

International Disability Alliance (IDA)

Disabled Peoples' International, Down Syndrome International,
Inclusion International, International Federation of Hard of Hearing People, World Blind
Union, World Federation of the Deaf,
World Federation of the DeafBlind,
World Network of Users and Survivors of Psychiatry,
Arab Organization of Disabled People, European Disability Forum,
Red Latinoamericana de Organizaciones no Gubernamentales de Personas con
Discapacidad y sus familias (RIADIS), Pacific Disability Forum

Expert's Meeting on Identifying Key Challenges for the Full and Effective Implementation of the CRPD

Palais des Nations, Geneva, December 10th, 2010

REPORT

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List of Acronyms

AAA	Accra Agenda for Action
AODP	Arab Organization of Disabled People
AusAID	Australian Agency for International Development
CBM	Christian Blind Mission
CBR	Community Based Rehabilitation
CESCR	Committee on Economic, Social and Cultural Rights
CRC	Convention or Committee on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
DAC	Development Assistance Committee (OECD)
DPI	Disabled Peoples' International
DPOs	Disabled Peoples' Organization
DRF	Disability Rights Fund
DRPI	Disability Rights Promotion International
DSI	Down Syndrome International
EDF	European Disability Forum
EU	European Union
FIRAH	Fondation Internationale de la recherche appliquée sur le handicap
GBS	Global Budget Support
GC	General Comment
GDP	Gross Domestic Product
GPDD	Global Partnership on Disability and Development
HI	Handicap International
IASG	Inter-Agency Support Group for the CRPD
ICBL	International Campaign to Ban Landmines
ICESCR	International Covenant on Economic, Social and Cultural Rights
IDA	International Disability Alliance
IDASA	Institute for Democracy in Africa
IDDC	International Disability and Development Consortium

IFHOH	International Federation of Hard of Hearing People
II	Inclusion International
ILO	International Labour Organisation
INGOs	International Non-Governmental Organizations
MDGs	Millennium Development Goals
NGOs	Non-Governmental Organizations
NHRIs	National Human Rights Institutions
OECD	Organisation for Economic Co-operation and Development
OHCHR	Office of the High Commissioner for Human Rights
PBA	Programme Based Approach
PRSP	Poverty Reduction Strategy Paper
REBSP	Right to Benefit from Scientific Progress and its Applications
RI	Rehabilitation International
SBS	Sector Budget Support
SHIA	Svenska Handikapporganisationers Internationella (Swedish Organizations of Disabled Persons International Aid Association)
UN	United Nations
UNCT	United Nations Country Team
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Programme
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNICEF	United Nations Children's Fund
UPR	Universal Periodic Review (UN Human Rights Council)
WBU	World Blind Union
WFD	World Federation of the Deaf
WFDB	World Federation of the Deafblind
WG	Working Group
WHO	World Health Organization
WNUSP	World Network of Users and Survivors of Psychiatry

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1. Background

The multi-stakeholder seminar, organized by the IDA secretariat, is part of a project funded by AusAID¹ through which the International Disability Alliance (IDA) is exploring the feasibility of producing CRPD implementation guidelines.

It was attended by sixty participants, representing IDA Members, the CRPD Committee, INGOs, UN agencies, States missions to the UN in Geneva, IDA secretariat, assistants and sign language interpreters.

The purpose of the Expert Seminar was to identify key challenges that need to be addressed for the full and effective implementation of the CRPD, with special attention to the situation in developing countries. The seminar program focused on the exchange of experts' experiences, the challenges they have faced, and lessons learnt in their current work to implement the CRPD.

Experts were invited to highlight examples of 'good practice', which are fully in line with the CRPD, and include the active involvement of representative organizations of persons with disabilities (DPOs) in the relevant activity, as well as to give recommendations on how challenges can be addressed.

¹ The IDA website contains further information www.internationaldisabilityalliance.org/representation/other-working-groups-coming-soon/

2. Presentations and debate

Presentations were based on a number of topics proposed in the **Program** (Annex I), and, on some questions raised in the **Background Paper** (Annex II), which was circulated beforehand to facilitate discussions during the meeting (see Boxes 1 to 4 below).

The Multi-Stakeholder Seminar was structured into five sessions. For convenience and completeness, the speakers' presentations and summaries of the debates are presented following each session.

3. Opening Session

Moderator: Diane Richler, Chair of the International Disability Alliance

Speaker: Ana Peláez, Vice-Chair of the Committee on the Rights of Persons with Disabilities

After a welcome to participants and a short *tour de table*, Diane Richler gave the floor to Ana Peláez who acknowledged the vital role that IDA plays in the follow up process to CRPD reporting and international cooperation, which continues to guarantee the participation of persons with disabilities. She highlighted that the Article 32 of the CRPD is an innovation and fundamental to the follow-up process of the UN and State parties' work in mainstreaming the participation of persons with disabilities.

To ensure the mainstreaming of rights of persons with disabilities, it is important that this participation operates within all treaty bodies, including the CRPD Committee. The most vulnerable groups should be taken into consideration; children and women with disabilities must have the chance to directly contribute to the alternative reports. Despite the fact that women with disabilities constitute the majority of persons with disabilities, only a few reports mention this group. This situation should be redressed by increasing reporting on and from women with disabilities.

Diane Richler stated that this Expert Seminar was being held on the **International Human Rights Day**, and, further, by persons with disabilities themselves. For years this day was not relevant for persons with disabilities because it was not seen as also their day. For this reason, it was very important for her to be attending this seminar today. She recalled the negotiation process of the Convention, comparing

to a long gestation period. And suddenly, there are new decisions to be made and new challenges to be met every day. With this Expert Seminar, IDA aims to understand the challenges that all stakeholders are facing in the implementation of the Convention and to ensure that IDA members satisfy future challenges.

→ **Main challenges pointed out**

The lack of participation of persons with disabilities and their representative organisations within the UN and State parties disability policies.

→ **Proposal**

The DPO involvement should be increased, including by children and women with disabilities, in all aspects of implementation, international cooperation, and reporting to the CRPD and other Committees.

4. Session I: Challenges in reforming mainstream and disability-specific legislation

Moderator: **Tina Minkowitz**, World Network of Users and Survivors of Psychiatry/ IDA

Speakers: **Barbara Murray**, Senior Disability Specialist at the International Labour Office
Diana Samarasan, Director of the Disability Rights Fund
Priscille Geiser, Technical Adviser on Accessibility of the Handicap International

Box 1: List of topics raised

1. Support by UN entities to these processes
2. How to ensure respect to the diversity of disability
3. Modifying the disability architecture (Article 33)
4. Some first (good and bad) examples of aligning national legislation with the CRPD
5. How to ensure meaningful involvement of representative DPOs

Tina Minkowitz pointed out that, from WNUSP's perspective, the discussion of implementation challenges has to start with DPO participation. It is fundamental for DPOs to establish an open line of communication with one another. It is important to have a grass roots or bottom-up approach for DPOs and that each organization is given a representative voice in the process.

4.1 Barbara Murray - The support of the ILO to the implementation processes

The ILO's actions include technical cooperation in Africa and Asia since 2002, which aims to support governments, workers' organizations and DPOs in order to implement legislation. The work includes hosting workshops and open courses on training and employment of persons with disabilities. The ILO Convention 159, which includes representation of persons with disabilities in planning and policy, is part of the CRPD implementation context. Women and girls with disabilities, as well as people with intellectual and psychosocial disabilities, and their organizations are part of the main policies of the ILO, in an inclusive approach.

