



Jerez, Spain: Municipal Accessibility and Social Integration Plan for Disabled People¹

Policy Name: *Municipal Accessibility and Social Integration Plan for disabled people (2003-2007; 2008-2012)*

Start date: 1993

End date: Ongoing

CONTEXT

GOVERNMENT CONTEXT

City context

The town of Jerez de la Frontera is situated in the province of Cádiz (1,230,594 inhabitants) in the Autonomous Community of Andalusia. According to the 2010 census, it has 208,896 inhabitants, making it the most populous municipality in the province. It is governed by the

¹ The **Inclusive Cities Observatory** is a space for analysis and reflection on local social inclusion policies. It contains over sixty case studies on innovative policies for community development, access to basic services, gender equality, environmental protection and the eradication of poverty, among others. The initiative has been developed with the scientific support of Prof. Yves Cabannes from the University College of London (15 case studies) and a team of researchers from the Centre for Social Studies (CES) at the University of Coimbra, which has worked under the supervision of Prof. Boaventura de Sousa Santos (50 study cases). This Observatory aims to identify and investigate successful experiences that might inspire other cities to design and implement their own social inclusion policies.

The **Inclusive Cities Observatory** has been created by the Committee on Social Inclusion, Participatory Democracy and Human Rights of UCLG. United Cities and Local Governments (UCLG) is the global platform that represents and defends the interests of local governments before the international community and works to give cities more political influence on global governance. The **Committee on Social Inclusion, Participatory Democracy and Human Rights** aims to contribute to building a common voice for the cities of UCLG in the areas of social inclusion, participatory democracy and human rights. It also aims to guide local governments in designing these policies and to that end, fosters political debates, the exchange of experiences and peer learning among cities around the world.

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Municipality of Jerez, and according to the Large Cities Law, it is divided into five districts (North, Central, South, Granja and Delicias).

Governmental decentralisation context

Decentralisation in Spain is defined by what is known as the 'state of autonomies'. The Spanish Constitution of 1978 combines the principle of unity of the Spanish nation with the right to autonomy for the nationalities and regions that comprise it. Part VIII of the Constitution defines the decentralized Spanish territorial structure. Spain is thus a composite state, with a plurality of legislative powers and a constitutional charter that guarantees the division of powers. There are currently 17 regions and 2 autonomous cities (Ceuta and Melilla) with various transferred powers, which are regulated by the Constitution and the Statutes of Autonomy (the most recent Statute of Autonomy of Andalusia was enacted in 2007). Each Autonomous Region may have one or more provinces and each province is, in turn, divided into municipalities, which is the closest level of government to citizens (their competences include urban planning, education, transport and social services). In this case, the town of Jerez de la Frontera is governed (in terms of the powers devolved to regional and municipal governments) by the Municipality of Jerez.

Institutional level of policy development: Municipal (Municipality of Jerez de la Frontera)

SOCIAL CONTEXT

Before the production of the first Municipal Accessibility and Social Integration Plan for disabled people, the Municipality of Jerez had no detailed study of disabled people in the town and had to use national data collected by the National Statistics Institute (INE). According to these figures, in 2003, 3,528,221 people were living with disabilities (about 10% of the Spanish population, of which 58% were women). Of these, 2,072,652 were older than 65 years of age and 1,405,992 were between 6 and 64 years of age. The unemployment rate for disabled people was 25.8% (and was higher among women).

Starting in 2007, as a result of studies and research conducted within the city's first accessibility plan, a census of disabled people was created which included 10,311 people (5.14% of the population), of which 5,229 were women and 5,082 were men.

The history of the network of associations before the implementation of the Accessibility Plan was as follows:

Before the Constitution (1978)	ONCE Administrative Office (1938), AFANAS (1968), La Merced Association of the Deaf (1970), ALCEH and UPACE (1978)
Before the adoption of the LISMI (the Organic Law for the Social Integration of Disabled People, 1982)	Pro Disminuidos Físicos Auxilia (subsequently La Calesa) (1979) and ALCER (1981)
1982-1990	The ONCE Foundation (1998), the FAISEM Provincial Office (1993)
The 1990s	AFEMEN and ASPANIDO (1992), AGADO and ASMELT (1994), AGDEM and CEDOWN (1996)
The 2000s	ADIFI (2003)

COMPREHENSIVE NARRATIVE

Description of the policy

This case looks at the two Municipal Plans to promote accessibility and care for disability (the *Municipal Accessibility and Social Integration Plan for disabled people*) implemented in the town of Jerez de la Frontera with the participation (in its preparation and monitoring) of associations representing disabled people. The first plan covers the period between 2003 and 2007, while the second covers 2008 to 2012. This municipal initiative seeks not only to affect the town's physical or architectural barriers, but also other forms of social exclusion experienced by the disabled population.

