



Convention on the Rights of Persons with Disabilities

Advocacy Toolkit

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Introduction

This toolkit is designed to support efforts by United Nations-managed and supported mine action centres to advocate for the ratification and implementation of the Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol. It was developed with the assistance of the United Nations Mine Action Team (UNMAT) and in coordination with Survivor Corps. The toolkit has undergone a small field validation test. Additionally, it has been further reviewed by the Office of the High Commissioner for Human Rights, the United Nations High Commissioner for Refugees, and the United Nations Children's Fund, and their input has been incorporated.

The CRPD opened for signature on 30 March 2007 and entered into force on 3 May 2008. It is the culmination of five years of negotiations and decades of struggle by persons with disabilities and allied advocacy organizations to achieve global recognition of disability as a human rights issue. The strong political support from a wide array of actors ensured that this was the most rapidly negotiated human rights treaty to date. The CRPD is a paradigm shift in the treatment of persons with disabilities from a medical or charity perspective to a rights-based approach, ensuring that persons with disabilities have access and can participate in decisions that affect their lives and to seek redress for violations of their rights. As of June 2008, 28 states have ratified the CRPD and 17 States have ratified its Optional Protocol. For a status update please refer to <http://www.un.org/disabilities> and <http://www2.ohchr.org/english/issues/disability/index.htm>

States Parties to the Anti-Personnel Mine Ban Treaty and Protocol V of the Convention on Certain Conventional Weapons are obliged to provide assistance to the survivors of landmines and explosive remnants of war. The CRPD provides a framework to address the needs of survivors and to ensure the full realization of their human rights and respect for their inherent dignity. The recently adopted Convention on Cluster Munitions also requires future States Parties to provide victim assistance, in accordance with applicable international humanitarian and human rights law and, in this regard, refers specifically to the CRPD.

This advocacy toolkit provides you and other field practitioners with a user-friendly overview of the CRPD and with a set of questions and answers that will enable you to introduce the main elements to your counterparts. Further, the toolkit explains how States can become Party to the CRPD and provides a model tool for addressing Government ministers. Media are a key ally in all advocacy efforts; the toolkit includes useful guidelines for your interactions with journalists. Finally, the toolkit provides a list of organizations engaged with the rights of persons with disabilities and a useful list of resources.

We do hope that this advocacy toolkit will guide your efforts to encourage ratification and to contribute to implementation and monitoring. We urge you to continue these efforts and to keep us informed of your progress through the United Nations Mine Action Team at Headquarters.

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Chair, Inter-Agency Coordination Group for Mine Action
1 July 2008

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Office of the High Commissioner for Human Rights
1 July 2008

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1 July 2008

Convention on the Rights of Persons with Disabilities

AT-A-GLANCE

Preamble Explains why the Convention is needed and lists other relevant human rights instruments and normative documents¹ that form the basis for this Convention.

Article 1 Purpose - The Convention seeks to achieve a specific objective: the promotion, protection and full and equal enjoyment of all human rights by persons with disabilities and respect for their inherent dignity.

Article 2 Definitions - Important terms of art used in this Convention include: communication; language; discrimination on the basis of disability; reasonable accommodation; universal design.

Article 3 General principles - The fundamental concepts of respect for inherent dignity and autonomy of persons with disabilities, non-discrimination, participation, inclusion, equality, and accessibility guide interpretation of the Convention's obligations.

Article 4 General obligations - States Parties must, inter alia, review and revise legislation, promote universally designed goods, services, and facilities, and develop policies and programmes to implement the Convention and consult with persons with disabilities in doing so.

Article 5 Equality and non-discrimination - States Parties must prohibit all discrimination on the basis of disability. Persons with disabilities are entitled to equal protection and equal benefit of the law, which requires States Parties to take appropriate measures to ensure reasonable accommodation is provided. These measures are not considered discrimination.

Article 6 Women with disabilities - Women and girls with disabilities are subject to multiple forms of discrimination. States Parties must take all appropriate measures to ensure the development, advancement and empowerment of women and their full enjoyment of all human rights and fundamental freedoms.

Article 7 Children with disabilities - States Parties are required to act in accordance with the principle of the best interests of the child, and to ensure the rights of children with disabilities on an equal basis, and the right of the child to express his/her views freely on all matters affecting them.

Article 8 Awareness-raising - States Parties must increase awareness about the rights of persons with disabilities, utilizing appropriate channels of communication, such as media, education systems, public awareness campaigns and awareness-training programs.

Article 9 Accessibility - States Parties must ensure that communications and information services, transportation systems, buildings and other structures are designed and constructed so that they can be used, entered or reached by persons with disabilities.

Article 10 Right to enjoyment of life - States Parties must take all necessary measures to ensure that persons with disabilities have the same right as others to the effective enjoyment of life.

¹ United Nations Charter; Universal Declaration of Human Rights; International Covenant on Economic, Social, and Cultural Rights; International Covenant on Civil and Political Rights; Convention of the Elimination of All Forms of Racial Discrimination; Convention on the Elimination of All Forms of Discrimination against Women; Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment; Convention on the Rights of the Child; International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families; World Programme of Action concerning Disabled Persons; Standard Rules on Equalization of Opportunities for Persons with Disabilities.

Article 11 Situations of risk - States Parties must comply with other applicable international legal obligations, such as international humanitarian law regulating the protection of civilians during conflict. In armed conflict or natural disasters States Parties are required to take all appropriate additional measures to secure the safety of persons with disabilities.

Article 12 Equal recognition before the law - Persons with disabilities have the same standing as others to exercise their legal capacity, e.g., to make decisions, to inherit property or have access to financial credit. At times, the State has obligations to provide support to assist persons with disabilities in making decisions and exercising legal capacity.

Article 13 Access to justice - States Parties must make appropriate accommodations to ensure that persons with disabilities have the same opportunity as others to participate in all legal proceedings. States Parties must promote training for those working in the administration of justice, such as police and prison staff.

Article 14 Liberty and security of person - Persons with disabilities enjoy the same level of protection against threats to human rights, such as arbitrary detention, physical harm, and food deprivation. Any deprivation of liberty must be in conformity with the law and the existence of a disability shall in no case justify a deprivation of liberty. Persons with disabilities must be treated in accordance with this Convention, including provision of reasonable accommodation.

Article 15 Freedom from torture or cruel, inhuman or degrading treatment or punishment - States Parties must prevent persons with disabilities from being subjected to torture or cruel, inhuman or degrading treatment or punishment. The Convention prohibits all involuntary medical or scientific experimentation.

Article 16 Freedom from exploitation, violence and abuse - States Parties must protect persons with disabilities from economic, physical and mental mistreatment. If mistreatment occurs, States Parties must take all measures to ensure recovery, and ensure the investigation and, where appropriate, prosecution of mistreatment.

Article 17 Protecting the integrity of the person - States Parties must protect the mental and physical integrity of the individual.

Article 18 Liberty of movement and nationality - Persons with disabilities have the same freedom as others to obtain citizenship, cross borders, and change nationality. Children with disabilities must be registered at birth and have the same rights to a name, nationality and, as far as possible, to be cared for by their parents.

Article 19 Living independently and being included in the community - States Parties must ensure that persons with disabilities can live in society autonomously and are included in the community with equal access to community services and facilities.

Article 20 Personal mobility - States Parties must take effective measures to ensure personal mobility with the greatest possible independence for persons with disabilities, and to facilitate access to assistive devices, technologies, mobility aids, forms of live assistance and training in mobility skills, and making these available at affordable cost.

Article 21 Freedom of expression and opinion, and access to information - States Parties must guarantee that persons with disabilities enjoy the ability to share thoughts, beliefs, and feelings through all forms of communication. This obligation also extends to providing information in accessible media and formats.

Article 22 Respect for privacy - Persons with disabilities have the right to conduct their lives in private and their privacy must be honoured and protected.

Article 23 Respect for the home and the family - Persons with disabilities have the right to choose where, how, and with whom they live, and the number and spacing of their children.

Article 24 Education - State Parties are required to ensure persons with disabilities have equal access to an inclusive education and life-long learning process, including access to primary, secondary, tertiary and vocational institutions. This includes facilitating access to alternate modes of communication, providing reasonable accommodation, and training professionals in the education of persons with disabilities.

Article 25 Health - Persons with disabilities have the right to equal access to the same standard of health care and health care services as others, and States Parties must take all appropriate measures to ensure that persons with disabilities have access to health services that are gendersensitive, including health-related rehabilitation. Health care must be provided on the basis of free and informed consent.

Article 26 Habilitation and rehabilitation - States Parties must ensure that persons with disabilities are included and are able to participate in all aspects of life: physical, mental, social and vocational.

Article 27 Work and employment - States Parties must promote the realization of the right to work and take appropriate steps, including, inter alia, to promote employment in the private sector and to ensure that reasonable accommodation is provided in the workplace. States Parties are called upon to employ persons with disabilities in the public sector.

Article 28 Adequate standard of living and social protection - States Parties must ensure that persons with disabilities and their families have access to food, shelter, clothing and drinking water; that persons with disabilities have equal access to government social safety nets, e.g., public housing, retirement benefits, social protection and poverty reduction programmes; and that persons with disabilities and their families living in poverty have access to assistance from the State with disability-related expenses.

Article 29 Participation in political and public life - States Parties must take all feasible steps to facilitate and encourage participation of persons with disabilities in government and other civic activities, such as the right to vote, stand for election or participate in political organisations.

Article 30 Participation in cultural life, recreation, leisure and sport - Persons with disabilities have the right to equal access to play, relaxation, amusement and physical pastimes. States Parties must take all feasible steps to ensure the availability of cultural activities such as film, theatre, museums, and monuments in accessible formats (e.g. sign-language, Braille, closed captioning). States Parties must also take all feasible steps to ensure that cultural activities are held in places accessible to persons with disabilities.

Article 31 Statistics and data collection - States Parties must gather disability-related data to assist in the implementation of the Convention. Any information gathering must comply with ethical principles of privacy and human rights norms.

Article 32 International cooperation - Bilateral and multilateral partnerships are essential to the successful implementation of the Convention, including capacity building, research and access to scientific and technical knowledge, and technical and economic assistance.

Article 33 National implementation and monitoring - To promote and monitor the Convention States Parties are required to: (1) designate one or more disability focal points within the government to facilitate implementation of the Convention; (2) establish a coordinating mechanism to facilitate action in different sectors and at different levels of government; and (3) designate or establish an independent monitoring mechanism such as a human rights commission or ombudsman. Civil society, particularly persons with disabilities, must be included in the monitoring process.

Article 34 Committee on the Rights of Persons with Disabilities - A 12 member Committee of independent experts monitors implementation. (The number of experts will go up to 18 when there are 60 additional ratifications.) States Parties elect members of the Committee, striving for equitable representation of geographic regions and legal systems, participation by experts with disabilities, and balanced gender representation.

Article 35 Reports by States Parties - States Parties must provide periodic reports to the Committee on their progress towards meeting their Convention obligations. The first report is due within two years after a State becomes Party to the Convention, and further progress reports must be submitted at least every four years.

Article 36 Consideration of reports - The Committee reviews each report and provides feedback to the State Party. Reports and Committee suggestions must be made widely available to the public. If a report is overdue, the Committee can provide recommendations based on other reliable information.

Article 37 Cooperation between States Parties and the Committee - The Committee will assist States Parties in looking for ways to enhance national implementation, including through international cooperation.

Article 38 Relationship of the Committee with other bodies - The Committee can invite specialized agencies and other United Nations organs to be represented or submit reports on implementation of provisions that fall within the scope of their respective mandates. The Committee can also invite specialized agencies and civil society organizations to provide expert advice on implementation of the Convention.

Article 39 Report of the Committee - The Committee provides information on its work to the General Assembly and the Economic and Social Council of the United Nations every two years.

Article 40 Conference of States Parties - States Parties to the Convention meet regularly, at least every two years. The first Conference will take place six months after the Convention enters into force.

Article 41 Depositary - Ratifications are deposited with the Secretary-General of the United Nations.

Article 42 Signature - The Convention opened for signature on 30 March 2007.

Article 43 Consent to be bound - States and regional integration organisations can become Parties to the Convention after it enters into force.

Article 44 Regional integration organisations - Organisations composed of sovereign states in a given region, which have transferred competence in the areas governed by the Convention, can become Parties to the Convention. The European Community is an example.

Article 45 Entry into force - The Convention becomes international law 30 days after 20 ratifications have been deposited. Once the Convention has entered into force, a State becomes Party

to the Convention 30 days after the deposit of its own instrument of ratification.

Article 46 Reservations - Reservations can not be inconsistent with the Convention's object and purpose.

Article 47 Amendments - The Convention can be amended if two thirds of States Parties to the Convention agree.

Article 48 Denunciation - States can decide to no longer be Parties to the Convention by giving written notice to the Secretary -General of the United Nations.

Article 49 Accessible format - The text of the Convention must be available in accessible formats, such as Braille.

Article 50 Authentic texts - English, Chinese, Russian, Arabic, Spanish and French are considered official language texts.

Optional Protocol - The Optional Protocol establishes an individual complaints mechanism and an inquiry mechanism. In relation to the individual complaints mechanism, the Committee on the Rights of Persons with Disabilities has authority to receive petitions/complaints from individuals in a State Party to both the Convention and the Optional Protocol who allege that the State has breached its obligations under the Convention. The Committee may then decide on the admissibility of the complaint and provide its views and recommendations if a breach is found. In addition, the Committee can conduct investigations – including an on-site country visit if the State agrees – if there are reliable reports of grave or systematic violations by a State Party. States must be Parties to the Convention on the Rights of Persons with Disabilities in order to become States Parties to the Optional Protocol.