The ILO has a new disability inclusion initiative in the health and employment sector that mainstreams persons with disabilities in all activities. The ILO supports the publication of legal audits in Zambia, as well as the development of new legislation in Vietnam. Furthermore, the ILO is implementing projects in Ethiopia and Zanzibar. Similarly, the ILO published the "Legislation Guidelines" and the "Right to Decent Work of Persons with Disabilities" with examples of good practices. Regardless of whether the ILO advises on labour legislation, it is fundamental that the entire legislation be reviewed to ensure full compliance with the CRPD.

→ **Main challenges to CRPD implementation:** the lack of funding support for DPO projects and existing laws which are not in compliance with the CRPD.

4.2 Diana Samarasan - Examples of national DPOs working to align national legislation to the CRPD

The Disability Rights Fund (DRF) is a pooled fund, composed by bilateral government donors, private foundations and public charities; with the mission to support DPOs through grant-making in order to participate in ratification, implementation and monitoring of the CRPD.

The DRF currently works within 17 countries in Africa, Latin America, Asia Pacific and Eastern Europe. For example, DRF funds projects to address the national disability act in Bangladesh, India, Peru, Uganda and the Ukraine. Also to address mental health in Uganda and Ghana, guardianship laws in India, electoral reform in Uganda; and municipal level legislation in Peru and Uganda. In addition, DRF is supporting alternative reports from India, Peru, Uganda, Nicaragua and Mexico as well as in Peru on the UPR. In Uganda, where the DRF has been working since 2008, the disability movement is vibrant and strong with five reserved seats in parliament and 400 political seats in the whole country. In 2010, the government appointed the **National Council on Disability** the focal point for implementation, which includes many DPO representatives.

→ **Main challenges to CRPD implementation:** the resistance to admit the changes needed regarding legislation, explained by a fear of challenging what was so hard fought for.

4.3 Priscille Geiser - Experience of HI in building national DPO capacity to do CRPD's consistent advocacy work

Handicap International (HI) works in 15 low and middle income countries in the Middle East and North Africa, the Balkans, Latin America and Asia; directly with different stakeholders which imply different levels of challenges. HI works in close cooperation with DPOs and proposes two types of intervention: strengthening the disability movement, by support to DPOs, and seeks to promote the development of inclusive policies at the national and local levels.

HI has about 15 to 20 initiatives, mostly at the local level, targeting Africa and Asia. Results of these initiatives are: the emergence of a disability movement in Madagascar, DPO's restructuring in the Balkans, and monitoring of the World Bank's initiative in protection of basic services in Ethiopia. HI also advocates in favour of the development actors' obligation to interact with the disability movement in Cambodia, promotes the new national disability law in Afghanistan, makes the **Poverty Reduction Strategy Paper** (PRSP) inclusive (www.making-prsp-inclusive.org), and gathers evidence on best practices through their initiative "Making it Work" [www.makingitwork-crpd.org].

→ **Main challenges to CRPD implementation:**

At the policy making level: Lack of understanding of disability issues and of participatory governance

At the level of DPOs: Limited opportunities to develop the required skills, capacity and resources to play an effective role in civil society

At the service providers/development actors' level: Lack of awareness and capacity to become inclusive and accessible to people with disabilities

At the international level: Monitoring of political participation of DPOs.

→ **Key approaches:** Building on existing DPO capacities, promoting steering committees where DPOs play a leading role, promoting South to South cooperation through regional projects and working strategically in partnership with international level DPOs, like with SHIA, EDF, AODP, African Decade and DPI.

→ **Key lessons:** Do not disconnect training from practice, concurrently work at different levels, and develop strong partnerships between DPOs, NGOs and other civil society movements.

4.4 Main challenges discussed during the debate

→ Support to local and national members and capturing learning for sharing

There is an enormous amount of learning occurring at the national level. It is crucial to absorb this collective knowledge and share it among member organizations, by the publication of reports, videos and outcomes of the activities and meetings. Another powerful tool is storytelling, which influences policy-makers more than lengthy documents.

→ The process of developing the content and the meaning of the Convention

There is a need for DPOs to take part in the process of developing and strengthening the content of the Convention, by providing inputs to help give guidance to the Committee, in order to challenge national legislation, highlighting where the national practice and legislation are not in line with the CRPD.

In countries where there is almost no disability legislation, it is somehow easier to take the CRPD as the main point of reference, than in countries where there is pre-existing legislation.

Proposals:

- a) Focus on how the CRPD Committee can develop the meaning of the different provisions of the Convention, including those which are innovations in comparison with other treaties.
- b) Bring strong/ emblematic cases to the CRPD Committee using the Optional Protocol.
- c) Take into consideration the language translation and the different interpretations of the Convention in different cultures.
- d) Avoid lowering the standards of the Convention in countries where there is pre-existing disability legislation.

→ Integration of legal experts into the legislative reform

In some countries, the legislation reform process is not executed properly, despite good faith. In other cases, some DPOs are not used to the large volume of legal and policy work. The disability movement should be aware that the implication of certain words in the legislation process can have an adverse impact 5 years from now.

Proposals:

- a) Establish an interagency initiative to build the capacity of legal experts, in order to properly execute the necessary legislative reform, to avoid lowering the standards of the Convention.
- b) The law departments of universities should incorporate disability legislation into their curricula.

→ Influence members of the Parliament

Advocacy requires engagement of civil society in legislative reform and to build the capacity of parliamentarians. Laws should be audited, including general laws that pose obstacles and barriers for persons with disabilities. For example, to take into consideration general labour legislation, it is also important to review health legislation, to be sure that these laws are in line with modern standards.

→ Mental health legislation

There are serious difficulties to implement mental health legislation revision as a result of old laws, the lack of capacity of organizations to do the necessary legislative analysis on the CRPD and the lack of true inclusion of persons with psychosocial disabilities in the process. Governments and UN agencies should assure that new mental health bills include the perspective of persons with psychosocial disabilities.

→ Operationalizing rights

While there was excitement about CRPD adoption, it has been followed by a certain level of frustration due to the empty political rhetoric that undermines essential activities. However, it is important to understand that this is an ongoing process. It is also relevant to see the law as a living instrument, which is interpreted as we move forward.

Proposals:

- a) Work at the local level to involve the government, employer's organisations and others.
- b) Identify key practices that can impact the life of persons with disabilities and public policies.
- c) Use good practices to convince the government to take ownership. The role of Article 32 of the CRPD is aimed toward this theme.

→ Political will by governments to implement the CRPD

It is difficult to deal with governments that assert that their national legislation is in line with the CRPD and that changes in legislation are not necessary. This demands strong legal work, therefore, DPO's capacity building.

→ Addressing funding for DPOs

An observed challenge with the EU and donor States is the difficulty for them to integrate the criteria for funding on mainstreaming and the inclusion of persons with disabilities. They prefer to work with general groups. The observed result is a project that supports the old approach to disability.

Proposals:

- a) Leverage the power of Article 32 of the CRPD, because the majority of funding for developing countries for disability issues comes from international aid.
- b) Ensure that DPOs in the North can build strong partnerships with DPOs in the South to monitor the implementation of Article 32.
- c) Make and support advocacy at the country level towards State and UN agency mission offices, considering that the missions are independent and the system decentralized. Often, the policy at the headquarters level is not enough, since it depends on who is in the mission offices.

→ Independence of disability organizations in developing countries

From the perspective of WNUSP, the disability movement in developing countries often seems as if they are relying on others to build their capacity. Is this creating a disability movement with a different character in developing countries then those movements in developed countries? It is important for international DPOs to be resourced and to look at and preserve the independence of local and grassroots DPOs.