The initiative has several guiding principles: equal opportunities, promotion of rights, universal access, attention to diversity, participation and the promotion of social integration. In addition, there is the principle of mainstreaming and inter-institutional coordination, which is especially important for greater policy impact. According to the first plan, attention to the needs of people with disabilities 'implies the need to align decisions and coordinate initiatives between all the areas, administrations and institutions involved' (Municipality of Jerez 2003: 14).

Background / Origins

Understanding why accessibility plans are put in place requires a review of the evolution of public policies on disability. These policies reflect the evolution of the consideration of disability issues (Arnau 2008; Jiménez & Huete 2010), which makes the medical-rehabilitative model (which considers the disabled person as a passive subject) subordinate to a social model (which means it is the social context which accentuates the disability) or the notion of functional diversity (which seeks to recognise the rights of people with disabilities beyond welfare policies).

A milestone in the development of public policies for disabled people was the approval of the LISMI (Law on Social Integration of Disabled People) in 1982. This law recognises the importance of local government in promoting social inclusion and employment measures for people with disabilities. This role was reinforced by the Local Government Regulatory Law (1985) and the attribution of responsibilities to municipalities in areas such as urban planning, housing development, the provision of social services, etc.

The Kingdom of Spain's National Action Plan for Social Inclusion 2001-2003 reinforces this role by linking it to the need to take action with regard to the many aspects of social exclusion that affect people with disabilities. This commitment to attention to disability is further reflected in the First National Accessibility Plan 2004-2012, which was produced in 2003 following the Law on Equal Opportunities, Non-Discrimination and Universal Accessibility for Persons with Disabilities (LIONDAU). This framework has been aided by various international declarations such as the Madrid Declaration of 2002 and the United Nations International Convention on the Rights of Persons with Disabilities (2006).

All these items of legislation, in addition to the Andalusian legislation on the subject (the latest Statute of Autonomy of 2007 recognises the rights of persons with disabilities and calls on local authorities to act on their behalf), led the Municipality of Jerez to implement its *Municipal Accessibility and Social Integration Plan for Disabled People* (2003-2007; 2008-2012)

Policy objectives

The objectives are the same for both the Accessibility Plan for 2003-2007 and the 2008-2012 Plan. The main objective is:

To strengthen municipal political commitment to specific measures and initiatives aimed at achieving a more accessible city which is committed to the social integration of people with disabilities.

The plans provide for the following specific objectives:

- Promoting the elimination of physical, transportation and communication barriers, improving the mobility of persons with disabilities and their access to public facilities and services.
- Promoting professional training, counselling and job placement.
- Improving the adaptation of the social services, housing and the cultural and recreational needs of people with disabilities and their families.
- Encouraging the participation and involvement of people with disabilities and their representative organisations in the decision-making processes and implementation of the activities that affect them, reinforcing their management capacity and representativeness.

- Increasing awareness and educating the general population with regard to the status and rights of persons with disabilities, promoting sympathetic and active attitudes to the integration needs of these individuals.

Chronological development and implementation of the practice

2002-2003	Preparation of the first Municipal Plan
2003-2007	Implementation of the first Municipal Plan
2007	Assessment and beginning of the development process of the second Plan
2008-2010	Implementation of the first part of the second Plan and assessment of the results

Agents involved

Agents involved in the production and implementation of the first Municipal Accessibility and Social Integration Plan:

- Municipal offices: Social Welfare; Health and Gender; Resources; Environment and Consumption; Education; Sports; Public Participation; Culture; Presidency; Safety and Traffic; and Festivals
- Municipal bodies: Municipal Town Planning Office; Jereyssa; Jecomusa; Jesytel; City Promotion and Development Institute; Emuvijesa; Municipal Sports Management; and the Onda Jerez radio station
- 16 social institutions

Agents involved in the production and Implementation of the second Municipal Accessibility and Social Integration Plan:

- Municipal offices: Presidency; Social Welfare and the Elderly; Economic Development; Resources; Public Safety and Mobility; Countryside; Equality and Health; Sports; Housing and Infrastructure; Culture and Festivals; Environment and Sustainability; Town Planning; Participation, Solidarity and Cooperation; Education and Youth Fiscal and Financial Policy
- Special delegations: Granja-Delicias District; South District; North District
- Municipal companies: Jereyssa; Jecomusa; Jesytel; and Emuvijesa

- Andalusia Autonomous Regional Government: Department of Equality and Social Welfare; Accessibility Office
- 26 social institutions

There was a significant increase in the number of social institutions, public administration bodies and their subsidiary bodies involved in the second plan.