Convention on the Rights of Persons with Disabilities

Frequently Asked Questions

What is the Convention on the Rights of Persons with Disabilities?

The Convention is an international treaty that articulates the rights of persons with disabilities. Specifically, States that become Parties to the Convention agree to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

The Convention is a paradigm shift in approaches to disability, moving from a model where persons with disabilities are treated as objects of medical treatment, charity and social protection to a model where persons with disabilities are recognized as subjects of human rights, active in the decisions that affect their lives and empowered to claim their rights. This approach views the societal barriers— such as physical obstacles and negative attitudes— confronting persons with disabilities as the main obstacles to the full enjoyment of human rights.

Why is it needed?

Though all of the international human rights treaties extend to persons with disabilities, this large group of persons continues to suffer from discrimination and often does not enjoy respect for their human rights on an equal basis with others. This Convention:

- Explicitly defines and applies existing human rights principles to persons with disabilities;
- Provides an authoritative, internationally agreed basis for the development of domestic law and policy;
- Establishes national and international mechanisms for more effective monitoring of the rights of persons with disabilities, including periodic reporting on the Convention's implementation and Conferences of States Parties;
- Recognizes the especially vulnerable circumstances of children and women with disabilities.

What rights are included?

The Convention is comprehensive, and States Parties are obliged to ensure and promote the full realization of all civil, cultural, economic, political, and social rights of persons with disabilities.

Civil and political rights are rights that an individual can exercise in his/her role as a citizen, such as the right to vote, the right to participate in government decision-making, the right to a fair trial and the right to equal protection of the law. *Cultural rights* protect a person's enjoyment of his/her own culture. *Social rights* protect and promote the person in society, such as the right to education and the right to health. *Economic rights* protect and promote the economic security and independence of a person, such as the right to work.

Who can sign and ratify?

Any State can ratify in accordance with its relevant domestic law on adherence to treaties.

Regional Integration Organizations (RIOs) can also ratify the Convention. A RIO is an organization composed of sovereign states in a given region, which has transferred competence in the areas governed by the Convention. For example, the European Union has competence in the area of anti-discrimination, including discrimination against persons with disabilities, and is currently a signatory

to the Convention. References to “States Parties” in the Convention also apply to RIOs that are Parties to the Convention.

Which countries have ratified and when will the Convention enter into force?

As of June 2008, 28 states had ratified the Convention and 17 had ratified the Optional Protocol. Both instruments entered into force on 3 May 2008, 30 days after the first 20 ratifications of the Convention and 10 of the Optional Protocol were deposited with the Secretary -General. Only states that have ratified are bound by the Convention. A State becomes Party to the Convention 30 days after the deposit of its own ratification or accession.

How will the Convention's obligations be enforced?

The Convention combines the periodic reporting typical of human rights treaty-monitoring with a Conference of States Parties that will meet regularly to consider any matter related to implementation.

The Convention establishes an international monitoring body made up of 12 experts. When there are 60 additional States Parties, the membership will increase to 18 experts. All Parties to the Convention, including RIOs, must submit a comprehensive report within two years of becoming Parties. Subsequent reports are due every four years. The Committee will hold hearings, receive input from other entities, and issue conclusions and recommendations on the progress being made by the reporting Party.

States Parties are required to designate one or more focal points within their government for matters relating to the implementation of the Convention, and to consider creating a coordination mechanism to facilitate activities relating to implementation of the Convention in different sectors and levels of government. States Parties are required to include persons with disabilities in the national-level implementation and monitoring mechanisms.

States Parties must also establish or designate an independent framework in the form of a national human rights institution to promote, protect and monitor the implementation of the Convention. States could designate an existing human rights commission or ombudsman’s office to take on this role or establish such an independent institution specifically related to the Convention.

States Parties are obliged to involve civil society, in particular persons with disabilities and their organizations, in all processes relating to the Convention, including the monitoring mechanisms.

In addition, States Parties will meet regularly (at least every two years) at a Conference of States Parties to consider matters relating to the implementation of the Convention.

Who are the members of the Committee on the Rights of Persons with Disabilities?

Committee members have not yet been appointed.

The members of the Committee must:

- Serve in their personal capacity;
- Have high moral standing;
- Have recognized competence and experience in the field covered by the Convention.

The Committee should also:

- Include experts with disabilities;
- Reflect equitable geographical distribution;

- Have representation of the different forms of civilization and of the principal legal systems;
- Have balanced gender representation.

What is the Optional Protocol?

The Optional Protocol gives the Committee on the Rights of Persons with Disabilities the power to address individual complaints of violations of all rights in the Convention, if the individual has exhausted avenues at the national level. States Parties to the Convention must separately sign and ratify the Optional Protocol and they must be Parties to the Convention in order to become Parties to the Optional Protocol. As noted above, in June 2008, there were 17 States Parties to the Optional Protocol, which entered into force on 3 May 2008.

Mine Action Centres and the Convention on the Rights of Persons with Disabilities

What is significant about the Convention on the Rights of Persons with Disabilities (CRPD)?

International human rights instruments promote and protect the human rights of all persons, including persons with disabilities, yet persons with disabilities are routinely denied basic rights and fundamental freedoms. The CRPD does not establish new human rights, but rather clarifies the legal obligations of States to respect and ensure the equal enjoyment of all human rights by persons with disabilities. The CRPD identifies areas, such as accessibility, inclusion, participation, and non-discrimination, as they apply in the context of persons with disabilities, to ensure that they can enjoy their human rights. Terminology such as *reasonable accommodation* and *universal design* are employed to further clarify how particular obligations are to be implemented.

The CRPD improves upon existing international human rights treaty monitoring mechanisms by creating not only the Committee on the Rights of Persons with Disabilities to monitor implementation and review periodic reports from States Parties, but also calling for regular meetings of States Parties to review implementation. The CRPD also prescribes actions States Parties must take to implement and monitor compliance with the treaty at the national level, and recognizes the importance of international cooperation and assistance in support of national efforts.

What should Mine Action Centres do to support the CRPD?

- Engage national authorities and civil society to promote ratification and implementation of the CRPD.
- Ensure that victim assistance policies or programmes supported by the mine action centre are in conformity with the provisions of the CRPD.
- Ensure that the mine action centre is accessible to persons with disabilities, and seek to make public information distributed by the mine action centre accessible to persons with disabilities.
- Make casualty data and information about services for survivors of mines and explosive remnants of war (ERW) available to bodies or persons responsible for the monitoring and reporting on compliance with the provisions of the CRPD, including civil society organizations.

How does the CRPD complement other victim assistance policies or norms relevant to mine action?

Victim assistance is a one aspect of mine action. The United Nations Mine Action Team conducts victim assistance activities in accordance with resolutions of the General Assembly and Security Council, the United Nations Inter-Agency Mine Action Policy and the United Nations Inter-Agency Mine Action Strategy 2006-2010. We are guided by a legal framework consisting of: relevant international instruments prohibiting or regulating the use of landmines and addressing ERW instruments of international humanitarian law on the conduct of war and protection of civilians; and instruments of human rights law protecting and promoting the rights of survivors and other persons affected by mines/ERW.

Article 6(3) of the Anti-Personnel Mine Ban Treaty (APMBT) obliges each State Party in a position to do so to provide assistance for the care and rehabilitation, and social and economic reintegration of mine victims. At the Nairobi Review Conference of the APMBT in 2005, States Parties made a series of political commitments, elaborating on the legally binding obligations for victim assistance. These

commitments are outlined in the Nairobi Action Plan. In particular, States parties recognized that victim assistance is a human rights issue.

Article 8(2) of Protocol V to the Convention on Certain Conventional Weapons (CCW) provides for the care and rehabilitation and social and economic reintegration of victims of ERW.

The Inter-Agency Policy states that the United Nations stands ready to assist with programmes that address the needs of landmine and ERW victims, preferably as part of national programmes that address the needs of all disabled persons. Relevant activities carried out by the United Nations Mine Action Team are reflected in the table below.

Strategic objective 3 of the Inter-Agency Mine Action Strategy 2006-2010 calls for the “integration of mine action needs into national development and reconstruction plans and budgets in at least 15 countries” and outlines activities to assist national authorities to provide assistance to mine and ERW victims within larger disability frameworks.

The CRPD offers a framework and guidance for the implementation of the policy, strategy, norms and activities referred to above. The table below illustrates the relationship between the United Nations Mine Action Team’s victim assistance activities, the framework for assistance in mine action and provisions in the CRPD.

Victim assistance activity	Framework for assistance in mine action	CRPD
<p>Advocacy initiatives Advocate for ratification and implementation of the CRPD. Raise awareness by promoting positive, inclusive attitudes towards persons with disabilities in mine risk education messages.</p>	<p>United Nations Inter-Agency Mine Action Policy: Promote international instruments that further the human rights of mine and ERW survivors.</p> <p>United Nations Inter-Agency Mine Action Strategy for 2006-2010: Advocate for increased resources and support to persons with disabilities, including landmine/ERW survivors.</p>	<p>Article 8 Awareness-raising</p>
<p>Data collection Accurate and adequate data is the key to effective planning and delivery of mine victim assistance. Mine action centres should enhance advocacy efforts by providing relevant data on mine survivors and, once the CRPD is ratified, by assisting States Parties in the preparation of periodic reports on the implementation of the CRPD.</p>	<p>United Nations Inter-Agency Mine Action Policy: Support the development of a comprehensive system for the collection of casualty data through standardized victim surveillance systems; coordinate, or assist in, the analysis of casualty data; ensure that casualty data are shared with relevant partners and are available to inform efforts to provide services to mine and ERW survivors.</p> <p>United Nations Inter-Agency Mine Action Strategy for 2006-2010: Provide national planning agencies with mine action data and other relevant assistance essential for multi-sectoral planning and budgeting.</p> <p>APMBT - Nairobi Action Plan, Action number 34: Development or increase of national capacities for data collection on mine victims</p>	<p>Article 31 Data collection and statistics</p> <p>Article 33 National implementation and monitoring</p>
<p>Building national capacities Victim assistance strives to address the needs and rights of mine and ERW victims within national disability frameworks, working with relevant government ministries to build national capacities for emergency and</p>	<p>General Assembly resolution A/Res/62/99 on Assistance in Mine Action: Provide assistance to countries affected by mines and EWR for the establishment and development of national mine-action capacities.</p> <p>United Nations Inter-Agency Mine Action Policy: Promote and support the development of victim assistance initiatives with the government ministry involved in public</p>	<p>Article 4 General obligations</p> <p>Article 20 Personal Mobility</p> <p>Article 25 Health</p>

<p>continuing medical care, physical rehabilitations and prosthetics, psychological support and social rehabilitation, education and economic reintegration for all persons with disabilities.</p>	<p>health; assists governments to incorporate the socio-economic re-integration of landmine and ERW survivors into national development and recovery plans, budgets and programmes; provide technical assistance and/or mobilises resources for victim assistance programmes.</p> <p>United Nations Inter-Agency Mine Action Strategy 2006-2010: Support efforts to ensure the rights of landmine/ERW survivors within the context of national programmes and facilities for persons with disabilities.</p> <p>APMBT – Nairobi Action Plan Action number 33: Ensure that legal and political frameworks on a national level effectively respond to needs and fundamental human rights of mine victims Action number 29: Establishment and increase of health care services necessary to respond to immediate and urgent medical needs of mine victims Action number 30: Increase of national capacities for physical rehabilitation Action number 31: To develop capacities to meet needs for psychological and social support of mine victims Action number 32: Active support for socio-economic reintegration of mine victims</p>	<p>Article 26 Habilitation and rehabilitation</p> <p>Article 27 Work and employment</p> <p>Article 30 Participation in cultural life, recreation, leisure and sports</p> <p>Article 33 National implementation and monitoring</p>
<p>International cooperation and assistance Mine action centres should encourage integration of the needs and rights of mine survivors into international development programmes and urge international actors to mainstream disability rights into their development planning.</p>	<p>General Assembly resolution A/Res/62/99 on Assistance in Mine Action: Encourages affected states to proactively mainstream mine action and victim assistance requirements into development plans and processes to ensure that development priorities include mine action, and that mine action is predictably funded.</p> <p>United Nations Inter-Agency Mine Action Strategy 2006-2010: Advocate in international fora to include mine action in international development policy and planning guidelines. Advocate for increased resources and support to persons with disabilities, including landmine/ERW survivors.</p>	<p>Article 32 International cooperation</p>
<p>Accessibility Mine action centres should ensure that communications and information services, and buildings they use are designed and constructed so that they can be used, entered or reached by persons with disabilities. Furthermore, mine action centres should review employment practices and take any necessary measures to promote employment opportunities for persons with disabilities.</p>	<p>UN Inter-Agency Support Group for the CRPD Joint Statement of Commitment to the Convention Updated Draft: 25 February 2008: The UN should provide persons with disabilities within and outside the UN system with the assistance necessary for reasonable accommodation to UN facilities, programmes, and information. Removing barriers and increasing accessibility are key components of reasonable accommodation. Members of the Inter-Agency Support Group will work within their department, agency, or Fund to recommend approaches to support reasonable accommodation needs of staff members, consultants, visitors, and delegates, in all their facilities globally. Members of the IASG will ensure that within their individual agencies, reasonable accommodation is made in terms of recruitment, website, materials, facilities, and in other regards. Each agency will consult with persons with disabilities during the process of proposing and implementing the changes required to provide reasonable accommodation.</p>	<p>Article 9 Accessibility</p> <p>Article 27 Work and employment</p> <p>Article 32 International Cooperation</p>
<p>Inclusion of persons with disabilities Mine action centres should ensure that mine and ERW survivors are</p>	<p>UNICEF <i>It's About Ability</i>, a booklet written for children to introduce them to the CRPD and provide information on inclusion of all children in education, sports and other activities. Available in English, French and Spanish.</p>	<p>Article 3 General principles</p> <p>Article 4</p>