→ Collective bargaining

Aggregate concerns of persons with disabilities proved to be difficult in the social dialogue with trade unions and employers, because NGOs/DPOs are seen as outside of the process. The ILO is working on bringing the rights of persons with disabilities into the negotiations. However, trade unions are often weak in developing countries.

→ Involvement of States to mainstreaming the rights of persons with disabilities

To mainstream the rights of persons with disabilities, the first step is to take ownership of the Convention, then to review the laws and policies, to thus acknowledge where the country stands. Some countries are already mainstreaming persons with disabilities in education, training and employment, but they need to modify legislation in order to ensure people with all types of disabilities are included. Furthermore, States which have already ratified the CRPD can influence other States to do the same and can influence processes from the UN monitoring mechanisms, like the UPR.

→ Focal points within government, according to Article 33 of the CRPD

Often the responsibility for disability issues falls on the ministry with the least influence, least resources and least clout vis-à-vis other ministries. It is crucial to have a focal point for disability issues in each ministry, which should be at the highest level possible.

5. Session II: Establishing and/or modifying policies compatible with the CRPD

Moderators: Dr. Imed Chaker, Arab Organisation of Disabled Persons/IDA

Connie Lauren-Bowie, Inclusion International/IDA

Speakers: Diana Chiriacescu, Independent Expert in Social Services

Christian Courtis, Human Rights Officer at the OHCHR

Box 2: List of topics raised

1. Accessible mainstream services and support for participation in mainstream services
2. Do we need specialized services/solutions? Is the perspective of developing countries different?
3. How to move from specialized solutions to mainstream solutions? Examples of deinstitutionalization
4. Designing social protection policies in a way that furthers social inclusion and full participation
5. When are States meeting sufficiently their progressive realization commitments?

Dr. Imed Chaker welcomed participants to Session II and presented the main issues that would be discussed, highlighting the complexity of the CRPD as a human rights treaty, which covers civil and political rights as well as economic, social and cultural rights. While some rights have to be immediately implemented, others may require progressive realization. Furthermore, some CRPD provisions may require fundamental legislative changes, in addition to a fundamental revision of disability-related and mainstream policies, programs and services.

Dr. Chaker introduced the speakers and questioned whether the perspective of developing countries is different, where the challenges on the CRPD's full implementation are much bigger and broader than in developed countries. Persons with disabilities in low and medium income countries, on account of lack of resources, are condemned to live and stay in special institutions, special schools and are not allowed to benefit from mainstream services and programs. Finally, Dr. Chaker posed the question of how these challenges can be addressed by the CRPD.

5.1 Diana Chiriacescu - Deinstitutionalization processes in the Balkan region and issues related to mainstream services versus specialized services

The effect of disability based discrimination has been particularly significant in the field of services, especially in education, employment, housing, transportation and cultural life, which was noted by the CESC Committee in 1994. The CRPD brought attention to enhancing the access to community services, which is related to the development and modernization of services, from which persons with disabilities can actively benefit in the community. This relates to Articles 9 and 19 to 30 of the CRPD. In countries where these articles have been implemented, there were major challenges for policy makers, service providers and users, due to the lack of knowledge of the **twin track approach** and experience on how to balance the combination of mainstreamed, specialized and supported services.

Currently, the inclusive community should be able to offer a wide range of services to persons with disabilities. The ordinary, **mainstreamed services**, should respond adequately to the need of children, adults and elderly persons with disabilities, in education, vocational training, childcare, health and rehabilitation services, transportation, support to employment, among other areas. Moreover, the **specialized services** - which are traditionally organized in a segregated and discriminatory way - should be based on a person-centered way that responds to the real needs of the individual, in accordance with the CRPD. In addition, it is necessary to have **support services** in the community, which ensure that persons with disabilities receive the necessary support to access services available to everyone, such as personal assistance, assistive devices, sign language interpreter service, support teachers in regular schools, supported employment, home support services and adapted transportation.

Policy makers and service providers should take into consideration some key requirements to ensure effective accessibility to all citizens, including persons with disabilities. Those requirements, recognized worldwide, are known by "**the 4As**": Accountability, Accessibility, Availability, Affordability. Services should be based in the community and be either mainstream or specialized. In addition, they should be non-discriminatory, well distributed geographically (covering rural and remote areas), barrier free, quality oriented and the providers and professionals should respect the choice of the users, therefore, involving them in the design and decision-making processes. The paradigm shift toward the "4As" principles requires effort and knowledge from all stakeholders involved. In sum, it is essential that the service domain combines a human rights approach with the technicality of service provision itself, with respect to the principles and standards of the CRPD.

→ **Main challenges for the CRPD implementation:**

In mainstream environment: Lack of understanding of disability issues, and of the CRPD, regarding qualitative provision of services. Moreover, the change in daily practice requires investment, training and coordination at the national and local levels. In addition, governments are not sure on how to improve the use of the public funds, how to invest in mainstream services and how to redistribute the responsibility between local and national budgets.

In specialized services: Transform services in line with the CRPD.

In support services: These services do not exist in many countries or professionals are not adequately trained or recognized as support staff.

On technical aspects: Formal deinstitutionalization, decentralization of services, availability of trained staff, quality control and development of community support services.

5.2 Christian Courtis - The progressive implementation of economic, social and cultural rights

The notion of progressive realization of economic, social and cultural rights was originally enshrined in the ICESCR, Article 2(1), which was used by the CRC and then by the CRPD in Article 4(2). However, in the CRPD it is not possible to list which articles highlight specific economic, social and cultural rights, because there are no provisions that clearly fall in the classical definitions of civil-political and economic-social-cultural rights. The Convention is innovative in the sense that it enshrines the spirit of indivisibility and interdependence of all human rights. In addition, there are new types of rights and this is the most spectacular innovation of the Convention. Article 9 on accessibility, for example, is a cross-cutting provision that impacts all rights. Legal capacity, demonstrated in Article 12, is key to exercise every type of right. Two other innovations are Article 19, life in the community, and Article 20 on personal mobility.

It is important to understand which rights are immediately applicable and which may be progressively realized. In General Comment n° 3, the CECSR Committee raised two criteria to understand the notions of **progressive realization**:

1. Some rights and obligations cannot be fulfilled immediately. A gradual approach is required.
2. The resource intensiveness of these obligations: some rights require more resources.

On the other hand, the CECSR Committee specifies certain **immediate obligations**:

1. The obligation to take steps. Even if the full realization of the right is progressive, States have to move forward, for example, by collecting information and mapping the situation.
2. The adoption of legislation or a national framework law. A related obligation is to review and/or repeal legislation that is not in line with the CRPD.
3. The Non-discrimination Principle. This obligation states that governments should not approve legislation which could be discriminatory, further, they should repeal the existing discriminatory legislation and take steps to eradicate bad practices.
4. Finally, the principle of non-retrogression. States are prohibited from taking steps to reduce protection that has already been granted.

The CESC has developed a concept of **minimum core obligations** in which all rights, even those that require resources and positive obligations, should achieve a minimum core. A similar approach can be applied to the CRPD:

1. Accessibility - The immediate obligation of Article 9 is to ensure that new environments and transportation are accessible and do not pose new restrictions/obstacles.
2. To adopt laws to impose standards on the private sector - a cross cutting obligation of the Convention -, including on reasonable accommodation.
3. Governments should assure the participation of DPOs in decision-making processes and in the design as well as in implementation and monitoring (Article 4(3)).
4. A minimum core translation of the Convention - National legislation should be implemented to prioritize accessible services, even if complete accessibility cannot be immediately achieved.