Beneficiaries

First, the direct beneficiaries of these municipal plans are the 10,311 disabled people who live in the town of Jerez, according to the census. To these must be added a countless number of family members and caregivers who benefit from the improvements and services offered by the plans. In addition, many of the urban initiatives undertaken improve the city for use by the entire population (especially children and the elderly). It is important to note that anyone can experience situations of dependency at any time due to illness or accident, and as such the potential users of all the reforms and services implemented (and therefore the beneficiaries thereof) are all the inhabitants of Jerez.

Participation processes implemented

The development process of the plan combined two diagnosis points. First, the Social Welfare office analysed the data and statistics on the disabled population in the municipality and in the Autonomous Community, and the existing framework of legislation and social services policies and practices for care for disability that might provide inspiration. Second, disabled people's associations produced their own needs assessment and several proposals to address those needs.

An Intra-municipal Technical Committee was created to analyse the documents mentioned above and define the areas of action and proposals to make. These proposals were presented to a committee of organisations representing people with disabilities for analysis, approval and amendments. The amendments underwent a technical feasibility analysis at the intra-municipal level, with only viable proposals included in the plan.

As part of the Local Council for Social Welfare, a Working Commission on Disability was established (composed of organisations of people with disabilities), which is the body in dialogue with the Municipality for monitoring and assessing the plan. The Municipal Disability Care Office (OMAD) was also established as a tool for implementing and monitoring the plan, working with the municipal departments involved with the Working Commission on Disability.

The development of the second municipal plan began in 2007 with the evaluation and discussion of the previous plan by the Disability Working Group of the Local Council for Social Welfare. After the evaluation (and municipal elections), a process for the production of the second plan began which was very similar to the previous plan (focusing on the participation of associations, by means of meetings and reviews of draft versions of the plan, and only reserving space for individual participation through a process of submissions, which were reviewed by the Municipality's technical services team).

The most significant innovation in the preparation of the second plan was the commitment to foster the participation of technical teams from the various municipal departments in order to improve the involvement and responsibility of these teams in the implementation and development of the plan, taking advantage of the knowledge of individuals who have been working in areas related to caring for the disabled for years. This was done through meetings of the government team with the technical staff and through the liaison technicians (technicians who had participated in the evaluation of the previous plan and who were actively involved in the development of the entire plan), as well as by involving all the departments in the discussion on the measures to be achieved.

Institutionalization processes

In both cases, these municipal plans essentially fall within the scope of one of the offices (Social Welfare) and were approved by the Municipality of Jerez de la Frontera in 2003 and 2008. It is a broad-based sectorial policy that has subsequently been implemented by means of programmes and initiatives within different departments and offices of the local authority.

Financing

Among the initiatives implemented between 2003-2007 with an accessibility budget were:

- Projects and initiatives linked to the participatory budgeting process: 1,143,000 €
- Family Respite Programme: 30,000 €
- Bonotaxi Programme: 26,664 €
- Home help (2006 only): 1,458,051.60 €

Programs such as Telecare were shared with other institutions. The cost of this programme in 2006 was 214,285.71 €, of which 75,000 € came from the municipal budget and the rest from the FEMP (Spanish Federation of Municipalities and Provinces).

