



The Global Disability Summit (GDS) 2022 – OSLO | Preparation process

AN OVERVIEW OF GDS 2022 CIVIL SOCIETY CONSULTATIONS



On December 2020, the International Disability Alliance (IDA) organized with national and regional partners a series of consultations to inform the Global Disability Summit (GDS) themes, priorities and preparations. These mark the beginning of a consultative process involving more than 20 workshops currently in preparation across all regions of the world. So far consultations have reached:



15 countries



100+ participants



05 languages

National GDS Consultations - December 2020

The GDS is a participatory process, in which governments, multi-lateral agencies, international organizations, organizations of persons with disabilities and other stakeholders convene to



Youth participating at the consultation in Nicaragua

dialogue and commit concrete goals that promote the inclusion of persons with disabilities in global development. The Commitments include a timeframe for their completion and constitute the backbone of the Global Disability Summit's accountability mechanism.

In 2018, during the first GDS in London, an impressive set of 170 commitments were reached. These are currently hosted on [IDA's website](#), but will be migrated to a new GDS website in April.

The backbone of the GDS's participatory character is the **consultation process** that engages representative organizations of persons with disabilities from around the world prior to the main event. They promote ownership of the GDS process among organizations of persons with disabilities, particularly from countries in the Global South. Communities of persons with disabilities around the world are encouraged to seize the GDS as an opportunity to advance disability inclusion in their countries as well as globally.

This is why national and regional consultations are crucial; they serve as the basis for the elaboration of the GDS agenda, so it reflects the priorities, aspirations and concerns of people with disabilities in different

"This is an opportunity to reflect on public policy and democracy, so education, health and employment are improved, and our voices heard. We hope to achieve real change for people with disabilities."

Ramona Garcia Calderon

parts of the world. The GDS Secretariat, recently created, is partnering with the Capacity Building Unit of IDA and organizations of persons with disabilities from around the world to ensure a robust consultation process, capable of collecting information in different languages and across geographies. Once systematized, this information will inform the elaboration of agendas.

To this end, **guiding questions** and a set of **5 desired outcomes** were devised, to help steer the dialogue towards comparable sets of information:

Outcome 1: The diversity of the disability community is adequately represented, including the most underrepresented groups of persons with disabilities.

Outcome 2: The perception by organizations of persons with disabilities of the progress made in countries since the GDS 2018 is highlighted, following the bottom-up principle of the GDS partnership.

Outcome 3: Organizations of persons with disabilities identify the priority focus areas for the forthcoming GDS, and capacity building opportunities in the lead-up to the main event, such as webinars, online courses, and multi-stakeholder regional dialogues are seized.

Outcome 4: Organizations of persons with disabilities come up with advocacy and awareness-raising strategies around GDS commitments and discuss new commitments that may be requested from their Governments.

Outcome 5: Lessons learned from the COVID 19 pandemic are inserted and present in the GDS discussions and outcomes.

To ensure that consultations reflect the diversity of persons with disabilities, organizers are asked to follow the [Bridge CRPD-SDGs quality criteria](#) for the selection of participants, which calls for gender balance and the participation of underrepresented groups. Organizers are also encouraged to invite representatives from governments and International NGOs, UN agencies and agencies of cooperation, whose commitments and priorities should be established in line with those of persons with disabilities themselves.

4 Workshops: The December round of consultations:

In December 2020, IDA coordinated for GDS Consultations with local and regional partners, involving persons with disabilities in Africa, Latin America and Asia. These were the beginning of a series of more than 20 workshops that IDA is planning with partner organizations in different parts of the world, to assess progress made against national commitments adopted in 2018, discuss thematic priorities, and plan events, discussions and trainings for the run-up to the main GDS event in Oslo. This first round included:

1

A national workshop in **Kenya**, organized by the United Disabled Persons of Kenya (UDPK), the Pan African Network of Persons with Psychosocial Disabilities and Inclusion Africa, with the support from the African Disability Forum, the World Network of Users and Survivors of Psychiatry and Inclusion International (English).

2

A national workshop in **Nepal**, organized by the Indigenous Persons with Disabilities Global Network (Asia) and the National Indigenous Disabled Women Association Nepal (NIDWAN) (simultaneously in Nepali and English).

3

A regional workshop in **Senegal**, organized by the West Africa Federation of the Disabled (WAFOD) and the African Disability Forum (in French).

4

A workshop in **Nicaragua**, organized by RIADIS, and Federación de Mujeres con Capacidades Diferentes (FEMUCADI) (in Spanish).

- **A 5th consultation is scheduled to take place in Ecuador**, organized by RIADIS, by end of January.

1. Diversity of participants

15 countries: Workshops included organizations of persons with disabilities from the 4 countries abovementioned, plus national organizations from **Benin, Burkina Faso, Côte d'Ivoire, Ghana, Guinea, Guinea Bissau, Mali, Niger, Senegal, and Togo**, who were represented in the regional workshop in Senegal. In total, **organizations of 15 countries** took part in this first series of consultations.