<p>included and actively participate in the decisions that affect their lives. Survivors should take part in the development, implementation, and evaluation of victim assistance programming. Engage mine survivors in advocacy efforts by informing them of local and international non-governmental organizations working on disability issues in your country.</p>		<p>General obligations</p> <p>Article 33 National implementation and monitoring</p>
<p>Gender-sensitive programming Mine action centres must ensure that victim assistance programming benefits all members of the community and takes into account the different needs of men, women, boys and girls.</p>	<p>Gender Guidelines for Mine Action Programmes: Ensure that all members of the community injured in mine/ERW accidents have equal access to emergency and continuing care. Ensure that the different economic, social and psychological impact of mine/ERW accidents on men, women, boys and girls are considered when planning and implementing victim assistance programmes. Ensure that men and women have equal access to to victim assistance employment opportunities.</p>	<p>Article 6 Women with disabilities</p>
<p>Child-sensitive programming Children are particularly vulnerable to mines and ERW in a number of ways. Of those maimed children who survive an accident, few will receive prostheses that keep up with the continued growth of their stunted limbs. The injury will impact children psychologically and make schooling and participation in the community a struggle. It is thus essential for mine action centers to ensure that victims assistance programmes and related advocacy take into account the needs of children and promote their rights.</p>	<p>UNICEF Programme Guidance to Country Offices, April 2007: UNICEF uses the term “disability” in line with the CRPD definition in Article 1. UNICEF’s approach to disability is based on the social model of disability, focusing on barriers posed to persons with impairments by their environment, rather than their bodily impairment, including the attitudes and prejudices of society, policies and practices of governments, and the structures of the health, welfare and education systems. Thus, inclusion is not about inserting persons with disabilities into existing structures; it is about transforming systems to be inclusive of everyone. Inclusive communities put into place measures to support all children at home, at school and in their communities. Where barriers exist, inclusive communities transform the way they are organized to meet the needs of all children. UNICEF’s work around landmines also promotes sport to prevent disability and to promote inclusion of children – boys and girls alike – who are disabled.</p>	<p>Article 7 Children with disabilities Article 16 Freedom from exploitation, violence and abuse Article 23 Respect for the home and family Article 24 Education Article 30 Participation in cultural life, recreation, leisure and sports</p>

The table below indicates each mine/ERW affected country’s human rights obligations and the status of signature and ratification of the Convention on the Rights of Persons with Disabilities.

For the status on the signing and ratification of the CRPD please visit: <http://www.un.org/disabilities/countries.asp?navid=12&pid=166>

Ratification status of human rights treaties by mine-affected states

Country	International Covenant on Civil and Political Rights	Convention on Economic Social and Cultural Rights	Convention on the Elimination of all forms of Discrimination Against Women	Convention on the Rights of the Child	Convention on the Rights of Persons with Disabilities (Signed/Ratified)
Afghanistan	24 January 1983	24 January 1983	5 March 2003	28 March 1994	—
Albania	4 October 1991	4 October 1991	11 May 1994	27 February 1992	—
Algeria	12 September 1989	12 September 1989	22 May 1996	16 April 1993	30 March 2007 (S)
Angola	10 January 1992	10 January 1992	17 September 1986	5 December 1990	—
Armenia	23 June 1993	13 September 1993	10 July 1995	23 June 1993	30 March 2007 (S)
Azerbaijan	13 August 1992	13 August 1992	10 July 1995	13 August 1992	9 January 2008 (S)
Bosnia and Herzegovina	1 September 1993	1 September 1993	1 September 1993	1 September 1993	—
Burundi	9 May 1990	9 May 1990	8 January 1992	19 October 1990	26 April 2007 (S)
Cambodia	26 May 1992	26 May 1992	15 October 1992	15 October 1992	1 October 2007 (S)
Chad	17 August 1995	9 June 1995	9 June 1995	2 October 1990	—
Colombia	29 October 1969	29 October 1969	19 January 1982	28 January 1991	30 March 2007 (S)
Croatia	12 October 1992	12 October 1992	9 September 1992	12 October 1992	15 August 2007 (R)
Cyprus	2 April 1969	2 April 1985	23 July 1985	7 February 1991	30 March 2007 (S)
Democratic Republic of Congo	1 November 1976	1 November 1976	17 October 1986	21 September 1990	—
Egypt	14 January 1982	14 January 1982	18 September 1981	6 July 1990	14 April 2008 (R)
Eritrea	22 January 2002	17 April 2001	5 September 1995	3 August 1994	—
Ethiopia	11 June 1993	11 June 1993	10 September 1981	14 May 1991	30 March 2007 (S)
Guinea-Bissau	12 September 2000	2 July 1992	9 August 1985	20 August 1990	—
Iran	24 June 1975	24 June 1975	----	13 July 1994	—
Iraq	25 January 1971	25 January 1971	13 August 1986	15 June 1994	—
Israel	3 October 1991	3 October 1991	3 October 1991	3 October 1991	30 March 2007 (S)
Jordan	28 May 1975	28 May 1975	1 July 1992	24 May 1991	31 March 2008 (R)
Lao People's Democratic Republic	Signed 7 December 2000	Signed 7 December 2000	14 August 1981	8 May 1991	15 January 2008 (S)
Lebanon	3 November 1972	3 November 1972	16 April 1997	14 May 1991	14 June 2007 (S)
Liberia	22 September 2004	22 September 2004	17 July 1984	4 June 1993	30 March 2007 (S)
Malawi	22 December 1993	22 December 1993	12 March 1987	2 January 1991	27 September 2007 (S)
Mauritania	17 November 2004	17 November 2004	10 May 2001	16 May 1991	—
Morocco	3 May 1979	3 May 1979	21 June 1993	21 June 1993	30 March 2007 (S)
Mozambique	21 July 1993	----	21 April 1997	26 April 1994	30 March 2007 (S)
Nepal	14 May 1991	14 May 1991	22 April 1991	14 September 1990	3 January 2008 (S)
Niger	7 March 1986	7 March 1986	8 October 1999	30 September 1990	30 March 2007 (S)
Russian Federation	16 October 1973	16 October 1973	23 January 1981	16 August 1990	—
Senegal	13 February 1978	13 February 1978	5 February 1985	31 July 1990	25 April 2007 (S)
Serbia	12 March 2001	12 March 2001	12 March 2001	12 March 2001	17 December 2007 (S)
Somalia	24 January 1990	24 January 1990	----	Signed 9 May 2001	—
Sri Lanka	11 June 1980	11 June 1980	5 October 1981	3 August 1990	30 March 2007 (S)
Sudan	18 March 1986	18 March 1986	----	3 August 1990	30 March 2007 (S)
Syrian Arab Republic	21 April 1969	21 April 1969	28 March 2003	15 July 1993	30 March 2007 (S)
Tajikistan	4 January 1999	4 January 1999	26 October 1993	26 October 1993	—
Thailand	29 October 1996	5 September 1999	9 August 1985	27 March 1992	30 March 2007 (S)
Uganda	21 June 1995	21 June 1995	22 July 1985	17 August 1990	30 March 2007 (S)
Viet Nam	24 September 1982	24 September 1982	17 February 1982	28 February 1990	22 October 2007 (S)
Yemen	9 February 1987	9 February 1987	30 May 1984	1 May 1991	30 March 2007 (S)
Zambia	10 April 1984	10 April 1984	21 June 1985	6 December 1991	9 May 2008 (S)

How Does a State Become Party to the Convention and How Can a Mine Action Centre Support this Process?

Now that the Convention on the Rights of Persons with Disabilities (CRPD) has been adopted by the United Nations General Assembly, it is time to make the rights of persons with disabilities a reality on the ground. To help ensure that the CRPD will be implemented worldwide, mine action centres can work with national authorities and civil society organizations to urge the following actions by the appropriate national authorities:

1. Sign the CRPD.

The CRPD opened for signature on 30 March 2007. When a State signs the CRPD, it signals its intention to become Party in the future. The State agrees that it will not do anything inconsistent with the object and purpose of the CRPD. However, at this stage, the State is not yet legally bound to implement the CRPD.

2. Ratify the CRPD.

After signing the CRPD, a State should proceed to ratify it and become a State Party that is legally bound to implement its provisions.

Local and national-level advocacy urging the government to undertake comprehensive consultations with relevant line-ministries and civil society so as to ensure effective ratification is extremely important.

REMEMBER: The process of treaty ratification is determined by national law in each country, and knowing which entities are responsible, and the steps in the process is essential if you want to be an effective advocate for ratification. It is also helpful to be able to refer national authorities to United Nations colleagues who can advise and assist with the ratification process. These typically include the Office of the High Commissioner for Human Rights colleagues within United Nations Country Teams.

3. Ensure the CRPD becomes international law.

Thirty days after 20 States have signed and ratified the CRPD, it becomes binding international law for those States that ratified it. The process of signature and ratification is the same for the Optional Protocol, which enters into force 30 days after 10 States have ratified it. As of June 2008, there were 27 ratifications of the CRPD and 16 ratifications of the Optional Protocol.

The Convention and Optional Protocol entered into force on 3 May 2008.

4. Implement the CRPD.

Article 4 of the CRPD stipulates measures States Parties need to undertake to start implementing it. Measures include: changing laws that are inconsistent with the CRPD, adopting new laws, and including persons with disabilities in decision-making processes. Article 33 stipulates measures a State Party must take to implement and monitor the CRPD at national level, including the creation of a focal point within the government.

5. Mine action centres should advocate for ratification.

Where applicable, explain how the CRPD supplements provisions on victim assistance in the Anti-

Personnel Mine Ban Treaty, Protocol V of Convention on Certain Conventional Weapons and other human rights treaties in force for that particular State.

Use your casualty data and information on survivor services to demonstrate the scope of the issues confronting survivors of mines and explosive remnants of war. Point out that the CRPD clarifies States' obligations to respect and ensure the equal enjoyment of human rights by persons with disabilities, including:

- Discrimination against persons with disabilities;
- The rights of women with disabilities;
- The rights of children with disabilities;
- The importance of raising awareness of issues related to disability;
- The need to ensure that buildings and information are accessible;
- The importance of taking special measures to secure the safety of persons with disabilities in times of armed conflict;
- The right of persons with disabilities to personal mobility, including access to assistive devices, technologies, mobility aids, and training in mobility skills, at affordable cost;
- The right to equal access to health care;
- The right to participate in all aspects of life: physical, mental, social and vocational;
- The right to work and to be provided with reasonable accommodation in the workplace;
- The obligation to gather disability-related data related to assist in implementation of the Convention;
- The importance of international assistance and cooperation for the full realization of the rights contained in the Convention;
- The importance of inclusive national implementation mechanisms.

Contact the human rights component of the peacekeeping operation, the Office of the High Commissioner for Human Rights, UNICEF or United Nations Development Programme representative on the United Nations Country Team, Disabled Persons' Organisations, and persons with disabilities to coordinate activities, share information, and gain access to expert advice.

SAMPLE LETTER TO A MINISTER OR GOVERNMENT OFFICIAL URGING THE SIGNATURE AND RATIFICATION OF THE CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES

[YOUR ADDRESS]

[RECIPIENT'S ADDRESS]

[DATE]

Dear [NAME OF GOVERNMENT OFFICIAL],

The Convention on the Rights of Persons with Disabilities entered into force on 3 May 2008, and opened for signature on 30 March 2007. At that time, there were 82 signatories to the Convention, the highest number of signatories in history to a UN convention on its opening. For the full text, please see <http://www.un.org/disabilities>. This Convention:

- Establishes international standards regarding the rights and freedoms of persons with disabilities;
- Clarifies human rights principles of inclusion, non-discrimination, accessibility, and participation in the context of persons with disabilities;
- Provides an authoritative model for governments to use in shaping national law and policies;
- Creates more effective mechanisms for monitoring the rights of persons with disabilities; and
- Prescribes national implementation and monitoring mechanisms.

The Convention marks a paradigm shift in attitudes and approaches to persons with disabilities. It represents the movement from viewing persons with disabilities as "objects" of charity, medical treatment and social protection towards viewing persons with disabilities as "subjects" with rights, who are capable of making decisions and being active members of society.

WHERE APPLICABLE As a State Party to [the *Anti-Personnel Mine Ban Treaty* or *Protocol V of the Convention on Certain Conventional Weapons*], [NAME OF COUNTRY] has agreed to provide assistance to victims of [mines and/or explosive remnants of war (ERW)]. To this end, the Convention on the Rights of Persons with Disabilities offers a comprehensive framework to guide efforts to protect the rights of mine/ERW survivors within national disability frameworks.

I would like to urge you to:

- Sign the Convention and its Optional Protocol as soon as possible
- Initiate the process of ratifying the Convention and its Optional Protocol

This is the first major human rights treaty of this century and it is a historic achievement for the 650 million persons with disabilities around the world. It certainly offers [NAME OF COUNTRY] an important opportunity to fulfill its obligations to mine/ERW survivors. We look forward to working with you on these matters and are available to provide support should you so require.

Yours sincerely,

[NAME OF PERSON / ORGANIZATION]

**SAMPLE LETTER TO STATES PARTIES TO THE ANTI-PERSONNEL MINE BAN TREATY or
CONVENTION ON CERTAIN CONVENTIONAL WEAPONS PROTOCOL V THAT HAVE ALREADY
SIGNED AND/OR RATIFIED THE CONVENTION ON THE RIGHTS OF PERSON WITH DISABILITIES**

[YOUR ADDRESS]

[RECIPIENT'S ADDRESS]

[DATE]

Dear [NAME OF GOVERNMENT OFFICIAL],

We are delighted to hear that [NAME OF COUNTRY] has [signed/ratified] the Convention on the Rights of Persons with Disabilities which entered into force on 3 May 2008.