Some of the most important investments from the municipal budget in the second phase of the plan are:

- Improved home help service: 2,077,475.03 €
- Elimination of architectural barriers in the eastern area: 100,000 €

The second phase of the plan received funding from other public authorities for particular projects/programmes:

- Construction of the San Jose Reception Centre: Almost 5 million euros from the Andalusia Autonomous Regional Government Protect Plan
- Construction of the Women's and Social Services Centre in the North Area: 3,506,133 € from the State Local Investment Fund

Many of the proposals in this second plan are being implemented through the State Local Investment Fund (FEIL), amounting to 7,760,000 € in total. The Andalusia Autonomous Regional Government also financed programmes on gender-based violence and disability with 23,968 €

Key results and achievements

The first plan contained 177 measures, and according to the assessment, had a fulfilment rate of around 90%. Some of the most significant results are listed below:

- Programmes to improve the quality of life of caregivers, such as the Family Respite Program, were implemented.
- Ttelematic resources for enquiries about issues related to disability and to promote participation were provided.
- Accessibility and care for the disabled became part of some areas of the cultural life of Jerez, such as the 2006 Feria de Jerez festival.
- Educational programmes and manuals were created focusing on disability in the classroom, and these were distributed in 40 schools (some outside Jerez)
- Training, counselling, awareness-raising and employment programmes took place which improved the integration of people with disabilities into the labour market. Several measures dealing with visibility in public employment were also implemented.
- Accessibility and disability initiatives were a part of participatory planning processes taking place in the city such as 'Your Neighbourhood, Our Centre' (in which 11 of 20 districts scheduled accessibility-related investments) and the Participatory Budgeting.
- Home care programmes were increased (from 334 to 600 homes) as were telecare programmes (now used by around 25% of people with disabilities).
- Sports facilities were improved and sports activities were launched by the Municipality or by associations of people with disabilities.
- The participation of organisations in socio-cultural activities and their interaction with other institutions (especially health associations) was encouraged.
- There has been a broad-based inclusion of accessibility criteria in the work of some municipal offices. For example, the Municipal Urban Planning Department applies accessibility parameters in new urban designs or verifies that urban planning and private housing promotions comply with accessibility criteria. This is also the case in the

work of the Municipal Housing Company, which provides aid for housing refurbishment and comprehensive rehabilitation plans, such as the San Juan de Dios neighbourhood.

- Public libraries were refurbished to remove architectural barriers and braille reading services were added.

The second plan has just passed its halfway point. In 2010, the proposals implemented to date were assessed and a compliance level of 60% (of a total of 118 proposals) had been achieved. Some of the key results are:

- The work to remove architectural barriers, construct pedestrian access and improve general accessibility has continued.
- The home help service received a further boost, with a 420% increase in its budget between 2008 and 2009.
- 6 education centres have been remodelled.
- The International Day of Persons with Disabilities has become an established event in the town's cultural calendar.
- Further awareness-raising campaigns have taken place in the town. Among these are 'Equal by Right' (which raises awareness of the International Convention on the Rights of Persons with Disabilities United Nations) and 'Put yourself in their place'.
- Two new facilities are being constructed: the San Jose Reception Centre and the Women's and Social Services Centre in the North Area.
- A framework project on gender violence and disability is underway to improve interaction between associations in diagnosis, proposals and intervention.
- Sign language workshops have taken place in schools.

Evaluating these results involves reviewing their impacts in terms of social inclusion and citizenship, which are closely related (Nussbaum 2007; Díaz Velásquez 2010). There are three models of citizenship that can be considered from the perspectives of functional diversity and a social model (Etxeberria 2008):

- *Autonomy*: Aiming to ensure autonomy in the private sphere and the possibility of social participation, this model focuses on real autonomy (the capacity of execution), improving autonomy and the enjoyment of rights (mobility, freedom of expression, association, etc.) for dependent people (emphasising that everyone can 'suffer' dependence at some point in their lives).
- *Equality*: Linked to changes in the social context, this model aims to overcome material and symbolic barriers by focusing on three areas of action: the satisfaction of basic needs from non-welfare policies and perspectives, recognition of equality of abilities and promotion of equality of opportunities.

- *Difference*: Instead of acting on the differences that generate inequality, this model aims to enhance the value of the differences that generate diversity and seeks their recognition by public institutions.

The Jerez experience covers all three areas of citizenship, generating processes aimed at creating social cohesion. Work has been done on the physical context of the town to remove barriers, care services have been improved, opportunities (educational, employment, social participation, etc.) have been promoted and the value of items such as sign language has been increased. This all involved the participation of disabled people's organisations.

Participation channels were created for preparing and monitoring of the two plans. Some of these channels were added to previously existing participation mechanisms. The number of actors involved increased between the first and second plan and there has been interaction with other citizen's participation processes (Participatory Budgeting and Investment Plans in some neighbourhoods). In a country where many disabled people do not even have a recognized right to vote, recognizing their right to participation is a significant commitment to social inclusion.

