and cultural rights, right to political participation, right to work and rights to free speech. Education attainment catalyses social participation. According to MoGCSWHAD (2014:10), the need to develop programmes and services, placements and service delivery models are key and all learners are protected to receive appropriate learning channels that will include student supports such as rehabilitation, therapy, learner support and reasonable communication accessibility.

According to Beco (2014:267), education becomes an important aspect of people's lives in general and people with disabilities in particular. Education facilitates and promotes an independent way of living within a particular social setting. Individuals who enjoy the benefits of their human rights are linked to be understanding of their rights, and knowledge which will then simplify guarding against injustices.

3.6.2 The United Nations Convention on the Rights of Persons with Disabilities on Access Education

The United Nations Convention on the Rights of People with Disabilities was approved in 2006 to promote and protect the rights of people with disabilities. According to the UNCRPD (2006), article 24, inclusive education becomes important to people with disabilities to enhance maximisation to the enjoyment of equal treatment. Many children with disabilities are not accessing education through special schools which limits their future ambitions. UNCRPD (2006) article 24, further explicitly outlines reasonable aspects to be provided for linked to the provision of inclusive education. Governments are by obligation required to commit to putting reasonable measures in place to special schools.

The development of the convention (UNCRPDP) updated the previous treaties which paid little attention to people with disabilities and the historical exclusion led to the severe marginalisation of people with disabilities. Moreover, clauses in treaties would be highlighting restrictions to discrimination but the directives would be vague. The need to recognise barriers to people with disabilities is a working milestone and South Sudan commits to addressing negative attitudes towards children with disabilities and education through media platforms, including parts of awareness in the curriculum. The

need for bringing in the disabled people organisations in campaigns identifies specific and relevant inputs from the disability sector to enhance the proper provision of services in the education sector to children with disabilities (MoGCSWHAD, 2014:11).

Children who have not accessed education are often left to drown in poverty and are unable to manage effectively their own families when they reach adulthood poverty (Groce et al, 2011:1498). Educated people with disabilities are fewer in developing countries but they continue to be neglected also without the ability to understand issues in the developing world. The continued illiteracy levels amongst adults with disabilities have a long term effect because that status will continue to invite poverty into their lives. Groce and Bakhshi (2011:1161) argue that priority is given to the citizenry in general and disability mainstreaming will then be considered after all plans have been effected disadvantaging people with disabilities in particular.

The importance of school attendance is highlighted on the ability to network with an increasing ability to participate. Most special schools offer medical support, social services and therapy and the attendance by children with disabilities allows them to benefit from such programmes. However, it becomes key for mainstream schools to be able to accommodate children with disabilities to avoid further discrimination. Groce and Bakhshi (2011:154) further argue that a conversation must continue about whether mainstream schools will provide better education to children with disabilities. The World Bank (2011:211-212) suggests that mainstream schools are better positioned to effectively provide quality education to children with disabilities considering the lesser costs in the process as compared to special schools.

The UNCRPD (2006) suggests that it is key to treating disability as a human right issue. The effective functionality of people with disabilities depends on the provision of reasonable accommodation to remove barriers impeding the participation equally as others. The convention (UNRCDP) also updates the transition from the medical to the social model of disability. The social model recognises the functional element of people with disabilities by self-definition and highlights various barriers impacting functionality without being homogenous. The relationship between people and societies need to consider removing barriers to participation and move from seeing people with disabilities as a dependent group in the population.

The socially constructed environment disables people with impairments and adjustment is key to accommodate various people with various impairments. Society naturally will have its norms and standards and some will be tantamount to discrimination, and while the entire society sees it fit to discriminate, it is only through education where minds and negative perspectives can be changed. Observations note that, exclusion of children with disabilities is the result of focusing on their impairments and ignoring their capacity to function as restricted by the environmental barriers.

According to the UNCRPD (2006), its drafting signified the recognition of people with disabilities as equal citizens where, previously their rights had entirely been violated without a specific piece of legislation in the international standards of human rights. The convention (UNRCDP) clarifies aspects of disabilities and merge previous legislation to form a concrete position. The global community had committed to a universal primary education that will be inclusive to children in need of additional support and reasonable accommodation to curb the spread of exclusion and continued high level of illiteracy within the disability sector. South Sudan had envisioned to build a well-informed and educated nation on a long-term framework with the introduction of changes around funding, curricula, human capacity, and promotion of the right to education expected to cut across the entire nation (MoGCSWHAD, 2014: 12).

The convention has been deliberately sub-divided into three parts to specifically address unequivocally the directives to signatories and highlights what is meant by discrimination. Children with disabilities are covered in the convention as well as the way to protect their rights considering awareness programmes which become key in teaching communities about rights. A reasonable accommodation is also covered in the first part of the convention (UNRCDP) together with appropriate measures to be in place to implement the correct international standard (UNRCDP, 2006). Signatories are specifically directed to adopt laws that are aligned to the United Nations Convention on the Rights of Persons with Disabilities as well as implementation frameworks and recourse mechanisms. The national government is seen as an important driver to achieve disability mainstreaming at the schooling level and the schools need to play their part in ensuring good relationships are harnessed to ultimately reach the objective of inclusive education.

The convention emphasises the inclusion of persons with disabilities during the planning of laws right from the beginning of any particular phase. The second part addresses inclusion where people with disabilities are protected to participate within their respective communities equally as others, and all economic activities need to accommodate people with disabilities. The realisation of these priorities will depend on the commitment and availability of resources where signatories are obliged to allocate them. The second part of the convention (UNRCDP) also covers human rights such as the right to life, legal capacity, freedom from exploitation, freedom from torture, inhuman or degrading treatment, freedom of expression, opinion, access, right to work, right to health care, right to privacy, right to social protection, right to participation, and the right to live independently without barriers. Gilbert (2016) argues that inaccessible communication and marginalisation due to impairments restrict reasonable accommodation and injustices to people with disabilities will be further prolonged if not swiftly addressed.

The convention covers all aspects of life which need to be inclusive to people with disabilities. All these rights champions the protection of people with disabilities and education at the centre becomes a key driving area to ensure these aspects are realised. All rights are intertwined and need to be read together to fully grasp the essence of disability mainstreaming. In every social aspect, all rights need to be upheld to ensure non-discrimination and freedom to participate. The education aspect includes several activities such as extra-mural activities that need to be inclusive and considered for different impairments.

The third part of the convention (UNRCDP) covers the framework to account by signatories and it further outlines different mechanisms and bodies to be instituted to smoothly monitor and evaluate the implementation of disability mainstreaming programmes with accurate reporting. The reporting aspect is expected to apply both at the national and international level with the establishment of autonomous bodies which will be mandated to champion the monitoring phase of the work. South Sudan as a non-signatory of the convention and its optional protocol has not committed to these specific directives (Rohwerder, 2018:8).