The Convention marks a paradigm shift in attitudes and approaches to persons with disabilities. It represents the movement from viewing persons with disabilities as "objects" of charity, medical treatment and social protection towards viewing persons with disabilities as "subjects" with rights, who are capable of making decisions and being active members of society.

AS APPLICABLE: As a State Party to [the Anti-Personnel Mine Ban Treaty and/or Protocol V of the Convention on Certain Conventional Weapons], [NAME OF COUNTRY] has agreed to provide assistance to victims of [mines and/or explosive remnants of war (ERW)]. The Convention on the Rights of Persons with Disabilities offers a comprehensive framework to guide efforts to protect the rights of mine/ERW survivors within national disability frameworks.

I would like to urge you to:

- Initiate the process of ratifying the Convention and its Optional Protocol [if signed and did not ratify]
- Take steps to begin implementing the provisions of the Convention in [NAME OF COUNTRY].

This is the first human rights treaty of this century and it is a historic achievement for the 650 million people with disabilities around the world. It certainly offers [NAME OF COUNTRY] an important opportunity to fulfill its obligations to mine/ERW survivors. We look forward to working with you on these matters and are available to provide support should you so require.

Yours sincerely,

[NAME OF PERSON / ORGANIZATION]

Portraying Persons with Disabilities in the Media

Fear of the unknown, inadequate experience, incorrect or distorted information, and lack of knowledge are some of the challenges that persons with disabilities must face as they become involved in their communities.

People working in the media exert a powerful influence over the way persons with disabilities are perceived. It is important to the 650 million persons with disabilities that they are portrayed with dignity and that their disabilities are explained accurately.

Awareness is the first step towards change.

Tips for Reporting on Persons with Disabilities

- When referring to individuals with disabilities use “disability,” not “handicapped.”
- Emphasize the person, not the disability or condition. Use “persons with disabilities” rather than “disabled persons,” and “persons with epilepsy” rather than “epileptics.”
- Omit mention of an individual's disability unless it is pertinent to the story.
- Depict the typical achiever with a disability, not just the “super-achiever”.
- Choose words that are accurate descriptions and have non-judgmental connotations.
- Use persons with disabilities as resources to provide correct information and terms, particularly to avoid stereotypes in the media.

Persons with disabilities live everyday lives and should be portrayed as contributing members of the community. These portrayals should:

- Depict persons with disabilities experiencing the same pain/pleasure that others derive from everyday life, e.g., work, parenting, education, sports and community involvement.
- Feature a variety of persons with disabilities when possible, not just someone easily recognized by the general public.
- Depict employees/employers with disabilities working together.
- Portray persons with disabilities as people, with both strengths and weaknesses.

Inappropriate Words When Portraying Persons with Disabilities

DO NOT USE

VICTIM – instead use: person who has/experienced/with.

[THE] CRIPPLE[D] – instead use: person with a disability.

AFFLICTED BY/WITH – instead use: person has.

INVALID – instead use: a person with a disability.

NORMAL – most people, including persons with disabilities, think they are. Do not say “normal person” to refer to someone without a disability – say “person without a disability” if necessary.

PATIENT – connotes sickness. Instead use person with a disability.

SUFFERING FROM – instead use: person had/experienced.

AVOID USING

WHEELCHAIR BOUND/CONFINED – instead use: uses a wheelchair or wheelchair user.

HOMEBOUND EMPLOYMENT – instead use: employed in the home.

USE WITH CARE

COURAGEOUS, BRAVE, INSPIRATIONAL and similar words are routinely used to describe persons with disabilities. Adapting to a disability does not necessarily mean someone acquires these traits.

Interviewing Persons with Disabilities

When interviewing a person with a disability, relax!

Conduct your interview as you would with anyone. Be clear and candid in your questioning and ask for clarification of terms or issues when necessary. Be upfront about deadlines, the focus of your story, and when and where it will appear.

Interviewing Etiquette

- Shake hands when introduced to someone with a disability. People with limited hand use or artificial limbs do shake hands.
- Speak directly to persons with disabilities, not through their companions.
- Do not be embarrassed using such phrases as “See you soon,” “Walk this way” or “Got to run.” These are common expressions, and are unlikely to offend.
- If you offer to help, wait until the offer is accepted.
- Consider the needs of persons with disabilities when planning events.
- Conduct interviews in a manner that emphasizes abilities, achievements and individual qualities.
- Do not emphasize differences by putting persons with disabilities on a pedestal.

When Interviewing Persons with Hearing Disabilities...

- Attract the person's attention by tapping on his or her shoulder or waving.
- If you are interviewing someone with a partial hearing loss, ask where it would be most comfortable for you to sit.
- If the person is lip-reading, look directly at him/her and speak slowly and clearly. Do not exaggerate lip movements or shout. Do speak expressively, as facial expressions, gestures and body movements will help him/her understand you.
- Position yourself facing the light source and keep hands and food away from your mouth when speaking.

When Interviewing Persons with Vision Disabilities...

- Always identify yourself and anyone else who might be present.
- When offering a handshake, say, “shall we shake hands?”
- When offering seating, place the person's hand on the back or arm of the seat.
- Let the person know if you move or need to end the conversation.

When Interviewing Persons with Speech Disabilities...

- Ask short questions that require short answers when possible.
- Do not feign understanding. Try rephrasing your questions, if necessary.

When Interviewing People Using a Wheelchair or Crutches...

- Do not lean on a person's wheelchair. The chair is a part of his/her body space.
- Sit or kneel to place yourself at eye level with the person you are interviewing.
- Make sure the interview site is accessible. Check for:

- Reserved parking for persons with disabilities
- A ramp or step-free entrance
- Accessible restrooms
- An elevator if the interview is not on the first floor
- Water fountains and telephones low enough for wheelchair use

Be sure to notify the interviewee if there are problems with the location. Discuss what to do and make alternate plans.

LIST OF RESOURCES AND WEBSITES

RESOURCE LIST BY MEDIUM TERM SPECIFIC PLAN FOCUS AREA

Inter-Parliamentary Union/Office of the High Commissioner for Human Rights/Department of Economic and Social Affairs, "From Exclusion to Equality: Realizing the Rights of Persons with Disabilities", Handbook for Parliamentarians on the Convention on the Rights of Persons with Disabilities and its Optional Protocol, 2007, 150 pages, available in Arabic, English, French, Russian and Spanish.

<http://www.ohchr.org/EN/PublicationsResources/Pages/Publications.aspx>

This handbook sets out information on the Convention and Optional Protocol, legislative and policy measures and also information on national and international monitoring and each chapter includes useful tips for Parliamentarians and others to help support the ratification, implementation and monitoring of the Convention.

I. YOUNG CHILD SURVIVAL AND DEVELOPMENT

A. Health and Nutrition

Ikelberg, Jenny et al. / Handicap International, *Fun inclusive: sports and games as means of rehabilitation, interaction and integration for children and young people with disabilities*, 2003.

This handbook includes guidelines for the implementation of sports and games with the goal of rehabilitation and inclusion.

Parents' Evaluation of Developmental Status (PEDS).

This tool employs an evidence-based method for detecting and addressing developmental and behavioral problems in children. It complies with recommendations for early detection from the American Academy of Pediatrics, the Australian College of Pediatrics, among others.

UNICEF, *Facts for life*, 2002.

This publication provides information about children's health to parents, caregivers, health workers, government officials, journalists and teachers. It includes information on safe motherhood, early childhood development, nutrition, HIV/AIDS and other causes of illnesses, and disabilities.

Werner, David / Hesperian Foundation, *Disabled village children: a guide for community health workers, rehabilitation workers, and families*, 2nd ed., 1999.

This manual for therapists, professionals and community groups covers identification and care of common childhood disabilities. It also outlines ideas for rehabilitation at the village level, development of skills, low-cost aids and prevention of disabilities.

WHO, *Community-based rehabilitation and the Health Care Referral Services – A Guide for Programme Managers*, 1994.

Describes a planning process, for use by managers, that can lead to better basic and referral services for the many people suffering from disabilities in developing countries. The guide is intended for managers of services where the community-based rehabilitation approach has been adopted. Highly practical, and supported by abundant checklists, examples, and model timetables and forms, the manual can be used in training courses or for self-study by managers interested in improving their planning skills.

B. Water and Sanitation

Jones, Hazel and Reed, Bob/ Loughborough: Water, Engineering and Development Centre (WEDC), *Water and sanitation for disabled people and other vulnerable groups: designing services to improve accessibility*, 2005.

This book is for water and sanitation planners and providers and disability organizations to ensure access to water and sanitation facilities in developing countries, but many strategies can also work for emergency situations and in institutional settings, such as schools and hospitals.

II. EDUCATION

Jonsson, True and Wiman, Ronald, *Education, Poverty and Disability in Developing Countries Poverty Reduction Sourcebook*, 2001.

This short technical note presents the cost-effectiveness argument for inclusive education, and frameworks such as indicators to analyze education.

Magrab, Phyllis / UNESCO, *Open File on Inclusive Education – Support Materials for Managers and Administrators (Brochure)*, 2001.

This brochure introduces the concept of inclusive education for policy makers and managers. The booklet highlights some of the issues affecting the development of inclusive schools, and each section ends with a series of questions for discussion. The booklet is based on the UNESCO Open File on Inclusive Education (see below), a comprehensive guide to development in this area. Also available online in French, Arab, Chinese, Russian, and Spanish.

Peters, Susan J. / World Bank, *An EFA Strategy: Inclusive Education for All Children*, 2004.

This comprehensive paper reviews the body of literature presenting research at the local and international levels, including best practices in inclusive education from developing and non-developing countries, of the role of community-based rehabilitation, as well as cost-saving measures for inclusive education programs and classifications of disabilities. The executive summary has eight pages highlighting key findings.

Save the Children UK, *Schools for All: Including Disabled Children in Education*, 2002.

This practical guide is primarily aimed at teachers to include children with disabilities in schools, but is also useful for anyone developing other inclusive education settings. The guidelines underscore that improvements in quality of education go hand-in-hand with inclusion: accessible, quality, responsive learning environments will benefit all children. There are tips and practical tools at the end. Also available online in Arabic, French, Portuguese, Spanish and Russian.

Stubbs, Sue / The Atlas Alliance, *Inclusive Education: Where There Are Few Resources*, 2002.

This paper for teachers, policy makers and others provides an overview of inclusive education concepts, strategies, key issues and case studies focusing on situations with limited resources.

UNESCO, *First Steps: Stories on Inclusion in Early Childhood Education*, 1997.

This paper is a compilation of 13 case studies, examples where children with special educational needs are included in regular early childhood programmes.

UNESCO, *Guidelines for Inclusion: Ensuring Access to Education for All*, 2005.

These guidelines are a policy tool for revising and formulating Education for All (EFA) plans, and to serve as a basis of discussion among policy makers, educators, NGOs and international organizations affecting policy in both private and public education. It looks at how inclusion is defined, reasons and justifications for its implementation, and key elements in the shift to inclusion. A checklist and a strategy plan matrix worksheet are included.

UNESCO, *Open File on Inclusive Education: Support Materials for Managers and Administrators* 2001.

This publication provides a means whereby administrators and decision-makers in different countries can draw on international experience in guiding their own countries' systems towards inclusion. This resource addresses assessment, professional development, the role of families and communities, resourcing and funding, and the development of an inclusive curriculum.

UNESCO, *Overcoming Exclusion through Inclusive Approaches in Education: A Conceptual Paper*, 2003.

This paper provides a coherent conceptual and contextual policy framework for UNESCO's involvement in developing inclusion in education in Member States. Guidelines are provided in the 'Steps Forward' section on how to put the inclusive approach into practice. Copies online in English, Arabic, Chinese, French and Spanish.

UNESCO, *Understanding and Responding to Children's Needs in Inclusive Classrooms: A Guide for Teachers*, 2001.

This guide provides information about teaching children with special learning needs in inclusive settings. It states practical ways of coping with children who have learning difficulties. Tips and participatory exercises are inserted throughout the document.

UNICEF (EAPRO), *Inclusive Education Initiatives for Children with Disabilities: Lessons from the East Asia and Pacific Region*, 2003.

This paper has good examples of inclusive education initiatives in Cambodia, China, Lao People's Democratic Republic, Vietnam and Thailand. In addition, there are examples of model legislation and policy, and a description of an inclusive school where 10 percent of its students have disabilities and innovative methods are used to make the educational experience non-discriminatory, participatory and child-centered. Recommendations are given at the end to ensure equal access to education for children with disabilities.

UNICEF, *A Human Rights-based Approach to Education – A Framework for the Realization of Children's Rights to and within Education*, 2007.

The document brings together the current thinking and practice of a human rights-based approach in the education sector and is intended as a policy and programming tool. It is not going into the operational details of a "manual", though these will be fleshed out in the examples from the field, to be developed later. that it looks at the rights of children in education within a space for programming which includes a broad range of social actors and processes around the school, within the community and society, and beyond education and education institutions to account for the approaches in social development that are necessary to make human rights-based based programming in education work.

World Bank, *Education for All: Including Children with Disabilities*, 2003.

This brief note summarizes lessons learned and key policy findings of inclusive education. Available in Albanian, Arabic, Chinese, Croatian, French, Indonesian, Polish, Portuguese, Russian, Serbian, Spanish, Turkish and Vietnamese.

III. HIV/AIDS

Groce, Nora Ellen, *HIV/AIDS and Individuals with a Disability, Health and Human Rights, Vol 8, No 2*, 2005.

