

## ABSTRACTS

### FIRST SESSION

#### **The Italian, European and international commitment on inclusive development**

##### **Inclusive development and "appropriate practices"**

Ivo Giuseppe Pazzagli, RIDS and University of Bologna

The paper will briefly examine the reasons why two DPOs and two NGOs with different backgrounds, purposes and fields of activity have promoted the Italian Network for Disability and Development (RIDS).

In particular, it aims to make a contribution to the international debate by re-thinking some key concepts/issues related to "inclusive development" thanks to the concrete experience implemented by RIDS members in different international cooperation contexts.

Therefore - as it is well shown by the experience of recent years - the idea to put together skills and abilities of different agencies and people, to build together a network is crucial for exchanging practices, experiences and expertise aimed to the promotion of tools, methodologies and shared projects in the field of inclusive development. This practice can be recognized as a proper means to develop the ability to support the implementation of the UN Convention on the Rights of Persons with Disabilities - CRPD in the new context of development cooperation.

#### **Making development inclusive - Learning experiences from policy design and implementation through German development cooperation**

Ms. Ingar Düring, GIZ Sector Project Inclusion of Persons with Disabilities

In early 2013, the German Federal Ministry of Economic Cooperation and Development launched the Action Plan for the Inclusion of Persons with Disabilities (2013-2015).

Supporting the implementation of the Convention on the Rights of Persons with Disabilities – in particular Art 32 – that Action Plan frames the German commitment to a human rights-based approach to the inclusion of persons with disabilities in development cooperation.

By including over 40 concrete measures, the Action Plan focusses on three strategic objectives: raising the level of commitment within the implementing organisations, strengthening the inclusion of persons with disabilities in Germany's partner countries, and enhancing the cooperation with civil society, private sector and multilateral organisations.

Looking back at a few years of implementation, the presentation discusses experiences made and challenges ahead across countries and sectors. Much has been achieved and the majority of measures is nearing completion or even implemented. The Action Plan has initiated numerous initiatives beyond its concretely mentioned activities and has mobilized additional resources. However, while the commitment regarding inclusion of persons with disabilities is rising continuously, a couple of crucial challenges still remain unresolved. Few of them, such as the systemics and sustainability of inclusion in development programmes represents a core task not only for German development cooperation and is discussed throughout the community.

#### **The experience of AECID**

Daniel Pero-Sanz González, Spanish Agency for International Development Cooperation (AECID)

The 2030 Agenda for Sustainable Development emphasize the responsibilities of all States to respect, protect and promote human rights and fundamental freedom for all without distinction of any kind as to race, color, sex, language, religion, political or other opinion, national or social origin, property, birth, disability or other status.

The promotion of the rights of the persons with disabilities is one of the top 5 priorities of the Human Rights Spanish Policy.

Spain has ratified the Convention on the Rights of Persons with Disabilities and its Optional Protocol in May 2008 and Spanish laws have been adapted accordingly with a strong commitment for its full implementation in Spain and abroad through international cooperation development policies and instruments.

The European level is also crucial for Spain, being the European Disability Strategy 2010/2020 an important instrument identifying actions at EU level to supplement national ones and also the support needed for funding, research, awareness raising, statistics and data collection.

The EU and the Member States should promote the rights of people with disabilities in their external action, including EU enlargement, neighborhood and development programmes.

In that sense, Spain wishes to be a key actor in the inclusion of disability in the development cooperation agenda, and is working not only in the national level but also with United Nations agencies and with the European Commission and other actors. Spanish expertise in inclusive policies and interventions to enhance the effective enjoyment of access rights to basic services is mainly focused in Latin America, promoting for instance the social inclusion of persons with disabilities and universal accessibility in collaboration with the Spanish Ministry of Health, Social Services and Equality and a collaboration agreement signed with actors from the private sector. Our work with other Cooperation agencies, NGOs and Disabled People Organizations is being reinforced promoting the dialogue between different actors including young people and taking into account intersectionality: gender, poverty, ethnic origin, etc.