According to UNICEF, (2016:7) the planned reforms in South Sudan envisaged to address disparities within the education sector and develop specific strategies that will drive key priorities of an educated and informed nation. Disparities in South Sudan are a result of the ongoing conflict which had led the state to abandon its responsibilities of serving the people consistently. The government had developed many strategies and intervention systems that could close the gap although implementation of these intervention strategies only received little attention in practice. The limitation is also a result of a lack of financial resources, with the education sector receiving a limited amount from the government's budget. The allocation strategy has been more biased and had needed to be transformed to portray a more impartial approach to address the historical imbalances (UNICEF, 2016:7).

3.7 Community life and economic participation

Rohwerder (2018:7) suggests that access to job opportunities is minimal to persons with disabilities while most are unable to provide necessary essentials for themselves. People with disabilities are subjected to high levels of poverty and unemployment due to attitudinal barriers by potential employers. Legge (2017) argues that people with disabilities are ostracised when seeking employment and are most likely discriminated against in the provision of basic needs. Mitra (2014:269) argues that people with disabilities are generally either unemployed, underpaid or underemployed. Polack (2014:35-36) argues that those with psychological and intellectual disabilities experience double discrimination as they are more vulnerable and even differentiated from people with physical disabilities.

People with sensory impairments were, in most instances, preferred for their labour as they did not require many sophisticated assistive devices. (Lamicchane, 2015:248). According to Heymann et al (2014:4) economic downfalls caused by several factors lead to job losses and people with disabilities suffer most as they become first options during retrenchments and are less likely to receive any form of financial support for other alternatives. Rimmerman (2013:82-82) contends that some countries' rollout programmes such as social protection, aim at including people with disabilities to improve their livelihoods and champion inclusion in the job market.

Rohwerder (2018) argues that there has been a huge gap in employment opportunities between people with physical impairment and people without disabilities with the gap widening against those with mental psychosocial disabilities. The unique situation in South Sudan crafted by the ongoing internal conflict varies from the general public involved in informal trade to the battle of belonging due to displacements as well as the forgotten vulnerable groups.

According to the World Bank (2009), South Sudanese are involved in several informal trading work which becomes the most important sector providing employment. Informal trade includes local constructions, baking and selling bread, laundry services, selling old garments, charcoal trade, dried grass, beer, snacks, handmade crafts, farming, vendors, buying and selling imported items including transport businesses through mini taxis and motorbikes (Lamb, 2011). The informal trading sector assists in enabling self-provision of basic requirements such as access to education, micro business, employment opportunities, and health. However, due to inaccessible routes, trade becomes difficult and production is restricted (World Bank, 2010). Better livelihoods in rural, urban and peri-urban areas are dependent on informal trading.

South Sudan's formal economy is largely driven by agriculture and oil production. The greed by key stakeholders to amass oil production has led to population neglect resulting in a devalued currency, poverty, migration, displacements, conflict and disabilities as effects of conflict. The general population have not witnessed the benefits of their own country's oil production, leading to poor living conditions and unhealthy lifestyles (Kang, 2018). However, small developments have been implemented with little done on infrastructure and provision of basic needs. Yet, Non-Government Organisations through both internal and external donors created business-orientated programmes operating through informal trade. Kang (2018) suggests that the government of South Sudan has not yet built the economy and managed the transition of small businesses to operate in a more regulated environment that will appreciate the benefits of local businesses in the country's economy.

The condition in South Sudan led to a reliance on agriculture by the local communities, the sector which provides for two-thirds of the country's employment. Communities are largely focused on farming as the source of income and only a few are involved in other

activities in the economic sector. Rohwerder (2018) suggests that women have fewer job opportunities in the agricultural sector with the entire sector providing for lower salaries due to South Sudan's unfavourable economic conditions.

South Sudan's informal traders depend on neighbouring countries to supply their stock even though the value chain is difficult to access. South Sudan lacks industrialised aptitude leading to limited production of goods internally. However, South Sudan's capital of Juba consists of large-scale factories producing beer, bottled water, and clothing while supply depended on exportation. Furthermore, many factories have not survived the unfavourable conditions and have closed down. South Sudan exports raw crude oil, teak wood, and other natural minerals at a low value and contributes little to South Sudan's economy affecting wages and the status of workers.

The capital of Juba has been faced with an influx of both skilled and unskilled personnel gradually returning to seek greener pastures. Informal trading creates discrepancies as the revenues are not subjected to taxation, thus weakening the growth of the formal economy (World Bank, 2009). South Sudan is faced with other economic challenges emanating from unregulated trade where most of the employed people involved in these activities are not accounted for (Toh, 2009). The need to accelerate economic growth in South Sudan is fundamental by regulating the informal trade as well as diverting resources to invest in formal trading paving a way for job opportunities. According to Humphrey et al, (2019:29), people with disabilities remain excluded from local economic activities relying on hand-outs from traders who usually are willing to assist and donate food, clothes and soap. Groce (2011: 1501) argues that there is mixed evidence on households of people with disabilities who have a lower income per household or fewer valuable assets.

Economic balance depends on the willingness of the state to divide its resources equally amongst its people considering the cost of disability and the long history of injustices against persons with disabilities. The civil war in South Sudan has not made the situation any better while people with disabilities are still left unattended even though planned policies are in place (Legge, 2017). People with disabilities in South Sudan have not received equal access to economic participation, including influencing planned programmes. The National Disability and Inclusion Policy of South Sudan

published in 2013 (NDIP, 2013) suggests that people with disabilities are among the poorest vulnerable groups with little being done to ensure their participation. NDIP (2013) further suggests planned programmes to include persons with disabilities to reduce vulnerability and release human capital. The government of South Sudan demonstrated its inability to attend to the needs of persons with disabilities, including allocated aid from both the national government and international organisations in creating sustainable long term goals in disability mainstreaming (Rohwerder, 2018:3).

South Sudan's conflict has crippled almost every sector including the economy and areas which have been less affected by the conflict are recovering rapidly, enabling better livelihoods particularly to people who were able to access arable land. Moreover, skilled people who managed to return with capital were able to access land and other necessary services (Matus, 2007). Pantuliano et al (2008) argue that out of South Sudan's population of almost 2 million, returnees have reached their original places of origin regardless of the flawed integration process by the government. According to Shanmugaratnam (2010), integration in South Sudan becomes a grim process to manage while people will have to learn to coexist as many displaced people have occupied land belonging to others. South Sudan lacks planned frameworks aligned to its 2011 draft constitutional objectives and the National Disability and Inclusion Policy. People with disabilities lack the provision of food security and remain subject to the medical model of disability while a conducive environment for employment has not been created (Rohwerder, 2018:3).