5.3 Main challenges discussed during the debate

→ The notion of mainstreaming the rights of persons with disabilities

Two main challenges to the CRPD implementation: to develop the notion of mainstreaming and to know what types of mainstreaming are available. Education and health systems, among others, are failing both in developing countries, as in so-called developed ones. Inclusive education/health means quality education and quality health, which affects persons with disabilities and others.

This notion of mainstreaming the rights of persons with disabilities is extremely important for providers and policy makers in the service sector. It is important to define the role and requirements of mainstream services and to place the needed specialized services by persons with complex and particular needs within the mainstream system.

Proposals:

- a) DPOs have to become policy contributors looking at mainstream systems as a whole.
- b) The complexity of mainstreaming efforts needs to be addressed by every actor: users, service providers and policy makers to achieve the spirit, views and good understanding of the CRPD.

→ Lack of inclusion of users and survivors as consultants on mental health policy

There has been a move to include users and survivors of psychiatry as consultants on mental health policy, especially in wealthy states, on making services compliant with the CRPD. However, this has had a limited effect because these policies have been developed in the confines of the medical model and the continued use of forced treatment.

Proposals:

- a) People working on CRPD implementation must be aware of the need to include users and survivors of psychiatry who can use their expertise to ensure that policies are in compliance with the CRPD.

→ Legal capacity: Progressive Realisation versus Immediate Obligation

Legal capacity is a civil right, a prerequisite of all rights, including the right to participate in social life, to exercise the right to vote, to work, to marry, to contract, etc.

The obligation to repeal legislation that violates the CRPD is an immediate obligation, like the obligation to repeal guardianship laws. The kind of support to grant persons to make their decisions can be subjected to progressive realization in compliance with Article 12. It is important, nevertheless, to not categorise rights (civil, political versus social, economic and cultural) because it is obsolete and the conceptual differences are blurry.

Proposals:

- a) Make and support activists' work to raise awareness of the spirit of the CRPD and of the concept of immediate obligations of States Parties.

→ **Implement the CRPD within developed countries**

It is important not to take for granted that in wealthier countries disability issues are well addressed, because in reality - such as in low and middle income countries - there are still many challenges.

→ **Service oriented approach versus rights oriented approach**

One of the paradigm shifts brought by the CRPD is the shift from a service oriented approach to a rights oriented approach. Sheltered workshops and day care centers are in contradiction with the CRPD, however, if these are suddenly removed, they will leave current users excluded and create unintentional vulnerabilities.

Services exist to support the daily life and the rights of persons with disabilities. The content of some rights demands access to some services, for example, there is no right to health without access to medical services, or right to education without accessible schools. Specialized support that is not required for other groups is necessary, such as services for respite care and support services of access to employment.

Proposals:

- a) It is important to use the CRPD to correctly move from specialized areas of support and services to mainstream services in the community and develop an alternative support system.
- b) DPOs should not take for granted that service providers and authorities are familiar with the multitude of priorities on disability issues. Thus, it is important to develop a global perspective of these actors, in their respective places, and to significantly invest in each of them, in order to fully establish the human rights approach.
- c) It is important to raise awareness of service providers, frontline workers and managers of the needs and the rights of persons with disabilities.
- d) The disability movement needs to coordinate knowledge and resources to ensure people delivering services to persons with disabilities do so in a proper manner. For this aspect, frontline personnel must be properly trained.
- e) In some parts of the world where only special services are provided, it is important that the disability movement lobbies governments in order to make mainstream services accessible.
- f) Budgetary policies must be addressed in order to consider the disability approach to budget analysis. DPOs should increase their capacity to be technically involved in the design of services as well as to develop methodologies to trace rights in budget allocation.
- g) It is important for governments to identify the needs of the population and the current services provided within the communities and to harmonize them. For that, governments must develop a monitoring and evaluation system.

→ **The responsibility to implement Article 8**

Despite Article 8 (raising awareness) is an immediate obligation, only few actions have been taken by States to implement it. One of the reasons for this is that this provision is an open-ended clause, allowing States to determine which measures can be used.

Proposals:

- a) DPOs should be involved in the process to provide guidance on interpretation of the CRPD to the CRPD Committee by reporting, filing complaints and participating in the General Comments process.
- b) It is crucial to raise awareness of UN agencies, which have the obligation to comply with the CRPD.

→ **Raise the rights and needs of specific groups within the CRPD**

The CRPD is a tool to advance disability rights and the needs and concerns of persons with disabilities.

Proposals:

- a) The disability movement should develop the concept and meaning of the Convention, article by article, including the needs of each specific group.
- b) Organisations representing specific types of disabilities should produce interpretations of the Convention that are especially relevant for their constituency.

→ **Produce outcomes, qualitative indicators and benchmarks**

Outcomes, indicators and benchmarks are very popular in governments. Yet they are often viewed as a detriment to the kind of services and emphasis needed, because several changes are qualitative and not so easy to measure with indicators. One of the goals of collecting information is to monitor progressive realisation. Structural indicators, process indicators and outcome indicators should be adopted.

Proposals:

- a) Persons with disabilities and DPOs should be involved in enhancing indicators, including qualitative ones.

6. Session III: Financing the implementation of the CRPD

Moderators: **William Rowland**, World Blind Union/IDA

Venus Ilagan, Rehabilitation International/IDA

Speakers: **Gerison Lansdown**, International Children's Rights Consultant

Patti O'Neill, Coordinator of the DAC Network on Gender Equality /OECD

Catherine Naughton, Director of CBM's EU Liaison Office in Brussels

Box 3: List of topics raised

1. Financing of support services for people with disabilities (decentralization, delivery by NGOs)
2. Disability budgeting. What can we learn from child rights budgeting?
3. Increasing and improving the use of development cooperation funds to promote disability rights and avoiding the wrong use of development cooperation funds
4. Impact of the financial and economic crisis

William Rowland welcomed participants to Session III and presented the main issues that would be discussed. He pointed out that the CRPD is a complex human rights instrument to implement, due to various reasons, such as the comprehensiveness of the CRPD and its anti-discrimination principle, the statistical invisibility of persons with disability and the relative weakness of DPOs. However, resources are a key element. It is important to distinguish processes in the developed and developing world, which are directly impacted by budgetary issues, political (in)stability as well as political processes within societies in transition.

6.1 Gerison Lansdown - Lessons to be learned from the implementation of the CRC, including the issue of child rights budgeting

Key challenges in the children's rights movement have several common points that can be applied to the movement of persons with disabilities. Main challenges are that children are still not viewed as subjects of rights and governments repeatedly express commitments to children, but fail to introduce any measures to give effect to those commitments. Furthermore, children are systematically denied a voice in most societies in the world. Additionally, it is difficult to identify the levels of expenditure for children's rights, as indicators to measure children's rights implementation are absent or inadequate, and, finally, there is inadequate advocacy for children before governments.

It is crucial to have an explicit recognition of children as right-holders, and that appropriate laws should be adopted to protect children. It is also important to have budget allocation, pro-children and pro-disability, in order to implement commitments and services. Finally, it is necessary to apply systems for monitoring and evaluating changes towards the realization of these rights. The strategies to achieve these goals include plans of action for implementation and child impact assessment to measure how the national strategies will impact on children. Also essential is disaggregated data collection, visibility, budget, capacity building, collaboration with civil society and independent mechanisms for accountability.

In reality, not many governments are making their children budget policy visible. According to a recent UNICEF analysis on rich countries, only Sweden and Norway have good practices. Italy and Israel are in the process of developing it. Two African projects which confront this invisibility and lack of transparency from governments are the **African Child Policy Forum**, [www.africanchildforum.org], in Ethiopia, and the **IDASA - Institute for Democracy in Africa** [www.idasa.org.za], in South Africa. One of the key lessons that came out of these projects is that commitment on children is about political will, not about money and GDP. The potential use of these projects' outcomes is to identify the gaps between policy commitments and national plans of action and spending, making it possible to analyze expenditure and commitment on an annual basis.