This brief article summarizes the results of the World Bank-commissioned HIV/AIDS and Disability Global Survey, and provides information on risk factors and guidance on how to include people with disabilities in HIV/AIDS prevention and outreach.

Groce, Nora Ellen / Yale University and the World Bank, *HIV/AIDS and Disability Global Survey*, 2004.

This study reveals the known social, economic and medical risks associated with living with a disability with reference to implications for HIV infection and propose a three-tiered typology of intervention. It argues that there is a pressing need for research and for better general and disability-specific services for individuals with disability. This study identifies good models of interventions, including for disabled children, and gaps where people with disabilities are overlooked in outreach efforts, service delivery, etc. Available online in English and Spanish.

UNICEF, *Programming Note on HIV Prevention with and for Adolescents. Working Document* 2006.

This paper provides programming guidance for UNICEF staff about working more effectively as a main partner within United Nations Country Team in support of the national response to HIV/AIDS; while not specifically addressing the need for mainstreaming disability in HIV/AIDS prevention and outreach, the guidance highlights the need to increase HIV prevention programming for most-at-risk and especially vulnerable adolescents.

World Bank, *Disability and HIV/AIDS at a glance*, 2004.

The factsheets examine the risks faced by disabled people, and include recommendations on how to include people with disabilities in prevention and care.

Yousafzi, Aisha and Edwards, Karen / Save the Children UK, *Double Burden: situational analysis of HIV/AIDS and young people with disabilities in Rwanda and Uganda*., 2004.

The beginning of this report provides a global overview of the intersection between disability and HIV/AIDS, showing that people with disabilities face increased risk of infection and less access to HIV prevention and care services. The rest of the analysis is focused on Rwanda and Uganda. Also available online in French.

IV. CHILD PROTECTION

American Academy of Pediatrics, Committee on Child Abuse and Neglect and Committee on Children with Disabilities, *Assessment of Maltreatment of Children with Disabilities*, Pediatrics, Vol 108, No 2 August 2001.

This paper for health care workers identifies risk factors of child abuse and neglect for children with disabilities to encourage prevention, early recognition and intervention. It also provides data on the increased risk of children with disabilities to abuse.

Child Rights Information Network, *Children and violence*, CRIN Newsletter, No 19 May 2006.

This newsletter of the Child Rights Information Network (CRIN), a network of over 1,600 child rights organizations worldwide, focuses on the problem of violence for children, especially in developing countries. Pages 30-33 provide a brief overview of violence faced by children with disabilities, and includes an informative factfile.

Davis, Rebecca T. and United States Agency for International Development, *Promising Practices in Community-Based Social Services in Central and Eastern Europe and the Commonwealth of Independent States/Baltics: A Framework for Analysis*, 2005.

This report resulted from a study of regional and country-specific reports on the evolution of family-focused, community-based social services for vulnerable groups. The examples of promising practices emerging in the region focus on four groups, including children and youth, disabled people, elderly persons, and Roma as a minority group. Special attention is given to the transformation of systems of care, particularly de-institutionalization and social inclusion in Central and Eastern Europe and the Commonwealth of Independent States.

European Coalition for Community Living, *Focus Report on the Right of Children with Disabilities to Living in the Community*, 2006.

This report for governments and other stakeholders stresses the importance of community life for disabled children, and provides recommendations on how to shift from institutional to community-based care. The report is most relevant to Central and Eastern Europe and the Commonwealth of Independent States, but many recommendations are generally applicable.

Groce, Nora Ellen / UNICEF, *Summary Report Violence against Disabled Children, UN Secretary General's Report on Violence against Children, Thematic Group on Violence against Disabled Children, Findings and Recommendations*, 2005.

This comprehensive report indicates the increased risks disabled children face as victims of violence at home, school and other settings. It presents a series of 13 recommendations for intervention and improvement in oversight, services and programs at the levels of government and civil society, as well as individual family and advocacy initiatives.

Groce, Nora Ellen and Trasi, Reshma., *Rape of Individuals with Disability: AIDS and the folk belief of 'virgin cleansing'*, The Lancet, Vol 363, Issue 9422, May 2004.

This brief article summarizes the problem of the rape of people with disabilities because of the belief of virgin cleansing – the belief that people can rid themselves of a sexually transmitted disease by having sexual intercourse with a virgin. People with disabilities are at risk because it is assumed that they are sexually inactive.

National Authority for Child Protection and Adoption, Government of Romania, *Mandatory Minimum Standards for Day Care Centers for Children with Disabilities*, 2004.

These government-imposed minimum standards are for day care centers for children with disabilities and child protection services that work to prevent child abandonment and institutionalization.

Sammon, Elayn/ EveryChild, *Defying Prejudice, Advancing Equality: Children and Disability in the Context of Family Breakdown in Central and South Eastern Europe and the Former Soviet Union*, 2001.

This report does not analyze why parents abandon children, but rather, looks at the experience of families in Central and Eastern Europe and the Commonwealth of Independent States, makes recommendations for future actions such as adopting a rights-based approach and ensuring that community-based support services so that

children with disabilities are included in society. It advocates for shifting away from institutional care towards family and community-based support systems. The annex includes a checklist for disability mainstreaming and programme planning decisions.

Sobsey, Dick, *Exceptionality, Education and Maltreatment Exceptionality*, Vol 10, Issue 1, 2002.

This article was written for those working in the education field, with information about the risk that children with disabilities face from abuse from studies in mostly industrialized countries, but recommendations for an effective response can be used anywhere.

UNICEF Innocenti Research Center (IRC), *Children and Disability in Transition in Central and Eastern Europe and the Commonwealth of Independent States and Baltic States*, 2005.

This report examines how children with disabilities and their families have lived in the rapidly changing environment of the CEE/CIS and Baltic States. The report stresses that the most important change needed to advance the rights children with disabilities is to end institutions and segregated schools, requiring community-based resources and better supports for families of disabled children.

V. POLICY ADVOCACY AND PARTNERSHIPS FOR CHILDREN'S RIGHTS

Committee on the Rights of the Child, *General Comment No. 9 – The Rights of Children with Disabilities*, 2006.

The Committee on the Rights of the Child, in reviewing State party reports, found that in the overwhelming majority of countries some recommendations had to be made specifically for disabled children. This report is intended to aid governments by giving guidelines focusing on including disabled children in the general measures of implementation of the Convention on the Rights of the Child, followed by specific observations on the meaning and the implementation of various articles of the Convention for disabled children.

Handicap International and Cristoffel Blind Mission (CBM), *Making Poverty Reduction Strategies Papers Inclusive*, 2006.

This handbook presents experiences, proposes ideas, and comments on how DPOs and people with disabilities may enter and participate in national PRSP processes. It includes case studies from Honduras, Bangladesh, Sierra Leone and Tanzania.

Inclusion International and Canadian Association for Community Living, *A World Fit for All Children: Including the Rights of Children with Disabilities in the UN Convention on the Rights of the Child*, 2003.

This document was created to assist civil society organizations to participate in preparations of national plans of action (NPAs) that governments create to implement their commitments under the Convention on the Rights of the Child. The document presents guidelines on how to include disabled children's rights in all NPAs (e.g., mainstreaming children with disabilities in NPAs regarding HIV/AIDS and early childhood development).

Lansdown, Gerison / *Disability Awareness in Action (DAA), What Works? Promoting the Rights of Disabled Children*, 2003.

This report is based on a series of studies of disabled children in four very different countries during 2001-2003, making it possible to develop a broad understanding of the range of experiences of disabled children and to assess effective means to overcome the discrimination and social exclusion. The report seeks to bring those findings together and present as recommendations what children say about their lives and the changes that are needed - in government, in civil society and in law, policy and practice - if the rights of disabled children are to be realized.

Mitra, Sophie / *World Bank, Disability and Social Safety Nets in Developing Countries* 2005.

This publication deals with how social safety nets may reach the poor with disabilities in developing countries, and analyzes different ways that can be used to include disability considerations in the implementation of mainstream safety nets through the reduction of physical, communication and social barriers through the careful design and evaluation of safety nets. The paper also points out the benefit of such nets of preventing disabilities in children through poverty reduction.

Save the Children UK, *Disabled Children's Rights: A practical guide*, 2006.

This illustrated publication looks at the rights of children with disabilities under the Convention on the Rights of the Child, primarily focusing on developing countries, and looks at examples of good practice.

UNICEF, *Briefing on UN Convention on the Rights of Persons with Disabilities*, 2007.

This briefing singles out articles, in the new disability rights convention, that are relevant to children with disabilities.

UNICEF/ Innocenti Research Center, *Innocenti Digest: The Rights of Children with Disabilities* Florence, forthcoming (2007).

The Digest is intended to help raise the profile of childhood disability and to give impetus to the challenge of ensuring that children with disabilities are fully included within efforts to promote the human rights of all children. It seeks to demonstrate that the inclusive policies and practices required to promote the enjoyment of the rights of these children are both feasible and practical.

VI. EMERGENCY RESPONSE

Boyce, William, *Adaptation of community based rehabilitation in areas of armed conflict*, Asia Pacific Disability Rehabilitation Journal, Vol 11, No 1, 2000.

This article discusses how the principles of community-based rehabilitation may be applied in areas of conflict, and the challenges of doing so.

Healthlink Worldwide, *Disability and War*, Community-Based Rehabilitation News, No 32, Dec 1999 - Mar 2000.

This newsletter targets rehabilitation and social workers, service managers and people with disabilities, with recommendations to address rehabilitation needs in wartime, including issues faced by children with disabilities.

Persson, Ulrika / Save the Children Sweden, *Children with Disability in Programmes Directed at Children Affected by Armed Conflict*, 1997.

This paper focuses on how children with disabilities are dealt with in the Office of the United Nations High Commissioner for Refugees Guidelines on Protection and Care of Refugee Children, with the objective of influencing a forthcoming revision of the Guidelines to promote a better inclusion of children with disabilities. The paper also aims to raise awareness among other UN agencies, non-governmental organizations, etc. about the importance of including children with disabilities in all programmes for war-affected populations.

Save the Children UK / UNHCR, 'Action for the Rights of Children (ARC) Resource Pack', 2001, 152 pages.

ARC was designed to increase the capacity of the Office of the United Nations High Commissioner for Refugees, government, and non-governmental organizations field staff to protect and care for children and adolescents in emergency situations. Through the project, a series of resource packs have been developed that focus attention on children affected by armed conflict, consisting of overheads, participatory training materials including case studies and participatory exercises. One resource pack is focused on disability exclusively; it is an excellent resource to raise awareness on disability among humanitarian staff.

Save the Children UK, *Child Landmine Survivors: An Inclusive Approach to Policy and Practice*, 2001.

This report is primarily for an audience of non-specialist donors and policy-makers, and gives practical suggestions and examples for including child landmine survivors and all disabled children in programming. The need for community-based approaches that build on existing good practice in community-based rehabilitation and inclusive education is stressed throughout. The report explains why programs for children injured by landmines must also address the wider problems of discrimination and other issues affecting persons with disabilities. The appendices contain a list of organizations involved in landmine survivor assistance and a bibliography addressing the various needs of child landmine survivors.

The Sphere Project, *Humanitarian Charter and Minimum Standards in Disaster Response* 2004.

This handbook is designed for use in disaster response anywhere in the world, and may also be useful in disaster preparedness and humanitarian advocacy. Though not a "how to" manual, the handbook offers a set of minimum standards and key indicators. Disability is mainstreamed throughout the handbook, recognizing that it

is essential to understand how persons with disabilities are affected in different disaster contexts and to respond accordingly.

WHO, *Disasters, Disability and Rehabilitation*, 2005.

This brief document discusses challenges faced by people with disabilities following a disaster, and their rehabilitation needs, and advocates a combination of medical rehabilitation and community based rehabilitation.

VII. DATA COLLECTION

Chamie M. (1994), *Can childhood disability be ascertained simply in surveys?* *Epidemiology*, 5 (3): 273-275.

The article discusses the use of a survey approach using 10 questions to ascertain childhood disability. The screening instrument, developed by Durkin et al (1994) has been field tested in several developing countries, generating estimates of total prevalence rates ranging from 1% to 4.4% in the case of severe disabilities to up to 20% when including children with learning and behavioural disabilities. The article encourages the use of the screening tool, describing it as simple and cost-efficient, as well as “reasonably valid and reliable”. It concludes with recommendations on how to amend/improve the questionnaire.

Durkin M.S. et al. (1994), *Validity of the ten questions screened for childhood disability: Results from population-based studies in Bangladesh, Jamaica and Pakistan*, *Epidemiology*, 5 (3): 283–289.

The article summarizes the findings of the field-testing of the 10 questions screening tool. The results confirm the usefulness of the 10 questions as a low-cost and rapid screen for disabilities, although not for vision and hearing disabilities.

Robson, Colin and Evans, Peter, *Educating Children with Disabilities: The Role of Data Sets* 2004.

This excellent report provides a review of (a) disability data sets to identify children with disabilities (national censuses, household surveys, administrative registries and others) and (b) of data sets and classificatory frameworks produced by international organisations to collect data on children with disabilities and their access to education (World Bank, UN Statistics Division, United Nations Children’s Fund, United Nations Educational, Scientific and Cultural Organization, Organization for Economic Cooperation and Development, the European Community/EUROSTAT, and World Health Organization). The report’s recommendations include: that a proposal by the UN Statistics Division for standardizing questions on disability in national censuses and surveys are adopted; that all developing countries are encouraged to include a section on children with disabilities in national censuses and surveys; that efforts are made to have explicit disability related indicators incorporated into Education For All and Millenium Development Goals.