Ministry of Gender, Child, Social Welfare, Humanitarian Affairs and Disaster Management (2013:12) suggest that only a few development programmes such as self-employment and skills development are accessible, but limited to improving the livelihoods of people with disabilities. People who acquired disability at a later stage in life experienced loss of employment and were unable to continue caring for their families (Forcier et al, 2016:13). People with acquired disabilities reported loss of livelihoods and employment as a result of their new disability which impacted on their ability to care for their families. Unemployment generates further exclusion to the banking sector such as accessing loans and other banking facilities. In some communities, disability awareness programmes have been rolled out to protect and

promote the rights of people with disabilities. However, disability remains a stigma and people suffering from it, are isolated from societal life (Rohwerder, 2018).

3.8 Conclusion

The ongoing South Sudanese conflict and its continued impact on the economy restrict the provision of resources leaving people with disabilities to be subjected to an impoverished status. The poor South Sudanese economy has left a huge gap on basic service provision with a low number of children attending school while lack of food security has led to child mortality and various types of disabilities. Most young boys resort to being child combatants so that they can provide for their families and provide security after they had gone through an initiation process that exclude persons with disabilities. Disability is still stigmatised in South Sudan and people with disabilities are ignored to be part of cultural practices as a result of these attitudinal barriers.

The efforts to quell the conflict included the signing of peace agreements that did consolidate views from the disability sector. It has been largely argued that to achieve a sustainable peace process the need for an inclusive approach is key. The social contract between the state and its people can only be maintained through adequate consultation and the will to allow for specific views from various interest groups, bearing in mind the required self-representation aspect by people with disabilities as well as the opportunity to demonstrate functionality.

The State of South Sudan has been struggling to develop its economy and people continue to participate in informal trade which does not necessarily improve their lives. The entire institutionalised disability discrimination has caused disparities although policies have been developed to address the needs of the people in general, including the National Inclusion Education Policy that is aimed at educating the entire society and improving the literacy level. South Sudan has approved the National Disability and Inclusion Policy which seeks to address disparities and economic exclusion but the current conditions had not allowed for smooth implementation of all policies developed. Conflict disrupts the implementation of planned programmes in which resources are diverted to the military force. Lack of sufficient investment in education, particularly to people with disabilities, restricts participation in socio-economic and political activities.

CHAPTER 4 THE ESSENCE OF INCLUSIVE DECISION-MAKING ON DEVELOPMENT

4.1 Introduction

This chapter will traverse the benefits of including persons with disabilities in decision-making during development processes. The abilities of persons with disabilities will be explored as well as the desired enabling environment. The political process and frameworks of South Sudan will be examined. Shortcomings in fair participation will be identified as well as disadvantages of exclusion and their impact on human rights to be scrutinised. The chapter further provides a clear analysis of disability and development.

4.2 Negative effects of Exclusion in Political Fora

Political participation is mostly defined as intentional actions to influence political decisions and control of resources by the people (Virendrakumar et al, 2018). According to Rhowender (2018:7), the sector experiencing marginalisation are persons with disabilities who have not been afforded equal recognition to part take in decision-making and during electoral processes. The plight for persons with disabilities to be included in leadership streams continues and governments have not related specific policy positions that will ensure inclusive participation and equitable approach for persons who have long been excluded in societies. Programmes developed to empower persons with disabilities to focus on lower levels of development rather than exhausting the actual capacity of persons with disabilities who can lead and work but disabled by identified barriers.

The norm to deliberately exclude people with disabilities in political processes has been evident with disabling factors left unattended. The right to participate in political processes by people with disabilities has often been confused as a favour to this sector and largely inability to construct reasonable measures in place is driven by lack of including people with disabilities during planning as well as considering retrofitting existing systems to fit the needs of people with disabilities. Moreover, not much is done during elections to ensure accessibility. Many governments will then violate the political rights of people with disabilities without realising it.

The need to participate becomes a human right element that needs a legislative approach to be achieved. There has not been a specific legislative position to indicate strategies developed to include persons with disabilities as leaders within societies. Political will and good strategies inclusive of inputs from the disability sector will champion inclusive participation. There are only a few persons with physical disabilities who find space to participate as leaders either in political positions or other employment positions with little work done to create an enabling environment for all persons with all types of disabilities to participate (Beckwith et al, 2016). Virendrakumar et al (2018) argues that strategies need to be developed in such a way that they easily suit the need as identified and are documented to create synergies across all levels as well as identifying best models.

According to Forcier et al (2016:4), people with disabilities in South Sudan are usually not represented during decision-making although the disabled people organisations have been advocating for inclusion, issues on disabilities have not received any attention as required. Disabled peoples organisations in South Sudan have been engaging the government to at least allow for five per cent representation of persons with disabilities in decision-making institutions. According to Legge (2016:1), only little has been done to allow for inclusive participation.

According to NDI (2014:34), there are different barriers identified such as social stigma, policy frameworks, illiteracy, poverty, as well as tokenism which have been seen as delaying factors to include all persons with disabilities to fully enjoy their fundamental human rights as enshrined in the United Nations Convention on the Rights of Persons with Disabilities. All national electoral systems are silent on mainstreaming disability while their policy processes neglect elements of empowerment to persons with disabilities. Political parties, as well, have not been challenged to be inclusive in their approach with a specific inclusion criteria to be met when registering as eligible parties to be voted for. Empowerment on mainstreaming has yielded reasonable results while the approach includes disabled peoples organisations, civil society, state institutions and political parties.

Political participation is key and participation have increased through administering programmes on outreach, and knowledge sharing inclusive of women and girls.

Leadership capacity programmes aimed at empowering persons with disabilities yielded positive results. Electoral bodies' needs to accommodate people with disabilities, which through knowledge sharing and capacity building, results are achievable. It has been a very sloppy road for the disability sector and much work has been done by the same sector to receive recognition as equal citizens to different communities. Capacity building programmes have been seen as capacitating the disability sector to pose their arguments in engaging different stakeholders for buy-in.

According to Irvine (2014), organised movements consisting of disabled organisations with the same vision is fundamental and becomes more instrumental in encouraging political participation in different formats. States need to create an enabling environment to allow ease on the approach while awareness campaigns are heightened. State programmes need to be inclusive in their approach to create a more cohesive environment. Sackey (2015:376) argues that the approach to mainstreaming women's rights becomes relevant when dealing with the rights of persons with disabilities by enforcing inclusive affirmative action and quotas for persons with disabilities.

Atkinson et al (2017) suggests that inclusive electoral processes may assist to reduce barriers to political participation. Opportunities for women and men with disabilities have only been realised through inclusive participation and increasing visibility of persons with disabilities in societies. Communities need to be empowered on the rights of persons with disabilities including the right to belong and participate in public life.

Inclusive participation, in general, promotes elements of social cohesion and consultative governance. People can take part in government dialogues on service delivery programmes and receive updates on how the state manages public resources (UNDESA, 2016:3). Persons with disabilities with their inherent unfavourable conditions have a right to demonstrate how services should be delivered to them. Different types of impairments affect people differently while people with the same impairment can experience different disabilities hence being non-homogenous. Consultative processes promote democracy in such a way that people receive specified relevant services.