## **The experience of Finland**

Katariina Sario, Senior Adviser: Non-Discrimination & the Rights of Groups in Focus

Finnish development policy and co-operation has been based on the notion of human rights for decades. In education, health, governance and rural development sectors the focus of our development cooperation has been socially sensitive and inclusive education has always been centrally promoted and supported by Finland. Our particular attention on these sectors has traditionally been on gender equality and the most vulnerable populations in the form of promoting universal services and equal access to public services.

Today Finnish foreign and development policy is even more explicitly framed in the international human rights standards operationalized by the Human Rights Based Approach.

The Finnish approach to the enhancement of the rights of persons with disabilities as well as to reduce inequalities has three operational tracks:

- 1) Mainstreaming disability in all development programs to ensure the principle of non-discrimination, and that our programs take into account the principles of availability, accessibility, acceptability and adaptability of the benefits for persons with disability
- 2) Targeted projects, which focus exclusively on enhancing the rights, services and opportunities of persons with disabilities and to empower them to claim their own rights
- 3) Including disability in policy dialogues, country negotiations and multilateral cooperation.

On the basis of this three-track approach we have included disability in our key policy documents: our human rights strategy defines greater openness and inclusion and elimination of discrimination as the two cross-cutting objectives of our human rights policy. Persons with disabilities are mentioned in the Strategy as one of the groups that should be given priority attention when designing our interventions. It is the Human Rights Action Plan of the Foreign Service - attached to the Strategy - that places more weight on disability questions by concrete action and by explicitly addressing persons with disabilities.

Human Rights Based Approach to development is an overarching principle of our Development Policy Programme and a new guidance note on how to operationalize the Human Rights Based Approach in various development co-operation instruments was launched in March this year (2015). This guidance note has further assisted the Ministry in operationalizing the commitment to human rights as well as to the principles of equality, participation and non-discrimination.

### Innovative implementation

Around 80 to 90 % of the Ministry's disability specific funding is allocated through Finnish Disabled Persons Organisations and NGOs and their partners in the global south. These programmes and projects are planned, designed and implemented as well as monitored and evaluated by organizations of persons with disabilities and specialized NGOs. It is the Ministry's view that this guarantees good quality of the design and ensures the methods for implementation are most appropriate.

Finland has also incorporated a disability diplomacy component to its development cooperation. Finnish experts with disabilities are campaign to raise awareness about the rights of persons with disabilities by joining selected official missions of the Ministers, but also by exercising individual diplomacy abroad on behalf of and through financing from the Ministry for Foreign Affairs.

### **Including persons with disabilities in EU Development cooperation**

Alicia Martin Diaz, International Cooperation and Development – EuropeAid

Together, the European Union (EU) and its Member States are the world's largest aid donor. In 2013 they provided more than half of "official development assistance". By ratifying the UN Convention on the Rights of Persons with Disabilities (CRPD) –the only

international human rights treaty ratified by the EU as a "regional integration organisation"- the EU committed to make its development cooperation accessible to and inclusive of persons with disabilities, and to support national efforts for the realization of the objectives of the Convention. This commitment is also in line with EU development policy, which seeks to eradicate poverty in a context of sustainable development, ensuring that all people can contribute to, and benefit from, growth and job creation.

The presentation will cover these and other elements that form the policy framework guiding the EU's approach to disability in its development cooperation, as well as the state of play and the main challenges in terms of implementation. The EU has supported over 250 projects focusing on persons with disabilities in 87 countries in the period 2010-2014, and has made considerable progress towards a systematic mainstreaming of disability concerns in all development programmes. In particular, the EU has recently included explicit provisions for the social inclusion and human rights of persons with disabilities in key regulations (such as the recent ones establishing the financing instruments for the period 2014-2020) and is raising awareness among its staff and strengthening its capacity through guidance and training on disability-inclusive development.