→ **Main challenges to CRPD implementation:**

- Besides government policies, natural disasters and health epidemics, impact on the realization of rights
- The significant timeline between changes in expenditure and changes in outcomes for children
- The impact and effectiveness of policies depend on demand for services
- Availability is not enough, it is important to disseminate the service and for people to use it
- Limited data on how poverty has changed over time

→ **Key lessons:** Transparency on budgetary allocations is a relevant indicator of government commitment to the realization of rights. Political will and the role that civil society should play, by advocacy and activism, are critical elements to make governments accountable.

6.2 Patti O'Neill - The experience in gender mainstreaming of the Development Assistance Committee of the OECD

The work of her Unit within OECD consists in advising aid agencies of the European Commission and the 23 members at the Development Assistance Committee (DAC) on gender equality and women's rights. These members have to report their aid statistics, including gender equality policy. This data is an important basis for European and UN agencies to monitor gender equality policies.

The disability movement is reputed as having great advocacy power. However, it is time now for implementation. It is important to improve the idea of disability budgeting in order to promote concrete results. Gender budgeting was integrated into the national public financial management systems in Morocco, Tanzania, the Philippines, Ecuador and in some states in India. Sometimes the process has been started by NGOs, such as in Tanzania. For this process, it is important to promote alliance with the Finance Ministry, which is not a natural ally, but a necessary one.

The **Accra Agenda for Action**, 13(c), highlights that developing countries and donors should ensure that their respective development policies and programmes are designed to be consistent with their agreed international commitments on disability, among others. Accountability and inclusiveness are major elements of these new approaches.

→ **Key lessons:**

- Research done by a women's umbrella organization, about allocation of funding of women's rights. The most valuable result collected was the strategic partnership built during this process.
- Article 32 of the CRPD is a powerful instrument to draw attention of donors and partners to impose pressure to implement the Convention through aid programs. The CRPD Committee has an important role, through its recommendations, to point out necessary improvements.

→ **Proposals:**

- To be involved in the **Fourth UN Development Group High Level Forum on Aid Effectiveness**, in Busan, Korea, from 29 November to 1 December 2011 [www.undg.org/index.cfm?P=1412]. It is an important opportunity to guide key development actors and raise their awareness of Article 32 of the Convention.
- To consider becoming an actor at **Better Aid** [www.betteraid.org], which is an umbrella civil society organisation and has a major role in planning Aid Effectiveness conferences, but which currently has no disability rights focus.

6.3 Catherine Naughton - Global Budget Support: challenges and opportunities for financing CRPD implementation

The international cooperation donors are committed to support developing countries on their own development policy, which can be very relevant for disability organizations, because donors will increase support to national government programs. However, they have other commitments of their own, like poverty reduction, MDG achievement, and a whole range of Paris Declaration and the Accra Agenda for Action. The two major ways for donors' support are (1) **Project Support**, which has specific initiatives, objectives in the short period of time and outcomes, and the (2) **Programme Based Approach** (PBA), applied by ILO, which support the work of national government, in a long term process, focused on real change of the country's *status quo*.

Positive elements of the **Global Budget Support** (GBS) are (1) the leadership by the host country, which has to take steps to implement the UN Convention, (2) there is a single comprehensive programme and budget framework, with less bureaucracy and more dialogue, (3) a formalized process for donor co-ordination and harmonization of procedures for reporting, budgeting, financial management and procurement, and (4) support public services, where DPOs can advocate for the implementation of the human rights approach, as well as for the CRPD, in the long term. Through GBS, government receives more funding to national budget, which varies depending on government priorities.

While on the **Sector Budget Support**, only particular sectors are targeted, as health, education, etc. Policy dialogue and financial aid are oriented to a specific sector. This system can have more potential for the CRPD, because it is easier to manage and focus on specific issues. However, it is not the best instrument in terms of access for persons with disabilities. GBS is more appropriate to social sectors in terms of dialogue focused on macro issues.

→ **Main challenges for CRPD implementation:**

- Supporting partner government development strategies and programmes, because many countries do not have a particular policy on CRPD implementation.
- Existent layers of decision making- trends towards decentralization.
- Lack of technical resources for the implementation and monitoring of inclusive policies. Government and other stakeholders do not yet have a full definition about the most effective policy to implement the Convention.
- Budget transparency
- Lack of capacity for stakeholders to influence GBS and SBS.
- Competing issues; it is important to make alliances with gender equality organizations and/or child rights and/or indigenous groups then to compete individually.

→ **GBS opportunities for CRPD implementation:**

- Main sources of support to social sectors, and the only true source of support from donors to build up countries' own systems. In addition, promote policy dialogue and encourage countries to ratify the Convention. Finally, this system increases donor coordination, according to the Paris and Accra declarations.

6.4 Main challenges discussed during the debate

→ **Funding support to bad practices**

It is crucial that donors and development agencies do not support practices which are not in compliance with the CRPD.

Proposals:

- a) Peer review is an important mechanism to monitor practices; two donors look at policies and implementation of another donor.

→ **Lack of data and of insertion of persons with disabilities**

UNDP, UNICEF, UNESCO and governments working together to promote the inclusion of children at school worldwide. However, without taking into consideration children with disabilities. Frequently, there are no data mentioning persons with disabilities.

Proposals:

- a) Draw the attention of donors and governments to include children with disabilities within the educational system. Civil society and DPOs should employ donors' support to monitor and address this discrimination, taking into account persons with disabilities and others to ensure that all of them are being included.
- b) The treaty bodies are important allies. It is crucial that the CRPD and other Committees analyze the actions of Governments broadly, looking at each right. DPOs should assist the Committees to hold States accountable for their (in)actions and for transparent spending.

→ **The impact of the financial crisis on persons with disabilities**

The financial crisis has had a direct impact on disability issues in developing countries. There were budget constraints in United Kingdom, United States and other countries, which are fundamental in terms of income support and pension systems.

→ **Mainstream voice of persons with disabilities**

The disability movement should increase its voice to fight for the quality of services, especially in education and health, for persons with disabilities and others. So that persons with disabilities and their representative organizations participate in general discussions, not only when it concerns persons with disabilities.

→ **Disability budget policy**

A budgetary allocations analysis tool should be developed in order to examine the disability budget policy of governments and donors.

7. Session IV: What can the UN system do to contribute to the implementation of CRPD?

Moderators: **Lex Grandia**, World Federation of the DeafBlind and IDA

Ruth Warick, International Federation of Hard of Hearing People and IDA

Speakers: **Sven Isorjavi**, Policy Analyst for Poverty Monitoring and Assessment of UNDP

Simon Walker, Advisor on the Human Rights and Disability at the OHCHR

Nicolette Moodie, Liaison officer for the UNICEF global gender and human rights unit

Allana Officer, Coordinator for the Disability and Rehabilitation Team at the WHO

Tom Shakespeare, Technical Officer in the Disability and Rehabilitation Team - WHO

Box 4: List of topics raised

1. Mainstreaming disability rights in the work of the UN country offices
2. Lessons to be learnt from the implementation of other human rights treaties
3. Effective involvement of DPOs in the work of UN at country level
4. World Disability Report and CBR guidelines
5. Presentation on draft thematic report on the role of international co-operation

Lex Grandia welcomed participants to Session IV and highlighted the work done by UN Agencies and Country Teams on the implementation of the CRPD at the national level.