The right to vote becomes one of the most fundamental rights to have a government of choice. Disabled peoples organisations have been at the forefront to ensure that views

of the disability sector are included where opportunity is given. The UN Human Rights Council (2016:8) suggests that participation by persons with disabilities can be an enabler in allowing their interest to be served as required. Persons with disabilities are often excluded from public engagements obstructing their rights to political participation.

Virendrakumar et al (2018: 512) argue that with the recognition of general participation of persons with disabilities as a human right issue, there is a need for the key principles of the United Nations Convention on the Rights of Persons to be employed to shape the profound implementation of relevant measures and programmes which will then allow for the realisation of the objective set by the convention. States which have not signed the convention miss the obligation set by the international community and thus pose a backward element for the entire world to recognise the plight of persons with disabilities.

States that have signed guarantees on not to develop discriminatory and non-inclusive policies will serve as a permissible tool to recognise disability as a human right issue. The convention outlines specific measures for specific goals to suit proper planning, including cost-effective measures on a universal design approach. However, countries that have a disabling environment in all aspects are required to retrofit to accommodating an environment working in collaboration with the disability sector.

States such as in Australia, the Philippines, Papua New Guinea, and Indonesia elected to have more structured mechanisms in place to realise participation of persons with disabilities either to vote or be voted for. It is only a few countries that have developed programmes that will enable persons with disabilities to fully participate in both social and political life as others. Yet, there has not been evidence demonstrating support to persons with disabilities to take up leadership positions. International cooperation is key although educational levels will determine understanding and participation. The current status of electoral systems hinders the full participation of persons with disabilities. Factors which hinder inclusive participation are manifold varying from stigmas and ignorance as well as the absence of political will.

Sackey (2015: 375) suggests that even though an education level does not become a requirement to participate in politics, education becomes an important aspect to allow for political socialisation, grasping of issues, ability to choose political ideas, as well as

the articulation of issues affecting the world in general. Rohwender (2018:7) suggests that the government of South Sudan has not managed to meet the needs of persons with disabilities with its low levels of education even though the country has a unique policy on disability inclusion. Decision-making in public requires an understanding of issues and the dynamics in the changing world. Low levels of education undermine the right to participation as well as the ability to perform when elected or deployed.

Irvine (2014:160) argues that the fundamental opportunities to be created through awareness campaigns are where electoral processes and the output from the electoral process are outlined. Persons with disabilities need to understand the role of political parties within a state and how the constituency is represented. Most political dynamics are shared during social activities that persons with disabilities cannot access. Electoral process and participation as a candidate need financial muscle, disadvantaging persons with disabilities. People who acquired disabilities at a later stage in life have a better chance of political participation as most would have attained a form of education but, unfortunately, barriers disable them from fully participating.

Atkinson et al (2017:390-391) suggest that to find better approaches in integrating policies for inclusive participation, disabled peoples organisations need to be consulted for specific inputs. Barriers to political participation disadvantage people with disabilities to hold political offices. Atkinson et al (2017:390) further argue that fifteen per cent of persons with disabilities should be recruited which will lead to changes in the process, yielding positive results. Inclusive election observation can increase political participation and electoral procedures are effortlessly altered to be more inclusive. The decisive approach in including persons with disabilities in various platform assists in breaking stereotypes that people with disabilities are only dependent and their impairments disable them from functioning.

4.3 Disabilities Inclusive Peace Agreements

There has always been a human-generated normalcy of drafting peace agreements without the presence and inclusive participation of people with disabilities whose rights would later be added to the peace agreement. Kuol & Oringa (2021:10) argues that the social contract when harnessed through sustainable policies can impact on a positive

outcome in maintaining peace. Soldatic and Grech (2014) argue that post-conflict effects have often been ignored with no compensations being paid to those affected, extending marginalisation to people with disabilities. The drafting and inclusion in the peace process will ensure the protection of all the rights and all issues affecting parties would then be tabled for discussions and decision-making. It becomes fundamental to have an inclusive peace process with all parties fairly represented.

Molloy (2019:9) suggests that people with disabilities are often ignored during political processes due to stereotypes and through peace agreements, the inclusion of people with disabilities could position their ability and opportunity in the political arena. The implementation of peace agreements would require monitoring and evaluation and the role of people with disabilities could be beneficial. Molloy (2019:8) further suggests that the plan to rebuild the state and allow for the inclusion of people with disabilities would as well promote inclusion and contribute to the reconstruction of the state.

The effort to include people with disabilities in peace agreements will require a clear understanding, experience and knowledge to avoid flawed definitions rather than universal approaches. During processes where people with disabilities are included, the need for equal treatment is key to restrict more discrimination and endorse free participation in exchanging views on building a more efficient state (Cammatt & Malesky, 2012:998). Peace agreements are to have long term plans on humanitarian intervention to people with disabilities, with a plan that will gradually empower those who have been neglected due to conflicts. Moreover, peace agreements should bind the state on providing necessary support to those exposed to traumas and other types of human rights violations.

The objectives of peace agreements are required to be explicit and without treating people with disabilities as a homogenous group to ensure inclusion after the implementation of the agreement. The states of Sudan and South Sudan signed a Comprehensive Peace Agreement (CPA) in 2005 which was more vocal on disarming and integration of retired soldiers to communities (Rolandsen, 2011:217). The CPA was silent on people with disabilities where issues were not captured to address those impairments created by the conflict but rather to protecting political interests and those of the army.

A peace agreement shall provide for benefits to families of those who had been affected by the conflict and as a result, attained sorts of impairments. Benefits could also be directed to war veterans similarly to those enshrined in the CPA to protect the wellbeing of persons affected. Constitutions of states could be further directed for an amendment to address ills caused by conflicts as reparations towards creating a more habitable environment. Issues on social cohesion and sound integration should be captured explicitly with elements of financial compensation (Munive 2014:340). A peace agreement drafted with an inclusive view should protect against non-occurrence, nation building and protection of human rights.

People with disabilities face many challenges in their daily lives and South Sudan has proven to have legislative tools in place which have not been put into practice. The CPA was supposedly expected to highlight the type of compensation even though the agreement provided for the rehabilitation of those who suffered injuries, for widows and orphans, and all other victims of conflict. The CPA was expected to provide ways on how these rehabilitation programmes would be funded, binding the state and international actors to ensure financial assistance is sufficient (African Development Bank, 2016). The main commodity as the cause of conflict could be for control by the government to ensure benefits are be used to develop the state through a funding programme (Onditi et al, 2018:43).