Finally, a new flagship initiative recently proposed by the Commission called "Bridging the Gap: Inclusive policies and services for equal rights of persons with disabilities" will be presented. This initiative intends to create a partnership between the EU, a number of EU Member States, networks of Disabled Persons' Organisations, and other development partners in order to drive the disability inclusion agenda forward and to support its inclusion in the 2030 Sustainable Development Agenda.

## SECOND SESSION

### **The role of DPOs in inclusive development projects: empowerment and participation**

#### **Building empowerment through CBR**

Francesca Ortali, AIFO – RIDS

'Community-Based Rehabilitation'- CBR, becoming Community Based Inclusive Development – CBID, is now recognised as one of the most effective strategies for implementing the CRPD in remote rural areas, and for supporting development based on the community. In 2004 the World Health Organization (WHO), International Labour Organization (ILO) and United Nations Educational, Scientific and Cultural Organization (UNESCO) published a joint position paper on CBR, which describes it as:

*... a strategy within general community development for the rehabilitation, equalization of opportunities and social inclusion of all people with disabilities. CBR is implemented through the combined efforts of people with disabilities themselves, their families, organizations and communities, and the relevant governmental and non-governmental health, education, vocational, social and other services. (ILO–UNESCO–WHO 2004)*

There are two main objectives of CBID. The first is to ensure that people with disabilities can maximise their physical and mental abilities, so that they can gain routine access to services and opportunities and become active contributors to their communities and society. The second is to galvanise communities into promoting and protecting the human rights of people with disabilities by significant internal change, for example the removal of barriers to participation. In 2005 the WHO initiated a process to develop new guidelines on CBR, to take account of the recommendations arising from an international consultation event in Helsinki the previous year. These had included the need for CBR programmes to focus on reducing poverty, developing multi-sector collaboration, and promoting evidence-

based practice. After a five-year process that involved various UN agencies, a range of bodies belonging to the International Disability and Development Consortium (IDDC), which brings together the main organisations of people with disabilities, and many CBR projects based in developing countries, the new *Community-Based Rehabilitation Guidelines* were launched in October 2010 (WHO 2010). This process brought to change Community Based Rehabilitation into Community Based Inclusive Development

### **The experience of ONCE Foundation for Solidarity with Blind People in Latin America (FOAL)**

María del Carmen Peral, Fundación ONCE para la Cooperación e Inclusión Social de Personas con Discapacidad

The ONCE Foundation for Solidarity with Blind People in Latin America (FOAL) is an NGO working in the field of development cooperation in nineteen countries in Latin America since 1998, always under the guidance of civil society organisations and addressing all governments and international cooperation agencies, as responsible, funding bodies and partners in the setting up of projects aimed at contributing to the improvement of quality of life of people with visual disabilities. Our main lines of action are strengthening of associations, inclusive education and training and job placement, combined with rehabilitation, awareness and dissemination of the Rights of People with Disabilities at crosscutting level. All our projects are carried out on the ground with local partners, so that our experience and strength are put to making people with visual disabilities visible and working with the institutions representing them. In our case, at times, the reality of being unable to see adds to the reality of being invisible.

### **THIRD SESSION**

#### **The inclusion of disability into emergency projects**

##### **Disability in Emergency risk management**

Valerie Scherrer, Head of CBM Emergency Unit, IDDC

In recent years the consultation processes for developing the post-15 agendas – including the Sustainable Development Goals, the Sendai Framework for Disaster Risk Reduction and currently the discussion to prepare the World Humanitarian Summit – have all highlighted the necessity to better address the needs of persons with disabilities and ensure their participation in planning and implementing policy, strategy and programs. The “leave no one behind” motto can also be applied to situation of crisis and humanitarian emergency. In the past few years, organisations working with persons with disabilities and their representative organisations have developed tools and good practice projects demonstrating the capacities of persons with disabilities to contribute to risk reduction and emergency programs, increasing effectiveness, efficiency and accountability of mainstream aid.