UNICEF, *Measuring Children’s Disability via Household Surveys: The MICS Experience*, 2005.

This report presents an analysis of the data collected via the optional module on disability introduced during round 2 of the Multiple Cluster Indicator Survey.

United Nations Statistics Division, *Manual for the Development of Statistical Information for Disability: Programmes and Policies*, New York, 1996.

This manual is targeted at programme managers and others concerned with the production and use of statistical information for implementing, monitoring and evaluating disability policies and programmes. Special attention is given to the major uses of statistical information on disability for purposes of programme planning and evaluation. As a user-oriented manual, it defines basic concepts and provides guidance on the possible sources of existing data on disability. Suggestions are given for the development of statistical information and for obtaining and using it even in especially difficult situations, such as emergency and refugee relief situations.

United Nations Statistics Division, *Guidelines and Principles for the Development of Disability Statistics*, New York, 2005.

This publication builds on the manual and is oriented to statisticians, providing guidelines and principles for collecting, compiling and disseminating statistics on persons with disabilities. Examples are included from both developing and developed countries. Although technical in approach, this publication is useful to managers of disability programmes, as they are essential partners in developing objectives for a data collection activity and the use of the resulting data. Researchers in the disability field may also benefit from the general information on methods.

World Bank, *Development, Poverty and Schooling in Developing Countries: Results from 11 Household Surveys*, 2005.

This paper analyzes the relationship between whether a young person has a disability, the poverty status of their household, and their school participation using 11 household surveys from nine developing countries. The paper finds that while youth with disabilities sometimes live in poorer households, the extent of this concentration is typically neither large nor statistically significant. However, youth with disabilities are almost always substantially less likely to start school, and in some countries have lower transition rates resulting in lower schooling attainment. The order of magnitude of the school participation disability deficit is often larger than those associated with other characteristics such as gender, rural residence, or economic status differentials.

VIII. CROSS-CUTTING ISSUES

Community-Based Rehabilitation

International Labour Organization - World Health Organization – United Nations Educational, Scientific and Cultural Organization, *Community Based Rehabilitation (CBR): A Strategy for Rehabilitation, Equalization of Opportunities, Poverty Reduction and Social Inclusion of People with Disabilities (Joint position paper)*, 2004.

This paper promotes the benefits of CBR, including in education for children with disabilities. It stresses the involvement of people with disabilities in designing and implementing CBR programmes, and the need for government support and collaboration among sectors providing services. Also online in Arabic, Chinese, French, Portuguese and Spanish.

Disability and Participation

Groce, Nora Ellen, *Adolescents and Youth with Disability: Issues and Challenges*, Asia Pacific Disability Rehabilitation Journal, Vol 15, No 2, 2004.

This article summarizes research findings of problems children with disabilities face around the world in areas such as education, rehabilitation, job training. It argues for their inclusion in all international development policy.

Groce, Nora Ellen / UNICEF, *An overview of young people living with disabilities: their needs and their rights*, 1999.

This document serves as advocacy material in the promotion of behavioral change in communities, looking at the various global demographic, social and economic aspects of life for youth with disabilities and pointing out innovative inclusive programme approaches targeting youth with disabilities. The paper looks at the findings from the global UNICEF survey on Young People, and at the status of disabled youth worldwide, with particular attention to the UN Convention on the Rights of the Child.

Lewis, Maddy / Save the Children, *Learning to Listen: Consulting Children and Young People with Disabilities*, 2001.

This paper is geared toward policy makers and others to highlight the importance of consulting with young people with disabilities and strategies for doing so, particularly when there are communication difficulties. It includes a checklist for trained consultation workers, and leaflets for parents and young people with disabilities.

Better Care Network (BCN)

<http://www.crin.org/bcn/topic.asp?themeID=1004&topicID=1028>

The Better Care Network brings together organizations and individuals concerned about children without adequate family care. BCN facilitates active information exchange, collaboration, and advocacy on issues such as: prevention of separation and abandonment of children; development of family and community based care options for children who cannot be cared for by their parents; international and national standards for all forms of care for children without adequate family care. The website includes a dedicated section on children with disabilities and a list of resources with a special focus on the situation of children with disabilities in institutional care.

Center for International Rehabilitation (CIR)

<http://www.cirnetwork.org>

The CIR is a Chicago-based not-for-profit organization that develops research, education and advocacy programs to improve the lives of people with disabilities internationally. The site provides rehabilitation research and other related information. There is a link to the CIR's International Disability Educational Alliance Network (IDEAnet), which provides training courses and research and facilitates communication of practices among universities, research centers, disability advocates and rehabilitation service providers.

Center for International Rehabilitation Research and Exchange (CIRRE) University of Buffalo, USA

<http://www.cirrie.buffalo.edu>

The CIRRE facilitates the sharing of information and expertise in rehabilitation research between the US and other countries through a wide range of programs. The site includes a database of international rehabilitation research with over 27,000 citations and other resources such as a country directory of organizations around the world that work with disability or rehabilitation and a multi-lingual international encyclopedia of rehabilitation.

Centre for Disability Studies (CDS) University of Leeds, UK

<http://www.leeds.ac.uk/disability-studies/>

The CDS is an interdisciplinary centre for teaching and research in the field of disability studies. The site houses recent publications, details of research reports and a large number of online publications in the Disability Archive with access to writings that may no longer be easily accessible in the public domain.

Centre for International Health and Development (CIHD) University College London

<http://www.ich.ucl.ac.uk/ich/academicunits/cihd/Homepage>

The CIHD is an interdisciplinary collaboration of academics (including in Africa and Asia) working on health and development in a global context on themes such as nutrition, child development and disability, HIV prevention and treatment, and the evaluation of community interventions for policy and practice. The site provides access to research publications, and information on ongoing research projects on "children in difficult circumstances": refugee and migrant children, children with disabilities, and orphans.

Centre for Studies on Inclusive Education (CSIE)

<http://inclusion.uwe.ac.uk/csie/>

The CSIE is an independent centre working in the UK and overseas to promote inclusion in education. The site is a clearinghouse for information on inclusive education, including legislation, examples of and indicators for inclusive education programmes, news and updates.

ChildInfo (UNICEF): page on childhood disability

<http://www.childinfo.org/disability.html>

UNICEF's website presenting statistical information on the situation of children and women now includes a page on childhood disability. It presents data collected via the disability module of the Multiple Indicator Cluster Survey and includes information around methodologies used in data collection on disability, statistical tables on Multiple Indicator Cluster Surveys data and links to relevant publications and other resources.

Child Rights Information Network (CRIN)

<http://www.crin.org/themes/ViewTheme.asp?id=5>

CRIN is a global network that disseminates information about the Convention on the Rights of the Child and child rights among non-governmental organizations, UN agencies, educational institutions, and other child rights experts and is supported by UNICEF and other organizations. The site is a very good source of materials on children's rights and disability rights, and its resources can be searched by region and by the topic of "children with disabilities" with subtopics of armed conflict, parental care, discrimination, health, HIV/AIDS, violence, etc.

Disability Knowledge and Research Programme (KaR) Department for International Development UK

<http://www.disabilitykar.net>

The Disability KaR was funded by the Department For International Development and managed by Healthlink International and the Overseas Development Group, and ran from September 2003 until August 2005 to examine the issue of disability and poverty. The site provides information on the outcomes of a number of research projects on issues such as data collection; disability policy and legislation; inclusive education in Asia; disability in conflict and emergency situations; mainstreaming disability in development cooperation.

Enabling Education Network (EENET)

<http://www.eenet.org.uk>

EENET, located within the University of Manchester, is an information network providing access to a broad-based body of expertise in the practice of inclusive education world wide. EENET is targeted at a variety of teachers, parents, children and policy makers, primarily in countries of the South. The very informative website includes downloadable posters, manuals and guides on inclusive education and mainstreaming disability into development programmes, annotated links to journals and websites related to inclusive education, as well as information about EENET -inspired networks worldwide.

Hesperian Foundation

http://www.hesperian.org/Publications_and_Resources.php

The Hesperian Foundation is a non-profit publisher of books and educational materials that help people take the lead in their own health care and organize to improve health conditions in their communities. The site provides illustrated publications, educational materials and news on community health and other topics such as mental health, children with disabilities, rehabilitation and HIV/AIDS. David Werner's first three books: *Where There Is No Doctor*, *Helping Health Workers Learn*, and *Disabled Village Children* can be downloaded for free.

Inter-Agency Network for Education in Emergencies (INEE)

<http://www.ineesite.org/page.asp?pid=1152>

The INEE is a global, open network of non-governmental organizations, UN agencies, donors, practitioners, researchers and individuals from affected populations working together within a humanitarian and development framework to ensure the right to education in emergencies and post-crisis reconstruction. The site provides a checklist and some strategies for making classrooms inclusive for children with disabilities, and includes a list of resources for further reading.

Mobility International USA (MIUSA)

<http://www.miusa.org>

MIUSA serves as the National Clearinghouse on Disability and Exchange (NCDE), a project sponsored by the Bureau of Educational and Cultural Affairs of the United States Department of State and managed by MIUSA to: increase the participation of people with disabilities in the full range of international volunteer, study, work and research programs; advise international exchange organizations about the Americans with Disabilities Act; and facilitate partnerships between people with disabilities, disability-related organizations and international exchange organizations. See "Search Organizations" for a good search engine to find disability organizations by type of disability, region or country. See "National Clearinghouse on Disability and Exchange" to find links to online directors of organizations, and resources for universal design and accessibility standards resources.

Parents' Evaluation of Developmental Status (PEDS)

<http://www.pedstest.com/content.php?content=order-suggest.html>

This website explains features of an evaluation tool developed for parents to identify developmental and

behavioral disabilities.

Source International Information Support Centre

http://www.asksource.info/res_library/disability.htm

This site provides a merger of resources from Healthlink Worldwide and the Centre for International Child Health, produced with the help of Handicap International. There is a collection of over 20,000 health and disability materials, many of which are unpublished and produced in developing countries.

UN Enable

<http://www.un.org/disabilities/convention/index.shtml>

The Division for Social Policy and Development, the focal point in the UN on disability matters, provides information on the Convention and its background, the UN's work related to the Convention, events, disability databases and acts as a clearinghouse for disability-related information.

UN Educational, Scientific and Cultural Organization (UNESCO) Inclusive Education

http://portal.unesco.org/education/en/ev.php-URL_ID=7939&URL_DO=DO_TOPIC&URL_SECTION=201.html

UNESCO focuses on the development of policy guidelines and capacity-building in the field of inclusive education. The site has resources on UNESCO's programmes by region, guidelines for inclusive education programmes, policy and practice issues, case studies and other information on inclusive education.

UN Office of the High Commissioner for Human Rights (OHCHR)

<http://www2.ohchr.org/english/issues/disability/index.htm>

The OHCHR designed a long-term plan to enhance the recognition of the human rights dimension of disability. The site provides information about the UN Convention on the Rights of Persons with Disabilities, the role of the UN human rights system in the context of disability, and updates on events and other disability-related activities.

Whirlwind Wheelchair International (San Francisco State University)

<http://www.whirlwindwheelchair.org>

Whirlwind designs wheelchairs for local production in developing countries, and acts as technical advisors to helping existing manufacturers or disability organizations setting up their own small shops. The site provides articles and other information about wheelchairs in developing countries.

World Bank's Disability Website

<http://web.worldbank.org/WBSITE/EXTERNAL/TOPICS/EXTSOCIALPROTECTION/EXTDISABILITY/0,,menuPK:282704~pagePK:149018~piPK:149093~theSitePK:282699,00.html>

The Disability and Development Team works to mainstream disability into World Bank operations. The site provides updates on the World Bank's activities, data and statistics, and an easy-to-search library containing links to publications and additional resources on a variety of topics relating to disability and development.

World Health Organization Disability and Rehabilitation team (WHO DAR)

<http://www.who.int/disabilities/en/>

The WHO DAR Team is involved in a variety of activities to enhance the quality of life for people with disabilities. There are reports and descriptions of WHO activities on rehabilitation and assistive devices available to persons with disabilities. There is also a link under "research tools" to World Health Organization Library Database, the WHO's online library database, including documents and press releases related to disability.

Yale and World Bank: HIV/AIDS and Disability Global Survey

<http://globalsurvey.med.yale.edu/resources.html>

Located at Yale's School of Public Health, with funding from the World Bank, this project is designed to identify, foster and disseminate research, policies and programmatic interventions concerning the impact of HIV/AIDS on people with disabilities. The site provides research findings and links to articles and other resources on disability and AIDS.