The conflict in South Sudan continued amidst the 2005 CPA. Seven years after South Sudan's independence a renewed Peace Agreement was signed in 2018 but had not been implemented due to a lack of trust and willingness to facilitate political change (Onditi et al, 2018:53). A group of artists in South Sudan had undertaken a campaign to call for the implementation of the renewed Peace Agreement and accountability. The agreement directs the state to form a Compensation and Reparation Fund (CRF) and the Compensation and Reparation Authority (CRA) that will administer the fund. The fund is meant to compensate citizens who had suffered financial loss due to the conflict but, unfortunately, it became non-explicit on people with disabilities as well as their representation on all the institutions to be formed (IGAD, 2018:64).

Molloy (2019:5) further argues that during post-conflict, people with disabilities are more vulnerable and immediate attention needs to cover steps on humanitarian assistance

with long-term plans for empowerment and self-dependency. It is through peace agreements where participation of people with disabilities could be involved to address the current disparities and create an enabling environment for future political participation. People with disabilities have the potential of leading transformation programmes within societies and through their knowledge and experience, they can play a vital role in peacebuilding. The inclusion of people with disabilities does not differ much from those of people without disabilities except that people with disabilities have been historically been seen as people who cannot perform or function properly. Disability inclusion needs to be institutionalised and people with disabilities should be afforded more important leadership roles.

Conflicts harm the socio-economic environment and post-conflict peace agreements should capture ways of addressing the provision of basic needs and issues of exclusion (Easterday, 2014). Plans to empower society should from the beginning be inclusive and with South Sudan readiness on disability legislative tools, it should become easier to draft a direction on how disability inclusion could be realised (Molloy, 2018:1). Moreover, it is through agreements where important aspects such as elimination of discrimination should be allowed for simultaneous implementation of proactive directives. Peace agreements can be used to lay a solid foundation for effective policies.

Francis (2019) suggests that persons with disabilities are at risk of acquiring more injuries during conflicts and emergencies and are often ostracised post-conflict and left without any support, including economic empowerment. Peace agreements could explicitly capture opportunities for people with disabilities and highlight the importance of empowering them. Social integration can as well be realised through the creation of equal opportunities that will reduce disparities and dependency. In an environment where conflict had destroyed the livelihoods of people, peace agreements that are inclusively drafted could assist in realising responsive mechanisms and create a more caring environment without discrimination.

4.4 The role of disability movements and disabled people organisations

Rohwerder (2018:3) argues that the government of South Sudan lacks the reasonable economic muscle to tackle challenges faced by persons with disabilities. The internal conflict which has affected the social, economic and political environments in South Sudan had impacted on the role of disabled people's organisations, thus creating an adverse environment to engage all stakeholders in forming a uniform approach to address disparities that exist within societies. Disabled people's organisations require funds to exist and function effectively and there has not been adequate support from the government of South Sudan including other funders to assist.

The objective of disabled people movements and organisations is to lobby support from the government and effectively position well-packed programmes that can emancipate persons with disabilities. Disability is not homogenous and there is a need for inclusive planning based on a self-definitive approach while different organisations coming together into a wider movement can allow for a unique and professional way of engaging government. According to Young et al (2016), organised movements of persons with disabilities has proved to have been in a good position to articulate specific issues involved as well as develop measures to be applied in including persons with disabilities in public life.

There are three disability organisations which had been more visible in South Sudan, firstly, Humanity and Inclusion which is an international organisation providing aid independently to areas where exclusions and poverty are identified including disasters experienced by more vulnerable people. The organisation aims to uphold the dignity of people by providing humanitarian assistance to people including those with disabilities. Secondly, the Light for the World organisation created in 2005, undertakes programmes such as the promotion of preventative measures to diseases and it managed to create relations with the Government of South Sudan to roll out such programmes (Konopi et al, 2019:238). The third is the South Sudan Association of the Visually Impaired founded in 2010 to advocate for the rights of people with visual impairment. South Sudan's Women with disabilities Network was also identified but their work could not be traced. However, the organisation promotes the rights of women with disabilities (Konopi et al, 2019:238-239).

The interest of persons with disabilities can be appropriately presented by persons with disabilities including addressing stigmas surrounding disabilities. The disability movement in South Sudan has been more visible in the capital Juba rolling out programmes such as awareness campaigns, advocacy and manoeuvring developmental programmes (Rohwerder, 2018:9). Moreover, through active advocacy in South Sudan, disabled peoples movements had managed to elevate their awareness campaigns through the media such as radio stations. Legge (2016:2) suggests that sports and arts have also been used to address stereotypes within communities although most of the activities occur at the capital.

Disabled people's organisations in South Sudan are organised according to different types of impairments. The clustered organisations are not encapsulated under an umbrella organisation to allow for a harmonised approach in positioning efforts for emancipation. The footprint of these organisations differs from organisation to organisation with others having branches across spheres of government but relations have not yet been developed with the government of South Sudan. Disabled people's organisations use different platforms like radio to make their views known to the public and they had played a critical role in the development of the Policy on Inclusive Education and the National Disability and Inclusion Policy although the legal framework on implementation still needs to be aligned accordingly to activate sound implementation (Konopi, 2019:239-240).

Disabled people's organisations were created to inform self-representation (Barron & Amerena, 2007:14). However, these organisations were a breakaway from civil society movements where people with disabilities realised that their issues were not receiving special attention. Disabled people's organisations may be many in a country with each representing one type of disability. People with disabilities who will not be members of these organisations will not receive any representation (Bruijn et al, 2012:59).

According to Sida (2014:4), the role of advocacy has been driven by the disabled people's organisations seeking inclusive approaches in governments, including a 5% representation of persons with disabilities at decision-making institutions which should be enshrined in the constitution. The South Sudan National Human Rights Commission established in 2016 has been operational on a renewable one year term basis but

neglecting its responsibilities of ensuring that South Sudan ratifies the United Nations Convention on the Rights of Persons with Disabilities for the state to uphold inherent rights of persons with disabilities to fully enjoy their existence in society.

Sida (2014:4) further argues that while a network of disabled people's organisations was established in 2011 to raise specific issues in a collective approach, only a few have been functional due to funding while issues affecting communities have been cascaded to the disability sector which has been marginalised for a very long time. Disabled peoples organisations through various representatives in South Sudan took part in establishing the United Nations Convention on the Rights of Persons with Disabilities and a number of organisations have been engaging in several campaigns to promote the rights of persons with disabilities.

Governments have not committed to supporting disabled peoples organisations and they depend on external funding either by charity groups or individuals. The UN Human Rights Council (2016:11) suggests that supporting and ensuring the functionality of disabled people's organisations upholds freedom of association and creates an enabling environment for shared responsibility and expert inputs towards developing an inclusive state. Disabled peoples organisations have not managed to secure stable funding thus impacting negatively on their planned programmes. Government relationships with these organisations are essential to address inequalities and dependency.