The Consultation for the summit allowed us to give our input on what we need for the full inclusion of people with disabilities and to guarantee our rights, freedoms and human dignity.

Ramona Garcia Calderon – Nicaragua.

The disability movement, like other social movements, is not homogenous. Some groups have traditionally been more neglected in participatory processes because they are harder to reach or face higher barriers to participation. These include persons who are deafblind, with intellectual disabilities, psychosocial disabilities, autism or deaf people. Similarly, the ones often left out include women, children, older people and indigenous persons, as well as those whose faith, ethnicity, caste, class, sexual orientation or gender identity place them among discriminated minorities.

Participants in these consultations included persons with disabilities who enjoy less visibility in decision making processes. **Persons with intellectual and psychosocial disabilities** were prominently represented in Nairobi, and in the case of Nepal, most of the 38 participants represented **women and youth from a plurality of the country's indigenous groups**.

2. Priority areas and commitments

Participants' experiences since the start of the COVID 19 pandemic were prominent in all consultations, evidencing the concerns of persons with disabilities regarding local responses. The pandemic had a devastating effect, with many participants indicating difficulties in accessing health services and information. In Senegal, a representative of a national OPD expressed that even though COVID had an



impoverishing effect that spared no one, it was persons with disabilities who faced the direst situations, especially those unable to exercise their legal capacity. The vulnerability and weakness of social protection systems in developing countries was another important lesson from the pandemic, which disproportionately affected persons with disabilities. Participants in all workshops mentioned the need to strengthen social protection systems in one form or another, highlighting not only access to services and benefits, but also data collection to understand disability-related needs, as well as improvement in access to information for people with disabilities.

The workshops, which gathered peoples from different regions, and in some cases from different countries, highlighted the enthusiasm that GDS is generating. Consultations like that in Nepal also underscored the search for intersections beyond disability, finding common causes with indigenous, women's rights and environmental movements. They reflect a global community of persons with disabilities whose representative organizations are becoming increasingly capable of organizing and conveying effective messages to decision makers worldwide. In a global context of lockdowns, restrictions and uncertainty, persons with disabilities are finding in the Global Disability Summit a process of their own, to create synergies and find the support that they need to advance in the realization of their rights.

Thematic priorities suggested for the GDS agenda differed in the different workshops, according to local circumstances. However, strong consistencies could be identified in terms of commitments expected across the traditional thematic lines:



Health: access to healthcare, to water, sanitation and Hygiene (WASH).



Education: ensuring access to inclusive, equitable and quality education, for all persons with disabilities; access to scholarship opportunities for persons with disabilities.



Employment and economic empowerment: improving access to transport, communication and information; vocational trainings to improve employability; access to assistive technology.



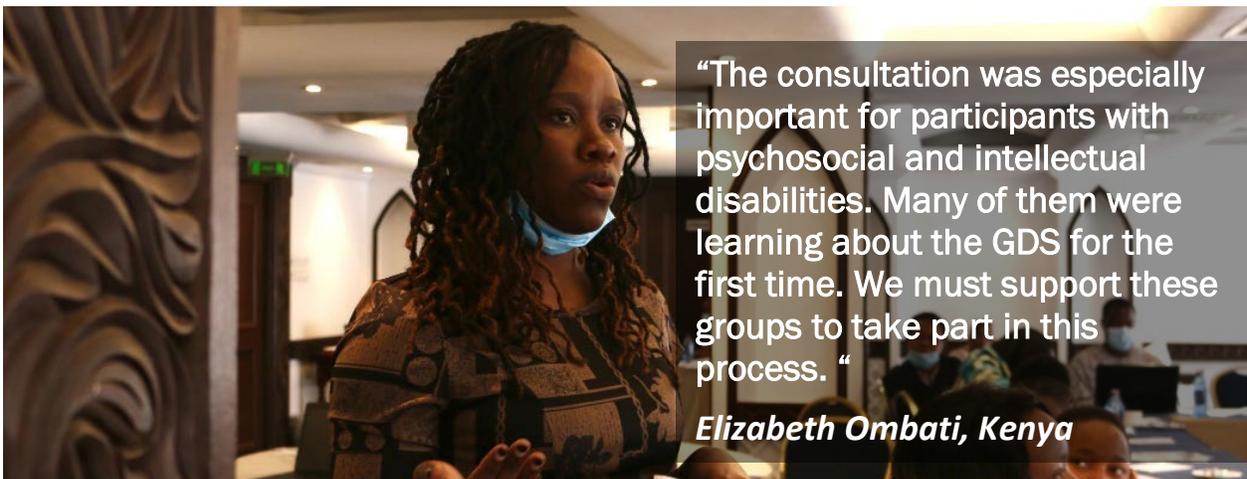
Citizenship and participation: recognition of the legal capacity of all persons with disabilities; participation in public service and political life; inclusive budget; data collection disaggregated by disability; financial support to organizations of persons with disabilities and their capacity building; holding authorities accountable over their GDS commitments.