Organisations of Persons with Disabilities

Name of Organization and Description	Contact	Regional Chapters
<p>Disabled Peoples' International (DPI): Is a network of national organisations or assemblies of disabled people promoting human rights of disabled people through full participation, equalization of opportunity and development. The goals also include the promotion of economic and social integration of disabled persons and to develop and support organisations of disabled persons.</p>	<p>302-388 Portage Avenue, Winnipeg, Manitoba R3C 0C8, Canada</p> <p>www.dpi.org tel: 204-287-8010 fax 204-783-6270 info@dpi.org</p>	<p>Africa: c/o Pan African Federation of the Disabled (PAFOD), No. 46 Herbert Chitepo Street, between 2nd and 3rd Avenues P.O Box 2213 Bulawayo Zimbabwe</p> <p>www.dpiafro.mr/index.htm tel: 293-966-764/880035 pafod@africaonline.co.zw pafod@africaonline.co.zw</p> <p>Asia: 325 Bondstreet Rd, Muangthong Thani, Bangpood, Pahlred, Nonthaburi 11120, Thailand tel:+662 984 1007 fax: -662 984 1008 rdo@dpiap.org</p> <p>South America: Av. Javier Prado Este 210 Dpto.6A, San Isidro, Lima, Peru www.dpi.org/latinamerica tel: +511 221 79 17 rlompd000@yahoo.es</p> <p>North America and Caribbean: c/o Council of Canadians with Disabilities, 926-294 Portage Ave, Winnipeg, Manitoba, R3C 0B9, Canada tel: +902 444 9099 voice +204 947 0303 tty: +204 947 4757 fax: +204 783 6270 sbestey@eastlink.ca</p>
<p>Inclusion International : Is a global federation of family-based organizations advocating for the human rights of people with intellectual disabilities worldwide. It represents over 200 member federations in 115 countries throughout five regions: Middle East, North Africa, Europe, Africa and the Indian Ocean, the Americas and the Asia Pacific.</p>	<p>c/o The Rix Centre University of East London Docklands Campus, London E16 2RD United Kingdom www.inclusion-international.org tel: +44 0 208 223 7709; 44 0 208 223 7411 info@inclusion-international.org</p>	<p>Africa: 01 BP 5151 Ouagadougou 01, Burkina Faso www.apee.liptinfor.bf/inclusion/francais/accueil.html tel: +00226 50 30 22 43/ 00226 70 21 12 16 fax: +00226 50 31 58 87 inclusion-afriqoi@liptinfor.org</p> <p>Asia (Pacific): 9 19 1 236 Konandai, Konan-ku Yokohama 230-0054, Japan Nagase@an.email.ne.jp</p> <p>Europe: Galeries de la Toison d'or, 29 Chaussée d'ixelles, #393/32, B-1050 Brussels, Belgium www.inclusion-europe.org tel: +32 2 502 28 15 fax: +32 2 502 80 10 secretariat@inclusion-europe.org</p>

Name of Organisation and Description	Contact	Regional Chapters
<p>Inclusion International</p>		<p>Middle East and North Africa: B.P 11/3118, Beit Almuhandess Street-Mar elais 47, Beit Almuhandess, Beirut, Lebanon www.friendsfordisabled.org.lb tel: +961 3 612 5 81/ 850 111 fax: +961 1 826 487/ 866 519 moussa@friendsfordisabled.org.lb</p> <p>North America and South America: Direccion General Apartado Postal J-127, Managua, Nicaragua www.inclusion-ia.org tel: +505 2 65 18 10 fax: +505 2 65 16 94 rleal@ibw.com.ni</p>
<p>International Disability Alliance (IDA): Represents more than 600 million people in the world with a disability. The alliance is composed of the following eight international organizations of and for people with disabilities: Inclusions International, International Federation of Hard of Hearing People, World Blind Union, Disabled Peoples' International, Rehabilitation International, World Federation of the Deaf, World Federation of the Deafblind and the World Network of Users and Survivors of Psychiatry.</p>	<p>c/o Rehabilitation International (RI), 25 East 21st Street, New York NY 10010 USA www.internationaldisabilityalliance.org tel: +1 212 420 1500 fax: +1 212 505 0871 ri@riglobal.org</p>	
<p>International Federation of Hard of Hearing People (IFHOH): IFHOH consists of national associations of hard of hearing and late deafened people, and parents and professional organisations. IFHOH helps hard of hearing people of all ages and their families, including (together with the International Federation of Hard of Hearing Young People-IFHOHYP) young people, deafened adults, people who suffer from tinnitus or ménières disease and IFHOHYP (International Federation of Hard of Hearing Young People): Is an international federation for national and regional youth organisations, from mostly European countries, that are dedicated to hard of hearing young people throughout the world. IFHOHYP raises disability awareness on national and international levels through activities run by and for hard of hearing young people aged from 18-35.</p>	<p>Box 6605, S-113 84 Stockholm Sweden info@ifhoh.org travelmind21@yahoo.com</p>	<p>Africa: c/o Zambia National Association of the Hearing Impaired znahi@zamnat.co.zm</p> <p>Asia: c/o Zenkoku Nancho-sha Renraku Kyogi-Kai (Zen Nancho) (Japan National Conference of the Hard of Hearing), MS Building, Ichigayadai 2F, Ichigayadaimachi 14, Shinjyuku-ku 162, Tokyo, Japan zennancho@zennancho.or.jp</p> <p>Europe: European Foundation of Hard of Hearing People (EFHOH); c/o Horselskadades Riksförbundet, Box 6605 SE-113 84 Stockholm, Sweden, Gavlegatan 16 www.efhoh.org tel: +46 8 457 5500 fax: +46 8 457 5503 hrf@hrf.se</p> <p>North America: c/o Hearing Loss Association of America, 7910 Woodmont Ave, Suite 1200 Bethesda, MD, 20814, USA battat@shhh.org</p>

Name of Organisation and Description	Contact	Regional Chapters
<p>Rehabilitation International (RI): Is a global network of people with disabilities, service providers, researchers, government agencies and advocates promoting and implementing the rights and inclusion of people with disabilities. RI is currently composed of over 700 members and affiliated organisations in nearly 100 nations, in all regions of the world.</p>	<p>25 East 21st Street, New York, NY, 10010 USA www.riglobal.org tel:+1 212 420 1500 fax:+1 212 505 0871 ri@riglobal.org</p>	<p>Africa: c/o DOLASED P.O.Box 62963, Dar Es Salaam, Tanzania tel: +255 22 741 404240 fax: +255 22 2668936 dolasedtanzania@yahoo.com</p> <p>Africa (Northern) and Asia (Middle East): c/o National Rehabilitation & Development Center, P.O. Box 11-7732, Beirut, Lebanon tel/fax: + 961 5 210 338/39 mobile: +961 3 206633 nrdc@destination.com.lb</p> <p>Asia (Pacific): c/o Korean Society for Rehabilitation of Person with Disabilities; Moja Building 4F 11-32 Dangsangong 5ga, Youngdungpo-gu Seoul Korea 150-045 tel: +82 2 2636 3423 fax: +82 2 2636 3422 rikorea@empal.com riksrpd@yahoo.com.co.kr</p> <p>Europe: c/o RIFI, Kumpulantie 1A, FIN-00520 Helsinki, Finland tel:+358 9 613 191 fax: +358 9 146 1443 heidi.lindberg@invalidilijito.fi</p> <p>North America: c/o Access Living of Chicago, 614 West Roosevelt Road, Chicago Illinois 60607, USA tel:+1 312 253 7000 mobile:+1 773 719 3902 fax: +1 312 253 7001 tty: +312 253 7015 Mbristo@aol.com</p> <p>South America (and Central America): c/o Consejo nacional Consultivo Para la Interacion de personas con Discapacidad, Residencia Ifficial de los Pinos, Peurta 1 Casa Benito Juarez, Col San Miguel Chapultepec Del M Hidalgo CP 11850, Mexico. Tel:+52 55 5091 1170 fax: +52 55 5091 1172 vflores@presidencia.gob.mx</p>
<p>World Blind Union: Is the only organisation entitled to speak on behalf of blind and partially sighted persons of the world, representing 162 million blind and visually impaired persons from about 600 different organisations in 158 countries.</p>	<p>c/o ONCE, La Coruna 18, 28020, Madrid, Spain www.worldblindunion.org fax:+34 915 715 777 umc@once.es</p>	<p>Africa: African Union of the Blind (AFUB) P.o.Box 72872, Embakasi, Nairobi, Kenya tel:254 020 823 989 fax:254 020 823 776 info@afub-uafa.org www.afub.net</p> <p>Asia: Asian Blind Union Braille Bhavan, sector-V, Rohini Delhi India 110085 tel:+ 91 11 705 4082 fax: +91 11 705 0915 aicbdelhi@yahoo.com</p> <p>Europe: European Blind Union, 58 avenue Bosquet, 75007 Paris, France fax: + 33 1 47 05 38 21 tel:+33 1 47 05 38 20 EBU_UEA@compuserve.com</p>

Name of Organisation and Description	Contact	Regional Chapters
World Blind Union		North America: c/o National Federation of the Blind, 1800 Johnson Street, Baltimore MD 21230 USA tel:+ 410 659 93 14 fax: + 410 685 56 53 officeofthepresident@nfb.org South America: c/o ULAC Permanent Office, ANCI-CUBA tel: 54 11 4310 5650/4310 5921 fax:54 11 4958 6589 secretariaulac@sinectis.com.ar ulacop@hotmail.com
World Federation for the Deaf (WFD): Is an international non-governmental organization of national associations of deaf people, with a current membership of associations in 127 countries worldwide. Associate members, international members and individual members also make up WFD's membership base. WFD supports and promotes in its work the many United Nations Conventions on Human Rights, with a focus on deaf people who use sign language, and their friends and family. WFD works with the aim of solidarity and unity to make the world a better place.	P.O.Box 65 FIN-00401, Helsinki Finland www.wfdeaf.org fax: 358 9 580 3572 wfd@ki-deaf.fi info@wfdeaf.org	Africa (Eastern and Southern): P.O. Box 33445-00600, Nairobi, Kenya tel: +254 2 253 814 fax:+254 2 253 335 rseas@yahoo.co.uk Asia and the Pacific: S.K bldg. 8F, 130 Yamabuki-cho, Shinjuku-ku, Tokyo, 162-0801, Japan tel: +81 3 3268 8847 fax + 81 3 3267 3445 wfdrsap@fd.or.jp Asia (Arab Group): c/o Arab Federation for the Organs of the Deaf, P.O.Box 4230, Damascus, Syria fax: +963 11 542 1893 afodafro@net.sy Europe (Eastern) and Central Asia: c/o All Russian Society of the Deaf, 1905 Goda Str. 10 a, 123022 Moscow, Russian Federation tel: +7 095 255 6704 fax: +7 095 253 2812 deaf_russia@mail.ru North America (Mexico, Central America and the Caribbean): c/o National Association of the Deaf of Costa Rica, Apartado 6552-1000, San Jose, Costa Rica fax:+506 257 8074 secreqca01@hotmail.com South America: c/o Asociacion de Sordos de Chile (ASOCH), Avenida José Pedro Alessandri No.1251, Nuñoa, Santiago, Chile srsuramwfd@yahoo.es
World Federation of the Deafblind (WFDB): Is a non-governmental and non-profit making worldwide organisation of deaf blind people, and is the legitimate voice of deafblind people of the world. The aim is to improve the quality of life of the deafblind people worldwide, and one of the most important activities is to identify deafblind people in order to break their isolation.	c/o FSDB S-122 88 Enskede, Sweden www.wfdb.com tel: + 46 8 39 91 55 fax: +46 8 659 50 42 wfdb@wfdb.org	Africa: Tanzania - afdbtz@yahoo.com Asia: Japan - fukusima@rcast.u-tokyo.ac.jp Europe: Croatia - dodir@zg.htnet.hr South and Central America: Colombia - surcoe@hotmail.com North America: USA - jsbohrman@earthlink.net

Name of Organization and Description	Contact	Regional Chapters
<p>World Federation for Mental Health: Promotes the advancement of mental health awareness, prevention, advocacy and the best practices recovery with focused interventions worldwide. Involved in UN activities, such as the non-governmental organization Committee on Mental Health, and works with the World Health Organization in such areas as the effects of trauma and violence on children.</p>	<p>6564 Loisdale Court, Suite 30, Springfield VA 22150-1812 USA www.wfmh.com/world/index.html tel:+1 703 313 8680 fax: +1 703 313 8683 info@wfmh.com</p>	
<p>World Network of Users and Survivors of Psychiatry (WNUSP): An international organisation advocating for the human rights of users and survivors of psychiatry, and links user/survivor organisations and individuals throughout the world. A user or survivor of psychiatry is self-defined as a person who has experienced madness and/or mental health problems and/or has used or survived psychiatry/mental health services, recognising that the experience of confinement and imposition of forced treatment is harmful and life-threatening.</p>	<p>http://www.wnusp.net/ admin@wnusp.org</p>	<p>Africa: Pan-African Network of Users and Survivors of Psychiatry (PANUSP) 105 Coronation Road, Maitland 7405, South Africa tel: +27 21/511 5776 mobile:+27 824865-953 moosa_salie@absamail.co.za ffcr2001@yahoo.co.uk</p> <p>Europe: European Network of Users and Survivors of Psychiatry (ENUSP) Zabel-Kruger-Damm 183, D-13469 Berlin Germany tel: +49 30 8596 3706 desk@enusp.org www.wnusp.org</p>
UN System Organisations		
<p>International Labour Organisation (ILO): Disability and Work. The Disability Programme promotes equality of opportunity and treatment in vocational rehabilitation, training and employment. It carries out applied research relating to policy and practice, disseminating information, publishing guidelines and manuals and sponsoring other research and reports. It assists governments, social partners and organisations of persons with disabilities to implement technical assistance projects and to develop national policies and programmes.</p>	<p>www.ilo.org/public/english/employment/skills/disability www.ilo.org/public/english/employment/skills/disability</p>	
<p>UN Educational, Scientific and Cultural Organisation (UNESCO): Inclusive Education. UNESCO focuses on support to the development of policy guidelines and capacity building in the field of inclusive education. It produces training materials, general guidebooks and reports. The flagship "The Right to Education for Persons with Disabilities: Towards Inclusion Under the Education for All Programme" is one of the most recent main activities in Inclusive Education.</p>	<p>http://portal.unesco.org/education/en/ev.php-URL_ID=7939&URL_DO=DO_TOPIC&URL_SECTION=201.html</p>	
<p>UN Office of the High Commissioner for Human Rights (OHCHR): The OHCHR works to integrate disability in the activities of treaty-monitoring bodies and human rights extra-conventional mechanisms, to support monitoring of human rights under the New Disability Rights Convention, and to strengthen collaboration with the Special Rapporteur on disability of the Commission for Social Development and other UN agencies.</p>	<p>www.ohchr.org/english/issues/disability/index.htm</p>	