Persons with disabilities understand their issues better and therefore it is fundamental for a more inclusive policy-making process. Irvine (2014:161) argues that for an organisation to be fully functional there is a need for effective management of limited resources and be able to mobilise key actors to secure a platform for negotiation and share best approaches. Disabled peoples organisations (DPO's) have a role to show their visibility to their sector and ensuring easy access and participation as disability is not homogenous. Persons with intellectual disabilities have often been excluded from these organised platforms, creating a gap in understanding challenges affecting persons with mental disabilities. Supported decision-making needs to be accommodated to address the under-representation of others, such as children with disabilities.

According to the National Democratic Institute (NDI) (2014: 35-36), the essence of disability inclusion relies on four strategies linked to elections and the entire political process. Strategies include empowerment through training where targeted disability organisations can be capacitated on electoral processes, organisational structures, and how the government works. Empowerment will be more effective when people with disabilities are afforded opportunities in leadership roles and find their way into international organisations. The need for government support is a key element to provide specific guidance by disability experts on issues of inclusion to increase political participation.

Programmes aimed at lobbying for financial and improved government systems need to be inclusive of disability organisations for disability rights-specific inputs. International and other relations need to consider general inclusivity including electoral observers to harness a more developmental knowledge growth in various aspects. The inclusion of disabled people's organisations (DPO's) promotes supported decision-making and helps citizens to be more knowledgeable on rights to political participation and the right to vote. Rohwerder (2018:3) suggests that DPO's in South Sudan have limited resources which limits their activities around the capital of Juba. DPO's gain knowledge, experience and capacity from inclusive networks and programmes. It is important for various organisations to mainstream disability that will in the long term reduce dependency and negative attitudes.

According to Yeo and Moore (2003:573), people with disabilities have not entirely reserved their advocacy but through organised movements and organisations some of the problems were tackled and reached some level of attention even though buy-in has been much less. People with disabilities have not been afforded much chance by the system to meet with other disabled people to exchange experiences that would be different in various areas. Internationally there has not been a platform that allows for people with disabilities to engage in issues affecting their lives without the presence of government. The system on its own creates barriers for prolific engagements and many people with disabilities are unable to individually break these barriers without support and funding.

People with disabilities realised that the way to triumph over this plight is through organised movements and development of disabled people organisations is a way of creating a platform for knowledge sharing, finding common challenges and, as a group, voice considered opinion, challenging authorities on the injustices they are still facing. Movements create an opportunity to network and find new ways of doing things. Global change is moving rapidly and it becomes fundamental for people to come together for a common goal. Participation in these movements increase knowledge and ability to grasp and articulate issues.

The impact made by movements and organisations differs from country to country depending on the skill and capacity of leaders of these organisations and the willingness by the government to listen to them. It is without a doubt that organised relationships promote professionalism and in most instances, some level of buy-in was achieved. Yeo and Moore (2003:584) suggest that an international organisation for people with disabilities was formed in 1981 housing 158 countries with the aim of exchanging experiences and sharing knowledge at an international level. Disabled People International (DPI) engaged international organisations and non-government organisations (NGO's) with one voice for support through an organised collective.

The idea of an organised approach to tackle disability challenges through organisations and movements has been largely growing around the world but women have been playing only limited roles, showing disparities towards women with disabilities. People with mental illness, epilepsy and sensory impairments also have been largely left behind and their interests have been compromised (Rohwerder, 2018:3). People with mental health become more discriminated against than those with physical impairments and then are subjected to very poor conditions. Most people with impairments will belong to an organisation that will represent the generic needs of that particular impairment. However, women with mental health struggle to find representation from both disability organisations and women organisations. Issues affecting women with disabilities particularly mental health have not found reasonable expression due to this multiple discrimination. The norm has been identified by disabled people's organisations and it has been raised at an international level to recognise the plight of women with disabilities.

Khasnabis and Motsch (2008) suggest that people with disabilities are entitled to self-defining relevant mechanisms and approaches that will suit their different categories of impairments to allow for more inclusive developmental programmes. Families of persons with disabilities are often both too sensitive and protective of their disabled family members although it becomes imperative in their involvement as support mechanisms for self-advocacy. The family becomes a fundamental pillar in creating enabling environments to organise the society in mobilisation programmes aimed at addressing the critical elements created to ostracise people with disabilities.

Khasnabis and Motsch (2008) further suggest that limited space for organised self-advocacy activities catalyse barriers to people with disabilities in participating on all levels as required. Key foundations on creating organised programmes, representation and balancing the imbalances further assist in paving a barrier-free environment. Yet, all programmes championed towards a barriers-free environment will encapsulate removing negative attitudes towards disabilities and enhance the functioning of people with disabilities. Negative attitude limits confidence and drives an alternative disabling agenda while affecting individual people with disabilities on different levels of life, constructing stereotyping of both disability and action towards removing environmental barriers which restrict people with disabilities to participate in the socio-economic and political activities within communities. The need for removing environmental obstacles is key in championing a barrier-free society to enable inclusion.

4.5 Eliminating Tokenism for essential Inclusion

Tokenism is defined by the number of groups that are least represented below 15% where the majority is referred to as dominant and the minority as tokens as the minority's presence and views might be dominated by the majority (Kanter, 1977). Underrepresentation puts pressure on the minority group and their performance becomes weak in the overwhelming environment. Tokens become more visible within a grouping due to the obvious efforts of attempting inclusion that defeats those representing the marginalised group.

The notion of inclusion becomes a serious task as those expected to include the minority would behave differently and be careful to avoid further discrimination.

Moreover, fears presented by the majority create further isolation to the minority and integration becomes invisible. It is fundamental that the majority develops an integration strategy and allows the minority to lead in programmes which are to address negative attitudes and stereotypes. In South Sudan, disability is mostly viewed from the medical model viewpoint where impairments limit the body to function rather than the disabling environment as a barrier to function (Legge, 2016:1). People feel more valuable when not treated like tokens and being appreciated allows them to identify with the entire community. The first element to identify people is their contribution and capabilities rather than their disabilities.

The characteristics of underrepresentation in a particular group come with visible challenges and the inability to curb qualms posed by the majority. Tokens within a group are equally challenged with a role of facing different forms of obstacles such as limited access to new opportunities and teaching those in the group about removing barriers and changing their thinking through robust debates and discussions. Participation in decision-making platforms allows the minority to demonstrate their potential and change the mind-set of the majority. Konopi et al (2019:242) suggest that only a few people with disabilities in South Sudan play part in political platforms but there has not been data to identify and quantify such participation.