7.1 Sven Isorjavi - Examples from UNDP country offices supporting the CRPD implementation

UNDP works on capacity development through advocacy, policy and advisory services and technical support, within four focus areas: poverty reduction, democratic governance, crisis prevention and recovery, energy and environment. Currently, there is a body with about a hundred projects targeting persons with disabilities in the areas of capacity development of DPOs and national governments, advocacy and promotion of the CRPD, inclusion of disability issues into national legislation, policy and planning, data information, collection and analysis, and access to information.

The **Inter-Agency Support Group for the CRPD** has published the Guidance Note for Country Teams on Disability [www.undg.org/docs/11534/Disability---Guidance-note-for-UN-Country-Teams.pdf]. The UNDAFs' preparation process takes two years, while its implementation takes four years. Then, for this Guidance to become effective and disability issues included, it is necessary to wait for the currently prepared UNDAFs' results, and the ones that will be produced in the next few years.

→ Main challenges for CRPD implementation:

- Lack of capacity (UNDP, duty-bearers, rights-holders) and crowded policy making space
- UNDP's decentralized business model and competing priorities
- The relationship with some countries, which is addressed by advocacy, political dialogue and analytical work, through Human Development Reports and Common Country Assessments
- Lack of financial resources, which led to the discussion about a Thematic Multi Donor Trust Fund
- Disconnection of the CRPD from the broad human rights based approach

→ Proposals:

- Involve experts, which have worked on the human rights approach, in supporting the CRPD
- DPOs should be implementing partners, recipients of grants and contractors

7.2 Simon Walker - Examples of OHCHR support in alignment of national legislation to the CRPD

In Albania, there was a major interest to promote the ratification of the CRPD, for which the OHCHR and the UN Country Team played a crucial role. It started as an impetus from civil society, in 2009. The first action was to support training of DPOs members, journalists and trainers. Furthermore, a cooperation plan was built with the Resident Coordinator and the head of the UNDP. UNDP established a program of ratification with 3 pillars: law reform, institution building and accessibility. In order to start the process

of legislation law, it was necessary to first identify which laws could be reviewed, how they should be reviewed and how they conformed to the Convention. The process faced many challenges, including from the DPO side, which do not agree with mainstream or specific disability laws. Concerning institution building, the Handbook for Parliamentarians has been translated into Albanian and the UNDP has led an inter-agency thematic task force on disability rights. UN programs, advocacy and advise government are a way in which the UN can, nationally, promote the CRPD.

UN country teams are working on reporting processes before the CRPD Committee and UPR, with the important role to provide information on key issues to support strong and pointed recommendations. This will therefore support the UN country team role in taking them forward. Civil society, which has a similar role, is a relevant partner to implement those recommendations. Albania has signed the CRPD on December 2009.

Concerning the **OHCHR Thematic Report on International Cooperation**, submissions were received from 44 States, 8 from INGOS, 11 NGOs, 15 NHRIs, the Special Rapporteur on Disability and the Global Partnership on Disability and Development. The report frames rules, cooperation among states, partnerships with Intergovernmental organizations and NGOs and looks at challenges relating to international cooperation. Some of them are:

- Disability specific cooperation rather than mainstreaming disability rights
- International cooperation focused on disability rather than on the CRPD, which can present the risk of use of old approaches, which are not in line with the CRPD
- Fragmentation of the cooperation
- Only few submissions look at sensory disabilities
- More focus on mainstreaming the Convention on development and much less in protection of disability rights within humanitarian actions

→ **Main challenges:**

- Lack of understanding on how to connect principles and standards of the CRPD with other treaties
- A tendency to repackage existing work without taking into consideration the aim and standards of the CRPD
- Hesitation amongst stakeholders to work on the difficult issues of legal capacity

→ **Proposals:**

- The IASG Guidelines “Including the rights of persons with disabilities in United Nations programming at country level” should be used not only in the UNDAF process, which is quite long, but also in other planning processes within country level

7.3 Nicolette Moodie – Experiences from CRC Reporting and Implementation

UNICEF is bound by the Convention of the Rights of the Child (CRC), which applies to all children, including children with disabilities. UNICEF has actively worked on disability issues, shifting from a project based to a systematic approach. UNICEF works within country level by supporting the review of legislation, in line with the CRPD, improving the availability of data on the situation of children with disabilities, reforming child care systems and developing national frameworks for inclusive education. UNICEF’s experience in CRC reporting is reflected by the improvement of ratification and visibility of the Convention and its Protocols, also by the support to the reporting process of States Parties and alternative reports from civil society. UNICEF actively participates in meetings of the CRC Committee and provides information and suggests recommendations. Furthermore, UNICEF disseminates the CRC recommendations and has the obligation to include CRC and CEDAW recommendations into country program planning.

In 2007, UNICEF has issued a global **Program Guidance on Children with Disabilities**, which provides information on how to mainstream the rights of children with disabilities in programming and advocacy.

The guide emphasizes disability as an issue of concern to all sectors and at each stage of the five years program cycle, increasing priority to disability in existing programmes through new analysis. Another key element is the focus on the roles and capacities of those with direct responsibility to prevent and address discrimination against children with disabilities.

→ **Lessons learned from country offices:**

- High level political commitment is important to generate concrete government action
- Civil Society, especially DPOs, is a catalytic force in articulating needs and designing responses
- Good policy responses require good data
- Legal frameworks are only a starting point. Budget allocations are crucial
- Need for effective accountability mechanisms at all levels
- Access to services must be accompanied by communication for social change

→ **Lessons learned from CRC involvement that may help CRPD implementation:**

- Crucial importance of national periodic reporting process in ensuring accountability, self-assessment, coordination, alliance building, national level policy advocacy
- Build on the momentum created by reporting and follow to keep rights of persons with disabilities on the national policy agenda
- Focus resources on general measures of implementation (the “general obligations”)
- The CRC Committee has really maximized the impact of Article 45 (corresponding to Art 38 of the CRPD) in getting UN and NGOs involved in CRC reporting and implementation

→ **Main challenges:**

- Lack of organizational policy on disabilities. In-house awareness, technical and analytical capacity must be increased
- Indicators to monitor and evaluate inclusive programming have not been developed
- Bureaucratic system of tracking expenditure
- Training programme on disability needed

7.4 Alana Officer and Tom Shakespeare - Examples of WHO work to support implementation of the CRPD, including the CBR guidelines

The WHO receives its mandate from the 193 member states. WHO is working on developing the global evidence base, for example, through the upcoming **World Report on Disability**, developed in partnership with the World Bank. WHO has also produced guidelines, like the Guidelines on the provision of Manual Wheelchairs and the Community-Based Rehabilitation Guidelines, developed in partnership with ILO, UNESCO and IDDC. WHO has a key role on **building capacity** in the area of disability data, policy development, health and rehabilitation services provision, developing model projects to promote mainstream rights, for example, in sexual and reproductive health.

The **World Report on Disability** aims to highlight good practice based on existing evidence on the situations and the day to day experiences of persons with disabilities. The report looks at the multi-dimensional nature of poverty related to disability, providing information to enable States to develop policies and to improve the delivery of services, to generate concrete action, raise awareness and increase political will on the rights of persons with disabilities. This report has been produced in co-operation with DPOs, NGOs, professional associations, experts and the UN agencies. This partnership, which contributed to the quality of the information and its dissemination, was part of a broad process intended to improve collaboration across sectors into bringing around the necessary changes in attitudes and approaches related to persons with disabilities. The process of the report opened some potential opportunities for all partners, including on national situation analysis, national dialogue, creating a platform to bring together stakeholders and look at current national situation and suggesting strategies of action.