In terms of administrative cooperation, inter-and intra-governmental coordination has been promoted and the role played by technicians in the process has been essential, which has been achieved thanks to their involvement in producing the plan.

Main obstacles

There have been four basic problems in the development of this policy since its inception. The first is the limited initial involvement of technical staff, which has been gradually resolved and has gone from being an obstacle to being one of the great virtues of the process.

Meanwhile, an analysis of the national dynamics of social movements of people with disabilities (Jimenez & Huete 2010) shows that the participatory process implemented in Jerez is not opening up to the third wave of these mobilizations, which is defined not so much by classic representative organisations but instead by the dynamics of self-representation.

The plan's financial resources will become another major problem at a time of economic crisis. In this situation, the strategy has been to access funds from other government bodies (autonomous regional and central government).

Finally, one of the most significant challenges facing this process is how it can be articulated more systematically with other participatory processes that are taking place in the town and how these are linked with the urban transformations with environmental criteria taking place.

Replicability or adaptation of policy elsewhere

The experience has a great deal of potential for replicability. There are similar projects in various parts of the world, which in some cases have significant innovations compared to Jerez. A similar case in Spain is the city of Lleida, which has been implementing a Disability Care Plan (*Lleida: city for all. Local Action Plan to promote participation and social inclusion of people with*

disabilities) since 2006. It was produced on a participatory basis by means of workshops (many of which were sectorial) and has a Municipal Council of Disabled People which monitors the plan (with teams from the local administration) through an Observatory.² This work has a high degree of compliance with the proposals of the plan.

Other examples are in Canada, and combine age- and disability-friendly planning and design criteria (Mahaffey 2010). In the northern region of British Columbia (CCDS 2009), the initiative 'Measuring Up The North' was implemented in 2007³, which helps 40 towns to improve their accessibility for the disabled and the elderly (based on accessible tourism projects, economic development and opportunities, accessible urban and architectural design, etc.). Also noteworthy is the programme that the Province of Manitoba⁴ launched in 2001, based on the participation of associations of disabled people (and non-members participating in forums and workshops). It has implemented various processes to improve living conditions in different regions in the province, which in many cases include accessibility and care for disability as broad-based factors in community planning (Manitoba 2001).

Besides these cases, which highlight the fact that the involvement of the public administrations and the participation of disabled people's organisations are essential for the replicability of these practices, it is important to consider legal frameworks and international conventions. In the Spanish cases, the applicable legislation has involved a change in the framework of public policies that has helped to introduce the focus on the rights of people with disabilities and has facilitated this type of initiative. The 2006 United Nations Convention on the Rights of Persons with Disabilities also provides a positive framework for the implementation of similar initiatives.

SUMMARY

This case examines the development and implementation of the first and second *Municipal Accessibility and Social Integration Plan for disabled people* (2003-2007 and 2008-2012) in Jerez de la Frontera. This is a municipal plan that has the support of the Municipality and which has been developed on a broad-based basis in various areas of the Municipality.

These two plans were developed with the participation of institutions representing people with disabilities and the active participation of the various areas of government and their technical teams. To that end, shared diagnosis processes, meetings for the discussion of proposals and assessment spaces for the plan have been implemented that give it a high level of transparency.

In both cases, the goal is to create a social environment that cares for people with disabilities and reverses the dynamics of exclusion that they face, generating a process of social inclusion and encouraging all-round citizenship (as its coverage ranges from the provision of social services to issues such as urban renewal, participation, etc.).

² <http://observatoridiscapacitats.paeria.cat>

³ <http://www.measureupthenorth.com>

⁴ <http://www.gov.mb.ca/dio/index.html>

The level of completion of the proposals set out in both plans is high. The first achieved almost 90% compliance, while in the second, despite being only half way through its implementation period, compliance is at 60%. These results have led to a high level of acceptance of the participation process of these plans, with a considerable increase in the number of agents involved between the first plan and the second. The local authority has also experienced significant improvements as far as coordination between areas is concerned.

Although it may be assumed that the direct beneficiaries of this initiative are the more than 10,000 people with disabilities in the city, this number increases if the relatives and caregivers who benefit from this policy are also included. As well, the rest of the city also benefits from the policy, which increases its quality of life as a result of municipal initiatives that improve the town's physical space.

This experience has a high level of replicability, as can be seen by the fact that similar experiences are taking place in other parts of Spain and the rest of the world.

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