People with disabilities do not appreciate being identified by their impairments and the point of discussion within a particular setting needs to focus on the subject matter rather than the focus being diverted to dealing with disabilities. Self-advocacy groups, developmental disabilities councils, disability organisations, and state progressive disabilities agencies called for decision-making platforms where people with disabilities would be represented adequately or have representation in bodies that will work towards championing disability advocacy (Beckwith et al 2016:143). The role of disability groups in advocating for specific rights, interventions and mainstreaming yielded positive outcomes in crafting inclusive policies. People with disabilities deserve to be appreciated and afforded the opportunity to demonstrate how the environment affects their participation. Leadership roles are critical and people with disabilities are as well destined to lead and provide strategic guidance on how disability programmes should be unpacked.

The vast exploration of means to inclusive participation by disability organisations and the state would then yield more positive results with information that has been deposited by capable people with disabilities within the broader governance spectrum. There is still a need for information on how services to people with disabilities should be provided, considering the non-homogenous dimension of disability and lack of capacity by the government (Avis, 2020:17). Yet, It becomes fundamental that inclusive leadership and decision making are realised and those with disabilities that desire to lead should demonstrate their potential without being subjected to tokenism.

The current way of living allowed for more disability groups to re-assert and compete for inclusivity within the decision-making space with an effort to forge relationships between the state and the marginalised. Driedger (1989) suggests that disability movements had played a similar role as civil rights movements and women's movements and that it shaped the entire plight of people with disabilities. Institutional reforms and cultural evolution within communities informs the route to emancipation. It becomes important to highlight commitment by the government which will ensure mainstreaming.

Disability movements have evolved over the years where stereotypes were rife but constantly mind-sets of few people changed with governments recognising the need to include people with disabilities (Rohwerder, 2018:9). Previous disability movements through advocacy programmes fought for their space within societies as well as a more integrated approach to allow for independent living without the risk of compounded marginalisation. People with disabilities are not sick and diseases will affect them the same way as people without disabilities and therefore it becomes treacherous to assume that impairments work hand in hand with diseases. People with disabilities who were afforded the opportunity to represent experienced tokenism felt more isolated to some degree.

The civil rights and women's movements continued to review their approach linked to changes in the environment which could be social, political or economic. The review was channelled by experiences with more information at their disposal and disability movements began to gather more intelligence on disability rights and mainstreaming that will see more people with sensory, intellectual and physical impairments demonstrating their capabilities within their respective societies to change negative

mind-sets. Many societies perceive people with disabilities as dependent and vulnerable who could only be offered sympathy and handouts (Hayden & Nelis, 2002).

The need for inclusivity is important and becomes a driver for self-dependency with more opportunities created to allow more people with disabilities to perform and take decisions on issues affecting their lives. Tokenism becomes a barrier and blocks maximum participation although people with disabilities could be skilled with the provision of assistive devices and allow a more integrated society with less dependency and the ability to choose (Beckwith et al, 2016:151). The fight for justice is what the disability movements are about and more and more boards and decision-making bodies have begun to include people with disabilities to take part in policy-making, consultations and leadership roles whereas in South Sudan there has been no evidence on such inclusion. However, inclusion has been a representational gesture without trust being vested in those appointed to make decisions.

The effort on self-advocacy is always met with dynamics and people with intellectual disabilities saw more attention be given to them on how best they could be included and supported in decision-making and leadership roles. Their inclusion afforded more opportunities to demonstrate their ability to function and decide on their own lives. Moreover, parents and authorities who were delegated to decide for people with intellectual disabilities, began to change their thinking as they had experienced the ability in practice. People with intellectual disabilities had to experience tokenism and more work needs to be done to remove barriers to self-representation. In South Sudan, as a result of stigma and negative attitudes, children with disabilities are hidden by their families to avoid discrimination (Rohwerder, 2018:2).

The information and experience which were valuable have not been efficiently expressed to identify and outline how people with disabilities could be supported within representative structures without being subjected to tokenism. Boards and organisations need to drive a programme where issues on support are consolidated and structured in such a way that implementation would be eased and transform the entire institution (Beckwith et al., 2016). South Sudanese have little knowledge of disabilities and it drives their negative attitudes without realising the challenges people with disabilities face daily (Konopi et al., 2019: 235).

South Sudan disability and inclusion policy (2013) addresses elements of accessibility and ensure active participation by people with disabilities should the environment allow for its implementation. Tokenism comes in many forms and minorities can easily be forgotten with the actual effort to balance representation. Due to the less proportion of representation, the token person becomes invisible and the unwelcoming environment leads to refined discrimination with the person only existing in the group without tasks and the opportunity to contribute to the business.

The majority in the group will continue to dominate and monopolise power and control, and more discriminatory elements will suppress the minority with the views and programmes of the majority receiving more attention while those of the minority losing expression. In some instances, the majority will try to undermine the minority and negative attitudes will then be packaged in such a way that institutionalised discrimination will dominate the environment. People with disabilities will then experience the highest level of tokenism as compared to other marginalised groups (Beckwith et al., 2016:138).

The process within a group should be more inclusive and those that tend to highlight the presence of minorities will misguide integrated decision-making. The more highlights of the two groups gain momentum, divisions will be created and as a result, inclusivity will be compromised. Beckwith et al (2016:141) further suggest that allowing for self-representation by marginalised groups should come with proper tools in place such as guiding policy provisions to avoid power domination within a group.

It becomes evident in work streams that require physical strength where the majority would want to demonstrate their capability over the minority. The environment where tokenism is given space allows to divert focus on the actual production but rather focuses on people. In many professions, women and people with disabilities remain undermined and there is a perception that their intelligence is weaker than that of men without disabilities (Hayden & Nelis, 2002). Careers in the financial stream are hard to enter and such negative attitudes dominate to undermine the potential of people with disabilities.

In South Sudan, disability groups have called for inclusion from the beginning of the peace processes to assimilate control and open up for a more inclusive policy-making approach. The ownership of peace agreements should be of the people and all citizens should be given that space, such as women, civil society, youth, minority groups, and people with disabilities to be part of those processes. Inclusive decision-making during the diplomatic process ensures responsibility and legitimacy (Beckwith et al., 2016:138).

People with disabilities require to be afforded a chance in leadership roles. Collaborative relationships with community leaders are key to changing attitudes of people as most leaders, in general, have been reluctant to be part of advocacy programmes (Konopi et al, 2019:235). It is through awareness programmes and advocacy where people with disabilities could engage their communities in a way of creating a conducive environment for inclusion and be recognised as people who have equal capacity to be employed and be involved in all plans (Wickenden et al, 2020:11). The approach to tackle elements of tokenism needs a collaborative effort.

Conclusion

The need for political participation is key where inclusion is central at all levels including decision making processes. The political space in South Sudan has not been activated through policies to be inclusive and allow for people with disabilities to stand for positions and be elected as well as participating fully during electoral processes. The fact that the country has developed a disability inclusive policy has not improved the state of participation.