CBM has, together with other organisations, developed community-based protection projects in partnership with local Disabled Persons’ Organisations (DPOs) in several countries. On one hand, these projects focus on identification and referral of persons with disabilities to mainstream relief organisations, while on the other they provide support to

international and national organisation in making their work accessible and inclusive to persons with disabilities.

### **The inclusion of disability evaluation into emergency projects: the experience of disability survey in the survivors of the mega typhoon Haiyan in the Philippines<sup>1</sup>**

Matilde Leonardi, Neurology, Public Health, Disability Unit. Neurological Institute Carlo Besta IRCCS Foundation, Milan

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) Article 11 (on situations of risk and humanitarian emergencies) calls upon States Parties to take “all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, including situations of armed conflict, humanitarian emergencies and the occurrence of natural disasters” [1]. Much attention was given to the economic and health consequences of typhoon Haiyan: two reports published in *The Lancet* addressed the critical situation of health systems, the need for infectious diseases surveillance, malnutrition and, more recently, homelessness, economic problems, mental health issues and drugs supply [2,3]. Activities of relief and reconstruction that follow a disaster are also intended to rebuild physical and social structures and care for populations as mentioned in the Hyogo Framework for Action 2005-2015: Building the Resilience of Nations and Communities to Disasters” [4]. The Sendai Framework for Disaster Risk Reduction 2015-2030 was adopted by UN Member States on March 18, 2015: it builds on the solid achievements of the last decade of “Hyogo Framework” implementation, and focuses on the need to switch emphasis from disaster management to risk management [5]. Disaster risk reduction is not just about survival in the face of calamities such as a typhoon or a strong earthquake, it is about building resilience in the fullest sense of the term. This means developing resources and coping capacities of communities to manage the specific risks connected to the environment in which they live, so to keep them safe from harm and improve their quality of life.

The Sendai Framework is the first major agreement of the Post-2015 development agenda, with seven targets and four priorities for action and also specifies the Role of stakeholders which complements the role of States, that have the overall responsibility for reducing disaster risks. The Sendai declarations states that “..*When determining specific roles and responsibilities for stakeholders, and at the same time building on existing relevant international instruments, States should encourage actions on the part of all public and private stakeholders*”.

We believe that the identification of what action is needed, however, has to begin from people’s difficulties and needs informed by high quality information on health and disability. Data on disability as an outcome of natural disasters are sparse, indeed disability in populations affected by natural disasters is an important indicator of needed interventions on the environment and on the health of populations. Typhoon Yolanda struck the Philippines on November 8, 2013 with strong winds of over 300 km/h. It was

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<sup>1</sup> Leonardi M 1, Zagaria N2, Kostanjsek NF3, Schiavolin S1, Chatterji S3, Raggi A1  
1) Neurology, Public Health, Disability Unit, Neurological Institute Carlo Besta IRCCS Foundation, Milan, Italy. 2) WHO Emergency and Humanitarian Action, Division of Health Security and Emergencies, World Health Organization, Regional Office for the Western Pacific, Manila, Philippines. 3) WHO, Department of Health Statistics and Information Systems (HSI), World Health Organization, Geneva, Switzerland.

#### **Key-Words**

Disability Evaluation; Natural Disaster; WHO Disability Assessment Schedule

one of the strongest tropical cyclones ever recorded. The death toll has reached 6.300 and many provinces were affected. In response to this massive devastation, the WHO Regional Office for the Western Pacific, in consultation with the UN Humanitarian Inter-Cluster Coordination Group decided **to conduct a survey on post-typhoon disability and health profiles of people affected.**

We briefly report the results of a disability survey on 1982 adult survivors of typhoon Haiyan in the Philippines (80.6% females, mean age 42.9) that was conducted in May-June 2014, using the WHO Disability Assessment Schedule (WHODAS 2.0) [6] to measure disability levels and distributions.