The **Community Based Rehabilitation Guidelines** cover the areas of health, education, livelihood, social and empowerment. The aim of these guidelines is to provide guidance on how to strengthen and develop existing CBR programs (currently within 96 countries), promote CBR as a strategy for community based inclusive development and help support people who have responsibilities related to the rights of persons with disabilities. The Guidelines have a strong focus on empowerment of persons with disabilities and their families.

Over the last year, the so-called **WHO Task Force on Disability** has worked to promote informational and physical accessibility of regional and national offices to persons with disabilities. It is important to highlight that the UN Agenda will change as there are more workers with disabilities within the UN system.

→ **Main challenges:**

- Lack of research
- Lack of disaggregated data
- Complexity of what is needed to address the rights of persons with disabilities
- Competing demands and need for prioritization
- Lack of funding and staffing
- Regional and country colleague's capacity
- Need to ensure that the paradigm shift is happening
- Need to work across different UN agencies and State Ministries

7.5 Main challenges discussed during the debate

→ **Rights based approach on rights of persons with disabilities**

It is crucial to integrate CRPD standards relating to users and survivors of psychiatry. It is important that publications from UN agencies highlight the principles of the Convention and clearly banish practices that are not in line with the Convention, for example, forced treatment and forced medication.

On the other hand, it is important that DPOs understand that UN agencies work under mandates, which are established by States. So, sometimes, they are not able to work on the whole aspects of the rights of persons with disabilities.

→ **Coordination of UN agencies priorities on disability rights**

From a DPO perspective, there is a shift of action of UN agencies after the entry into force of the CRPD, for example within specialized agencies like UNICEF and UN Women. It is important to know how these agencies will coordinate their priorities. It is crucial to reinforce capacity and expertise of UN, DPOs and NGOs staff to use a human development approach.

Proposals:

- a) DPO involvement in national coalitions
- b) DPO participation in monitoring and reporting processes
- c) Improve partnership between children rights organizations and DPOs, and their collaboration with UN agencies

→ **Gradual movement toward full inclusion of person with disabilities**

Currently, society and disability movement are at a cross-road momentum. It is important to be aware that only specific services for people who have been excluded most of their lives would not be the best practice. It is necessary to gradually move towards total inclusion.

8. Closing Session

Moderators: **Diane Richler**, Chair of the International Disability Alliance
Yannis Vardakastanis, Vice-Chair of the International Disability Alliance

It is important to continue the work which was undertaken during the negotiations on the Convention on the Rights of Persons with Disabilities (CRPD), which is political and activist work. The implementation of the CRPD is associated with profound and deep political commitments, which requires decision-making and actions from outside of the disability movement.

The Convention was adopted in a different political, social and economic situation than today, and the financial crisis has put more persons with disabilities under the poverty line and in risk of exclusion. In order to make the CRPD part of the disability agenda and movement, it is necessary for persons with disabilities to feel that the Convention is their own Convention. For that, IDA and other stakeholders need to make it a political process again.

The **International Disability Alliance** wanted to hold this Multi-Stakeholder Seminar to understand what main challenges exist in our work. The Seminar has helped to understand the complexity of the challenges.

→ **It is crucial to make strategic decisions**

The disability movement should be able to choose what is a step forward in their own context and to know where disabled people and DPOs want to be. Furthermore, they need to envisage what the world will look like when the Convention will be fully implemented.

→ **More articulation is needed**

The disability movement needs to improve articulation on where they want to be. Activities, programs and policies should be supported and be consistent with the spirit of the Convention and what it means for persons with disabilities, including by banishing practices that the disability movement deems to be a departure from CRPD standards.

IDA members prepared a study on the impact of the Decade of Persons with Disabilities in Central America and it was found that, despite increased investment and focus over a period of time on disability issues, the way in which the support was applied in fact weakened the disability movement, because it was focused on services and not on strengthening DPOs.

IDA members and the movement of persons with disabilities need to decide how the **spirit of the Convention** for which they fought for, will be implemented.

Annex I

Identifying Key Challenges in the Full and Effective Implementation of the CRPD

Palais des Nations, Room IX
Geneva, December 10th, 2010

Opening Session:

09:00-9:30 **Diane Richler**, Chair of the International Disability Alliance
Ana Peláez, Vice-Chair of the Committee on the Rights of Persons with Disabilities

Session I: Challenges in reforming mainstream and disability-specific legislation

9:30-11:00 Co-moderators: **Tina Minkowitz** (WNUSP/IDA) and **Liisa Kauppinen** (WFD/IDA)
Speakers: **Priscille Geiser** (HI), **Barbara Murray** (ILO), and **Diana Samarasan** (DRF)

Topics to be discussed:

- Support by UN entities to these processes
- How to ensure respect to the diversity of disability
- Modifying the disability architecture (article 33)
- Some first (good and bad) examples of aligning national legislation with the CRPD
- How to ensure meaningful involvement of representative DPOs

11:00-11:30 Coffee-break

Session II: Establishing and/or modifying policies compatible with the CRPD

11:30-13:00 Co-moderators: **Klaus Lachwitz** (II/IDA) and **Imed Chaker** (AODP/IDA)
Speakers: **Diana Chiaracescu** and **Christian Courtis** (OHCHR)

Topics to be discussed:

- Accessible mainstream services and support for participation in mainstream services
- Do we need specialized services/solutions? Is the perspective of developing countries different?
- How to move from specialized solutions to mainstream solutions? Examples of deinstitutionalization
- Designing social protection policies in a way that furthers social inclusion and full participation
- When are States meeting sufficiently their progressive realization commitments?

13:00-14:00 Lunch break

Session III: Financing the implementation of the CRPD

14:00-15:30 Co-moderators: **William Rowland** (WBU/IDA) and **Venus Ilagan** (RI/IDA)
Speakers: **Gerison Lansdown**, **Patty O'Neill** (Gender OECD/DAC), **Catherine Naughton** (IDCC)

Topics to be discussed:

- Financing of support services for people with disabilities (decentralization, delivery by NGOs)
- Disability budgeting. What can we learn from child rights budgeting?
- Increasing and improving the use of development cooperation funds to promote disability rights and avoiding the wrong use of development cooperation funds
- Impact of the financial and economic crisis

15:30-15:45 Coffee break

Session IV: What can the UN system do to contribute to the implementation of the CRPD?

15:45-17:45 Co-moderators: **Ruth Warick** (IFHOH/IDA) and **Lex Grandia** (WFDB/IDA)

Speakers: **Sven Isorjavi** (UNDP), **Simon Walker** (OHCHR), **Nicolette Moodie** (UNICEF), **Alana Officer/Tom Shakespeare** (WHO)

Topics to be discussed:

- Mainstreaming disability rights in the work of the UN country offices
- Lessons to be learnt from the implementation of other human rights treaties
- Effective involvement of DPOs in the work of UN at country level
- World Disability Report and CBR guidelines
- Presentation on draft thematic report on the role of international co-operation

Closing session:

17:45-18:00 Remarks by IDA Chair **Diane Richler** and IDA Vice-Chair **Yannis Vardakastanis**

Seminar realized by International Disability Alliance:

Disabled Peoples' International, Down Syndrome International, Inclusion International, International Federation of Hard of Hearing People, Rehabilitation International, World Blind Union, World Federation of the Deaf, World Federation of the DeafBlind, World Network of Users and Survivors of Psychiatry, Arab Organization of Disabled People, European Disability Forum, Red Latinoamericana de Organizaciones no Gubernamentales de Personas con Discapacidad y sus familias (RIADIS) and Pacific Disability Forum

Support provided by:

AusAID - Australian Government Overseas Aid Program

SIDA - Swedish International Development Cooperation Agency

Annex II**BACKGROUND PAPER****Identifying Key Challenges in the Full and Effective Implementation of the CRPD****Discussion Paper for Multi-Stakeholder Meeting****December 10, 2010, Geneva**

This document presents some of the challenges faced in implementing the CRPD, with a focus on low and middle income countries. It is intended to spark discussion for the 10th December multi stakeholders meeting, the outcome of which will be part of the discussion to be held among IDA members on a possible framework to produce guidelines for the implementation of the CRPD. This document has been prepared by the IDA Secretariat and has not undergone any discussion with IDA members and does therefore not reflect the official position of IDA.