Disabled People's Organisations have actively advocated for the rights of people with disabilities through awareness programmes but their recognition has largely been ignored where inclusion will only happen in a later stage including in peace agreements. It becomes key to mainstream disability at the beginning of any project to grasp the key elements that encompasses disability mainstreaming as well as identifying the needs with significant inputs from the disability sector. It is fundamental that when processes unfold and proportional representation is established, tokenism is avoided and persons with disabilities are represented at more than 15% to curb the imbalances.

CHAPTER 5 CONCLUSION AND RECOMMENDATIONS

5.1 Conclusions

South Sudan's ongoing conflict has disrupted the implementation of policies to protect the rights of people with disabilities. People with disabilities remain neglected with only a little done to support their livelihood. The education system in South Sudan has been disrupted and the country has one of the highest illiteracy rates. People with disabilities had less interest in education as most have been discriminated against and had to focus on thinking about their impairments rather than about things which will assist in changing their lives. Through the social contract and human development theories the study connected with the existing literature,

Most of the disabilities have been acquired as a result of the conflict and the poor health system. The government of South Sudan has not harnessed the social contract it has with its people and further develop an environment that will allow people with disabilities to define their own capability to function without been subjected to homogeneity . The State has an obligation of developing its people and ensure participation in all aspects of life that is ensuring promotion and protection of their fundamental human rights. South Sudan has not ratified the United Nations Convention on the Rights of Persons with Disabilities but has had good draft policies in place linked to the international standards on disability rights. South Sudan ratified the United Nations Convention on the Rights of Children which led to the domestication of the international position into the National Inclusive Education Policy (MoGCSWHAD, 2014). In practice, South Sudan still uses the medical model to address disability rights whereas the United Nations Convention had moved to a social model approach. Attitudinal, environmental and institutional barriers still exist and people with disabilities are left in very poor conditions (Wapling & Downie, 2012:21).

Women and young girls with disabilities experience multiple disabilities with no recourse mechanisms in place. There is a high level of gender-based violence and women and young girls are sexually abused daily. South Sudan consists mostly of villages in remote areas and culture is upheld, which in some instances catalyse these abuses. Moreover, young men are expected to undergo initiation through scarification in other ethnic

groups and it is believed that the process will make young boys stronger to be able to protect and provide for their families. Young boys find themselves working as child soldiers due to the harsh conditions created by the conflict. War becomes one of the causes of impairments and the victims find themselves in inaccessible camps after they had acquired their impairments. The provision of shelter at campsites has not considered the needs of people with disabilities. South Sudan's conflict resulted in mental health challenges with limited provision of mental health services. Most people who suffer from mental health will be subjected to imprisonment without any charge or trial.

The government of South Sudan had a planned programme to disarm soldiers from both sides of the conflict but it yielded no results. Older people and people with disabilities were the first to be disarmed and reintegrated into their communities but people with disabilities remained marginalised without being part of decision-making (Munive, 2013:20). People with disabilities are always at a risk of being attacked because of their inability to escape campsites. The conflict has increased the level of disability, depriving people with disabilities of accessing relevant assistance and support.

South Sudan's economy lies in agriculture and most locals are involved in vegetable farming and cattle herding. People with disabilities are mostly unemployable due to society's attitude towards disabilities that disables them from providing for themselves. Most prospective employers do not want to spend extra funds to provide reasonable accommodation and assistive devices to people with disabilities. There is limited provision of safety nets to provide for people with disabilities and they are left poor and lacking the means to provide for themselves without alternatives.

South Sudan has not been in a position to address the challenges facing people with disabilities, and international donors have limited resources to assist (Rohwerder, 2018: 2). South Sudan's poor infrastructure has made it difficult for people with disabilities to access services such as public transport. People with disabilities are socially excluded, including those who are housed in camps with movement restrictions. Most people with disabilities suffer from malnutrition and the health system is inaccessible, and in most instances not affordable.

People with disabilities face barriers to political participation and there has not been efforts to ensure their inclusion without tokenism. The Constitution of South Sudan is explicit about rights to political participation as a voter or candidate. Legal frameworks enforcing electoral bodies to champion the inclusion of people with disabilities do not exist (Virendrakumar, 2018). People with physical disabilities were given the opportunity to participate during voting but those with sensory impairments were marginalised.

The approach to address issues through organisations saw the development of disabled people's organisations in South Sudan, advocating for inclusion and the provision of services. Political organisations in South Sudan have not been capacitated on disability rights and mainstreaming thereof. Active disability organisations are visible in the capital of Juba but for them to be sustainable, financial support is essential. Disabled people's organisations in South Sudan have been vocal about the lack of socio-economic and political involvement of people with disabilities. Self-representation has not been achieved and barriers such as tokenism need to be removed when identified.

5.2 Recommendations

From the finding of this dissertation, the following is recommended:

- South Sudan needs to ratify the United Nations Convention on the Rights of Person with Disabilities (UNRCDP) and its optional protocol. The protocol establishes the UNRCDP committee to attend to complaints against countries who have diverted from promoting and protecting the rights of people with disabilities. Ratification of the convention will assist authorities to develop specific policies that will ensure the protection of disability rights. The convention was created to preserve the dignity of people with disabilities and fulfil all the rights entitled by people with disabilities.
- The government of South Sudan must consider working closely with the disabled people's organisations. Inclusion in planning will assist in delivering relevant services to people with disabilities. Inclusion will also capacitate people with disabilities to understand how the state is governed and how much has been allocated to each disability programme. People with different disabilities need to be represented in decision-making institutions to address the specific needs of disabled people, as they are not a homogenous group.

- Poverty exacerbates disability and South Sudan needs to shift from the medical model to the social model of disability aligned to the United Nations Conventions on the Rights of People with Disabilities.
- The country needs to develop food security programmes and prioritise health services for people with disabilities with the provision of assistive devices.
- South Sudan needs to consider accessible communication methods for the deaf and visually impaired people. Communication barriers limit one's participation and people with sensory impairments have been marginalised due to communication barriers.
- Awareness programmes on disability rights need to be heightened with the inclusion of community-based organisations and organisations for people with disabilities to remove negative attitudes. Inclusive participation produces good results as all parties affected can constructively make inputs on programmes affecting their lives.
- Retrofitting of the built environment needs to be put on the agenda even though it is expensive. The government needs to consider a universal design approach to build an accessible environment for people with disabilities to allow them to participate in the socio-economic and political environment.
- Disability mainstreaming events need to be adopted and fused into government programmes. Disability mainstreaming includes disaggregation of data and inclusion of people with disability in decision-making. Mainstreaming disability depends on committed leadership and proper allocation of resources that will enable the country to properly allocate a budget and develop baselines on programmes they plan.
- The government of South Sudan should recognise the need to allow for self-representation by persons with disabilities in reasonable proportion, and equally review all policies that could must accommodate the views from disabled peoples' movements and organisations. Capacitating people with disabilities will promote participation in society, the workforce and in the economy which will ultimately reduce dependency.

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