Overcoming stigma and discrimination: legal reforms to prohibit all forms of discrimination against persons with disabilities; access to justice; preventing and addressing violence against women and girls with disabilities.



Disability and COVID 19: prioritizing persons with disabilities in vaccination campaigns; making social protection systems disability-inclusive and ensuring that all response and recovery efforts are disability-inclusive.



3. Ownership and accountability.

Local reports indicate that a substantive part of the enthusiasm around the GDS process is about its ability to allow participants to question, experience and reflect on how international advocacy and these grand commitments adopted by their governments translate into their daily lives, at the community level. Testimonies from the workshop in Nairobi underscore the participation of persons from rural areas, with little to no access to internet, seizing this opportunity to discuss with government officials and be part of a national accountability mechanism. ***This dimension represents perhaps the most powerful aspect of the GDS process, as a convener of stakeholders from the grassroots, national and international spaces, in a way that makes true collaboration and accountability possible.***

Participants from all countries and regions consistently asked to emphasize accountability on commitments adopted, through national follow up mechanisms and formalizing consultation frameworks between local governments and Organization of Persons with Disabilities (ODPs), to ensure their participation in the planning and implementation of development strategies.

Ensuring the participation of global south nations was also underscored. Participants at consultations stressed the need for sufficient representation at the event, as well as live transmissions of sessions, so the main event can be followed around the world. Respondents also pointed consistently at the GDS as a process beyond the presentational event, in which ownership of persons with disabilities from the global south should be expressed by active engagement with local governments throughout the preparation phase. These requires investment in capacity building, and some also suggested the organization of national “satellite” summits.



Participants at the GDS consultation in Nairobi

“Consultations are the heart of the GDS. They bring people from remote areas who are rarely consulted into the decision-making process, validating their experiences, and recognizing their agency.”

Yetnebersh Nigussie - GLAD Manager and participant at Nairobi.

The next steps:

Upcoming GDS Consultations around the world

The GDS Secretariat is working with IDA's Capacity Building Unit, regional and National partners to incorporate GDS consultation modules to Workshops around the world and ensure that perspectives of people with disabilities from every region of the world are heard in the planning of the Summit. Most of these workshops are presential, and their dates and format are therefore susceptible to changes due to COVID-related restrictions for gatherings. The following are expected to take place in the coming months:

FEBRUARY:

Egypt – 14 - 16 February – Arab Organisation of Persons with Disabilities (AOPD) & IDA

- Workshop on the situation of persons with disabilities at the COVID-19 era
- GDS consultations

Cabo Verde – 15 February – World Blind Union (WBU) & IDA

- Workshop on SDG 3 (Access to Health) and the situation of blind persons with disabilities
- GDS consultations

Angola – Mid-February – WBU & IDA

- Workshop on SDG 3 (Access to Health) and the situation of blind persons with disabilities
- GDS consultations

Uganda – End of February – African Disability Forum (ADF), Down Syndrome International (DSI), World Federation of the Deafblind (WFDB) & IDA

- Workshop on the situation of persons with disabilities in the COVID-19 era
- GDS consultations

MARCH

Bangladesh – Early March – IDA, ADD & SSI

- CRPD-SDGs workshop
- GDS consultations

Kenya – Around 15 - 30 March – WFDB, World Network of Users and Survivors of Psychiatry (WNUSP), DSI, Inclusion International (II), ADF & IDA

- Workshop with WFDB members on the situation of deafblind people in the COVID-19 time and preparation for the Second Global Report on the situation and rights of persons with deafblindness
- Workshop with persons with psychosocial disabilities at the COVID-19 time
- Workshop on social protection for persons with disabilities - Response to COVID-19
- Bridge CRPD-SDGs Module 1 Kenya
- Workshop with indigenous persons with disabilities
- GDS consultations

India, Nepal, Pakistan and/or Sri Lanka – Dates to be confirmed - TCI Asia-Pacific & IDA

- Gender and COVID-19 workshop
- GDS consultations

Namibia – Mid - March – WBU & IDA

- Workshop on SDG 13 (Climate Action) and the situation of blind persons with disabilities
- GDS consultations

Zimbabwe – Mid - March – WBU & IDA

- Workshop on SDG 13 (Climate Action) and the situation of blind persons with disabilities
- GDS consultations

APRIL

Ethiopia – Early April – ADF, FEAPD & IDA

- Bridge CRPD-SDGs Module 1
- Workshop on gender advocacy
- Workshop on CRPD and OPDs advocacy
- GDS consultations