The comparison of our data with those of the WHO Multi-Country Survey Study shows that average WHODAS score in the MCSS was 7.2, while results of this study show an average of 17.1, which is indicative of a considerably higher disability level. Results also show that the domains with higher disability were mobility, participation in social activities, and cognition. This provides valuable information on health and social interventions needed in the reconstruction phase after typhoon Haiyan. Our survey confirms the need to start from good and reliable health and disability data when planning after a natural or man made disaster.

We believe in fact that data collected in the Post Typhoon Haiyan survivors with WHODAS 2.0 represent a reply to what is expressed in point 34 of the Sendai declaration where it is written that: *“Academia, scientific and research entities and networks have to focus on the disaster risk factors and scenarios, including emerging disaster risks, in the medium and long term; increase research for regional, national and local application; support action by local communities and authorities; and support the interface between policy and science for decision-making.”*

Measuring disability in emergencies and having reliable and consistent data on disability after a disaster can play a crucial role in achieving the result of *building back better* that after every disaster is what everybody has to reach.

As Sendai declarations states *“In order to reduce disaster risk, there is a need to address existing challenges and prepare for future ones by focusing on monitoring, assessing and understanding disaster risk and sharing such information and on how it is created; strengthening disaster risk governance and coordination across relevant institutions and sectors and the full and meaningful participation of relevant stakeholders at appropriate levels; investing in the economic, social, health, cultural and educational resilience of persons, communities and countries and the environment, as well as through technology and research; and enhancing multi-hazard early warning systems, preparedness, response, recovery, rehabilitation and reconstruction. To complement national action and capacity, there is a need to enhance international cooperation between developed and developing countries and between States and international organizations”.*

Council regulations, UNCRPD, EU Disability strategy, WHO instruments and national Disability Action plans should provide an international framework with common humanitarian aid principles.

The EU Disability Strategy commits the EU to raising awareness of the CRPD and the needs of people with disabilities, including accessibility, in the area of emergency and humanitarian aid. In responding to humanitarian need, particular vulnerabilities must be taken into account and special attention has to be given to women, children, the elderly, sick and disabled people, and to addressing their specific needs.

**DISABILITY can and should enter as an indicator in emergency monitoring and relief planning.**

The innovative approach used in the Philippines, that considers functioning and disability profiles together with tailored socio demographic information, allows better public health

planning and improvement in policies and interventions and should be considered for future international interventions..

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## FOURTH SESSION

### Monitoring tools for inclusive development

#### The role of DPOs in monitoring CRPD

Victoria Lee, UN Human Rights and Convention Office, International Disability Alliance (IDA)

Since the entry into force of the CRPD, there is an explicit obligation on States and other stakeholders to closely consult with and actively involve DPOs in all matters concerning them. There is thus a central role for DPOs in the monitoring of implementation of their rights. As a human rights and development tool, monitoring the CRPD necessarily means monitoring of inclusive development including implementation of the SDGs and other frameworks. The CRPD review process provides opportunities for DPOs to mobilise themselves and engage in monitoring through parallel reporting. To date, there have been different levels of DPO mobilisation and engagement which has been dependent on capacity and resources of the national disability movements as well as their national political context. It has been observed that investment and support to DPOs to engage in monitoring their rights, whether or not their governments are parties to the CRPD, will enhance and sharpen their capacity to advocate their government and serve to open significant possibilities to engage in other human rights mechanisms and processes (other treaty bodies, UPR, SDGs, DRR, Beijing review etc.) at subsequent minimum cost and effort. Such process will also support DPOs to become more inclusive of all groups of persons with disabilities, and empower them further as essential participants in the advancement of their rights and development. This process also leads to increased opportunities for regional exchange amongst DPOs to share experiences of their mobilisation and engagement and to support each other in advocacy strategies for CRPD compliant policies and practices.