As national and international stakeholders work to implement the CRPD they are beginning to gather experiences on some of the common challenges they face. These challenges relate to the complexity of the convention itself, the role of various stakeholders and the level of knowledge available. Indeed **the CRPD is a very complex human rights treaty** for a number of reasons:

- ***Its comprehensive nature***, covering civil and political rights, as well as economic, social and cultural rights combining elements of immediate and progressive implementation.
- The fact that it is ***not just an anti-discrimination convention*** but includes detailed provisions that seek to achieve de facto equality of persons with disabilities;
- ***The diversity of barriers faced by the various disability constituencies*** which often require differentiated policy responses to adequately take into account the different situations faced by persons with disabilities.
- ***The significant changes it entails, which leads to the CRPD being characterized as a true paradigm shift.*** Some of the provisions of the CRPD require not only fundamental legislative changes, but also a fundamental revision of disability-related and mainstream policies, programs, and services.

Some specific challenges are also related to the general lack of awareness and subsequent structural discrimination and inequalities that the CRPD aims to eliminate:

- ***Insufficient understanding of the human rights approach to disability.*** Additional to the inherent complexity of the CRPD, ***the entrenched medical and charity approach*** to disability in many societies, including among policy makers, professional, NGOs and some DPOs, often leads to misinterpretation of the provisions of the Convention and misconception of programs and policies aimed at supporting persons with disabilities.
- ***The statistical invisibility of persons with disabilities and barriers they face*** which has been both a cause and consequence of marginalisation of persons with disabilities by international and national policies. Generally, available data are very poor and those available rarely focus on the barriers faced by persons with disabilities. While work is being done to start to address these

issues¹, there will still be a serious gap in availability of both specific and disaggregated data generated by general census and surveys for years to come.

- **The relative weakness of national disability organisations in many countries:** compared with other social groups (workers, farmers, women...) disability organisations are financially weak, have few advocacy skills and often do not work in a coordinated way. While the CRPD strongly obliges States Parties to involve representative organisations of persons with disabilities in the implementation of the Convention, efforts need to be made to strengthen the capacity of DPOs to ensure their meaningful involvement.

While the CRPD sets the overall objectives to be achieved, there is the need to complement the CRPD with more precise guidance to all stakeholders in terms of legislative design of policies, as well as budgetary issues and other elements. While every country faces some challenges in the full implementation of the convention, those challenges are obviously much larger in developing countries.

- **The legislative reform challenges:** Many DPOs and policy makers across the world are grappling with how to approach the harmonization of national legislation with the CRPD.
 - Considering the challenge to make major legislative changes in many countries, what are the elements that stakeholders should take into consideration in their adoption of comprehensive disability anti discrimination legislation and the alignment of all mainstream legislations with the CRPD?
 - How can countries mitigate the risks that harmonisation could translate in low interpretation of the standard of the convention?
 - To which extent will DPOs be able to make use of legal actions, including the use of strategic litigation whether to force legislative changes or implementation of the existing or newly adopted legislation?
- **The policy reform and development choices:** Beyond the question of specific provisions, there are overarching questions related to the balance to be found in policy reforms.
 - What are the factors that should guide policy reform and prioritization of resources between the mainstreaming and the transformation and development of specific support measures and servicesⁱ?
 - What are the elements to take into consideration to ensure that policy reform results in de facto equality, and not simply equality of opportunity? What are the elements to take into consideration to ensure that policy reforms' outcomes go beyond equality of opportunity and result in substantive equality?
 - How should social protection measuresⁱⁱ be designed, within allocated resources, to strengthen participation and empowerment of persons with disabilities?
- **The financing of the implementation of the convention:** in a context of shrinking fiscal spaceⁱⁱⁱ for social policy implementation in both OECD and developing countries, the question of funding of the CRPD implementation is crucial.

¹ <http://www.un.org/disabilities/default.asp?id=1515>

- What are the lessons learned from ICESCR, CEDAW and CRC to overcome the difficulty to track disability related public expenditures both with regards to mainstream and specific measures^{iv}?
- What are good policy practices in reallocation of resources^v and creation of new sources and mechanisms of funding^{vi}, including public-private partnership?
- What are the concrete steps to be taken to ensure that international cooperation^{vii} supported program and policies are inclusive and accessible, promote rights of persons with disabilities and at the very least do not contribute to create or perpetuate barriers to participation of persons with disabilities, in line with article 32 of the CRPD and commitment of the Accra agenda for action²?
- **The dialogue between public authorities and organisations of persons with disabilities** is critical for the development of common understanding of the CRPD principles and provisions as well as the priorities in the immediate and progressive realisation of some aspects of the Convention.
 - What are the good practice and lesson learned from existing focal point and coordination mechanisms in line with article 33?
 - What could be the challenges and opportunities of the development of national strategies for implementation of the CRPD and the mainstreaming in broader national strategies^{viii} according to existing experiences?
 - What are the good practices in engagement of DPOs in local government^{ix}, in relation to the increasing devolution of responsibility of implementation to as part of decentralisation efforts?
 - To what extent can the dialogue with law makers related both to adoption of new legislation and budgeting cycle be effective?
- **The role of UN agencies:** The role of UN agencies and development banks are crucial as they have to enforce the principles and provisions of the CRPD in their programs and structure, both in their country work and global initiatives.
 - What are the challenges of the enforcement of the newly issued United Nation Development Assistance Framework³ guidelines on inclusion of rights of persons with disabilities and review of country assistance strategies of the World Bank?
 - How is it possible to ensure that all existing and future existing global initiatives of different level such as the MDGs, the social protection floor initiative⁴, the Fast Track Initiative, foster the principles and provisions of the CRPD?
 - How can UN agencies collaborate to develop as fast as possible the technical, training and funding capacities to support efforts of national stakeholders to implement the Convention?

² The Accra Agenda for Action (AAA) is aimed at accelerating the progress towards aid effectiveness (ownership, alignment, mutual accountability, results based and harmonization) agreed in 2005 in Paris declaration and focus on predictability of aid, use of country systems rather than donors system

³ UNDAF is the strategic framework defines by UN country team in a given country with national stakeholders, primarily state, to plan the next 5 years.

⁴ The UN Social Protection Floor (SPF) Initiative promotes universal access to essential social transfers and services. More information at <http://www.ilo.org/gimi/gess/ShowTheme.do?tid=1321>

Transversal questions to consider for each session of 10th December meeting:

- How can States (including in their donors roles) and UN agencies strengthen the advocacy capacity of DPOs without limiting their independence? Which would be the priorities for capacity building?
- How is it possible to effectively and widely document and make available interesting practices supporting the policy development efforts of stakeholders?
- What type of tools and documentation should be developed to support efforts of stakeholders?
- What type of training courses should be developed and made accessible in the short and medium term both for public administration staff and DPOs?

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^{vi} ESCWA, *Looking the Other Way: Disability in Yemen*, Social Development Division, Policy Brief, 2009

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