Name of Organization and Description	Contact	Regional Chapters
<p>UN High Commissioner for Refugees (UNHCR): UNHCR stresses in several publications that refugees with disabilities, particularly children with disabilities, often face a greater risk of violence and other obstacles, and that attention must be paid to ensure their needs are met.</p> <p>Action for the Rights of the Child (ARC): Is an inter-agency initiative initiated by UN High Commissioner for Refugees and the International Save the Children Alliance in 1997, and joined in 1999 by UNICEF and the Office of the High Commissioner for Human Rights. As of January 2002, the co-ordination activities of the project are handled by Save the Children. ARC was designed to increase the capacity of UNHCR, governments and non-governmental organization field staff to protect and care for materials for training as well as broader capacity building activities. Some materials specifically address the issues faced by child landmine survivors and children with disabilities.</p>	<p>www.unhcr.org/protect/3b8373992.html</p>	
<p>UN Secretariat: UN Department of Economic and Social Affairs (UNDESA), Division for Social Policy and Development: The UN programme on disability has been consolidated into the Secretariat for the Disability Rights Convention. The objectives are to support the participation of disabled persons in social life and development; to advance disability rights and to promote equal access to employment, education, information, goods and services.</p>	<p>www.un.org/esa/socdev/enable</p>	
<p>World Bank(WB):The Disability and Development Team works to mainstream disability into WB operations. The WB finances development projects involving disability components- such as in education, health care, education, children and youth- and works in a wide variety of disability-related fields, such as data collection and statistics, research and analysis, technical assistance and knowledge sharing.</p> <p>Global Partnership for Disability and Development (GPDD): The GPDD is an initiative to accelerate inclusion of people with disabilities and their families into development policies and practices. The aim is to increase collaboration among development agencies and organisations to reduce extreme poverty and exclusion of disabled people, including those born with disabilities and people who become disabled through wars and other violence, disease and other causes.</p>	<p>www.worldbank.org</p>	
<p>The World Health Organisation (WHO): WHO is involved in several programs to prevent disabilities and to improve the lives of disabled people.</p> <p>WHO Disability and Rehabilitation (DAR) team, Department of Injuries and Violence Prevention, Cluster of Non-Communicable Diseases and Mental Health: The WHO DAR team is involved in a variety of activities to enhance the quality of life for people with disabilities, such as raising awareness, facilitating the growth of data and information, promoting community-based rehabilitation (CBR) and building capacity among health and rehabilitation policy-makers and service providers.</p> <p>International Classification of Functioning, Disability and Health (ICF): Is a classification of health related domains that describe body functions and structures, in clinical settings, health services or surveys at the individual or</p> <p>Disability and Injury Prevention and Rehabilitation in Africa (WHO/AFRO): This program supports governments and their partners in developing cost-effective and gender-specific strategies to prevent and mitigate the consequences of violence, injuries and disabilities.</p> <p>VISION 2020: Is the global initiative for the elimination of avoidable blindness, launched jointly by the World Health Organization (WHO) and the International Agency for the Prevention of Blindness (IAPB) with an international membership of NGOs, professional associations, eye care institutions and corporations.</p>	<p>www.who.int/entity/en/</p> <p>www.who.int/disabilities/en</p> <p>www.who.int/icftemplate.cfm</p> <p>www.afro.who.int/dpr/index.html</p> <p>www.v2020.org</p>	

Donor Organisations

Name of Organization and Description	Contact	Regional Chapters
<p>Germany: German Federal Ministry for Economic Cooperation and Development (BMZ)/ German Technical Cooperation (GTZ) The German Government's approach to disability is outlined in the policy paper Disability and Development - A Contribution to Promoting the Interests of Persons with Disabilities in German Development Cooperation, available on the GTZ's website at http://www2.gtz.de/dokumente/bib/06-0868.pdf. German Development Cooperation takes a human rights-based approach to the issue, with a focus on interventions in the health and education sectors, as well as <u>rehabilitation in post-conflict countries</u>.</p>	<p>Focal point at GTZ: Dr. Matthias Rompel matthias.rompel@gtz.de tel:+49 6196 79-1446 http://www.gtz.de/en/themen/soziale-entwicklung/soziale-sicherheit/15463.htm</p>	
<p>Denmark: Danida, Ministry of Foreign Affairs of Denmark Danida has worked for the inclusion of disability aspects in development since the late 1980s. Efforts tie in with existing international conventions and strong Danish engagement in the development of the UN Convention on the Rights of Persons with Disabilities. A series of technical papers on inclusion of disability in different sectors (water & sanitation, health, education, environment & energy and good governance) can be found on Danida's DevForum at: http://www.danidadevforum.um.dk/en/menu/Themes/DisabilityNotes/.</p>	<p>http://www.danidadevforum.um.dk/en/menu/Themes/DisabilityNotes/</p>	
<p>Finland - Department for International Development Cooperation, Finnish Ministry of Foreign Affairs: The Government of Finland has long been supporting initiatives to promote the development and inclusion of people with disabilities. A description of Finland's development cooperation on disability issues can be found on the website of the Department for International Cooperation at: http://formin.finland.fi/public/?contentid=43699&contentlan=1&culture=fi-FI An evaluation report of the Department's work in this area undertaken in 2003 provides additional information: http://www.disability.dk/images/docpics/1071749249_Label_us_able_valmis.pdf</p>	<p>http://formin.finland.fi/public/?contentid=43699&contentlan=1&culture=fi-FI</p>	
<p>Norway: Norwegian Agency for Development Cooperation (Norad), Norwegian Ministry of Foreign Affairs: The Guideliens "Inclusion of Disability in Norwegian Development Cooperation" describe Norad's approach to the issue, which is one of mainstreaming disability across its areas of work, both at home and at its embassies abroad, including projects and programmes. A link to the Guidelines can be found on Norad's website at: http://www.norad.no/default.asp?MARK_SEARCH=YES&SEARCH_ID=s1&V_ITEM_ID=1598.</p>	<p>Focal point at Norad: Hildegunn Olsen hio@norad.no tel:+47 22 24 20 30 http://www.norad.no/default.asp?MARK_SEARCH=YES&SEARCH_ID=s1&V_ITEM_ID=1598</p>	
<p>Sweden: SIDA: SIDA's work is guided by a human rights-based approach, with disability mainstreamed across the programmes and policies the agency supports. A policy paper providing guidance on how SIDA employees in the field should promote the human rights of persons with disabilities and improve their living conditions can be found on SIDA's website at http://www.sida.se/shared/jsp/download.jsp?f=SIDA23244en_Children+and+adults+with+disabilities_Web.pdf&a=18244. It describes interventions in the areas of: poverty reduction, education, health, HIV/AIDS, armed conflict & humanitarian assistance, infrastructure, and information & participation.</p>	<p>Disability Advisor: Eva Falkenberg email: eva.falkenberg@sida.se tel:+46 8 698 56 47 website: http://www.sida.se/sida/jsp/sida.jsp?d=847&a=16354&language=en_US&searchWords=disability</p>	

<p>United Kingdom: Department for International Development (DfID) DFID's approach to disability is outlined in the policy paper "Disability, Poverty and Development" (2005) available at: http://www.dfid.gov.uk/pubs/files/disability.pdf. While mainstreaming disability across its development co-operation work, DFID also supports more focused activities, including direct support to organisations of disabled people and to initiatives aimed specifically at enhancing the empowerment of people with disabilities.</p>	<p>http://www.dfid.gov.uk/research/contracts/awardeddisability.asp</p>	
<p>United States - United States Agency for International Development (USAID) - USAID is committed to the inclusion of people who have physical and cognitive disabilities and those who advocate and offer services on behalf of people with disabilities. This commitment extends from the design and implementation of USAID programming to advocacy for and outreach to people with disabilities.</p> <p>Leahy War Victims Fund: focused on conflict and post-conflict countries; assists people living with disabilities, particularly those who have sustained mobility-related injuries from unexploded ordnance, antipersonnel landmines, and other direct and indirect causes of disability. The Fund works to expand access to affordable, appropriate prosthetics and orthotic services and to advance the economic, social and political integration of civilian war victims and people living with disabilities.</p> <p>Displaced Children and Orphans Fund: supports programs that help families and communities provide the necessary care, protection, and support for children in need; children affected by armed conflict; street children; children with disabilities; children otherwise separated from appropriate care-giving situations.</p>	<p>USAID Disability Advisor: Ms Anne Haye tel: 1-202-789-1500 War Victims Fund: http://www.usaid.gov/our_work/humanitarian_assistance/the_funds/lwvi/ Displaced Children and Orphans Fund: http://www.usaid.gov/our_work/humanitarian_assistance/the_funds/dcof/</p>	

Other Organisations

Name of Organization and Description	Contact	Regional Chapters
<p>Action on Disability and Development (ADD): ADD is an international development agency, supporting organisations of disabled people as they campaign for their inclusion in society. ADD is involved in disability rights advocacy, capacity building and skills development. The goal is to ensure that local groups and larger representative organisations lead campaigns. ADD also works with associations of parents and caregivers to assist youth with disabilities.</p>	<p>Vallis House, 57 Vallis Road, Frome Somerset, BA11 3EG, United Kingdom</p> <p>www.add.org.uk tel: 01373 473064 fax: 01373 452075</p>	
<p>Atlas Alliance (Norway): Is an umbrella organisation for the development work of disabled people's organisations (DPOs) in Norway. The focus areas are the fight against tuberculosis, the development of DPOs in poor countries, and community based rehabilitation. The Atlas Alliance receives most of its funding from the Norwegian Agency for the Development Cooperation (NORAD) and is NORAD's main partner in development for disabled.</p>	<p>P.O.Box 9218 Gronland, 0134 Oslo, Norway</p> <p>www.atlas-alliansen.no tel: +47 22 17 46 47 fax: +47 23 16 35 95 atlas@atlas-alliansen.no</p>	

Name of Organization and Description	Contact	Regional Chapters
<p>CBM Christian Blind Mission/Christoffel-Blindenmission: Is an international non-governmental organization focusing on the provision of services to persons with visual disabilities as well as persons with other disabilities in more than 1000 projects in 113 developing countries. CBM implements programmes through local partners.</p>	<p>Nibelungenstrabe 124. 64625 Bensheim, Germany www.cbm.org tel: +49 6251 131 392 fax: +49 6251 131 338 contactoverseas@cbm-i.org</p>	
<p>Every Child: An international development charity that focuses on preventing child separation and keeping families together, as well as finding alternatives to institutional care for children who are separated from their families. Everychild is a strong partner in building social work services. Activities include organisational capacity building, skills training, counselling and technical assistance.</p>	<p>4 Bath Place , Rivington Street, London EC2A 3DR, United Kingdom www.everychild.org.uk tel:+44 0 20 7749 2468 fax:+44 0 20 7729 8339 supportercare@everychild.org.uk</p>	
<p>Handicap International (HI): Is an international non-governmental organization that supports the needs of disabled people in countries affected by poverty and conflict. HI provides both emergency relief and lonterm development support. Activities cover areas of prevention (e.g., mine risk awareness), rehabilitation (e.g., physical therapy), inclusion (mainstream disabled people into work of organisations), capacity building (e.g., technical support and grants), emergencies (e.g, artificial limb fitting).</p>	<p>Waterman House, 101-107 Chertsey Road, Woking, Surrey, GU21 5BW, United Kingdom www.handicap-international.org.uk tel: + 44 0 870 774 3737 hi-uk@hi-uk.org</p>	
<p>Healthlink Worldwide: Is a specialist health and development agency that empowers through communication and advocacy training and works to improve the health and well being of disadvantaged communities in developing countries. It works with disabled people's organisations to provide access to information, supporting groups to run workshops, developing networks and researching aspects of disability in development. It has also helped the United Kingdom Department for International Development develop policies to mainstream disability.</p>	<p>56-64 Leonard Street, London, EC2A 4LT, United Kingdom tel: + 44 20 7549 0240 fax: + 44 20 7549 0241 info@healthlink.org.uk</p>	
<p>Health Wrights: Is a non-profit organisation committed to advancing the health, basic rights, social equality and self-determination of disadvantaged persons and groups. One focus area is disability issues, rights and technologies and it works closely with PROJIMO (Program of rehabilitation organised by Disabled Youth Of Western Mexico). It also develops and distributes educational materials on health and disability issues, presented clearly and simply for people at all education levels.</p>	<p>p.o.Box 1344 Palo Alto, CA 94302 USA www.healthwrights.org tel: + 1 650 325 7500 fax: + 1 650 325 1080 healthwrights@iqc.org</p>	

Name of Organization and Description	Contact	Regional Chapters
<p>International Paralympic Committee (IPC): Is the global governing body of the Paralympic Movement and is an international non-profit organisation formed and run by 162 National Paralympic Committees (NPCs) from five regions and four disability specific international sports federations (IOSD). Unlike other organisations, IPC, as an umbrella organisation, represents several sports and disabilities. The IPC overseas partnerships, programmes and services (Grants) designed to grow, develop and sustain the Paralympic Movement and athletes, including in developing countries.</p>	<p>Adenauer Allee 212-214, 53113, Bonn, Germany www.paralympic.org tel:+ 49 228 2097 200 fax: + 49 228 2097 209 info@paralympic.org</p>	<p>Africa : African Sports Confederation of Disabled (ASCOD) - P.O.Box 2051 A1 Safaa Corner, Alzaeam Theatre, Haram-Giza, Egypt : ASCOD is an independent regional organisation that promotes sports in Africa for persons with various disabilities. ASCOD collaborated with the IPC to form the African Academy of Disabled Sport. www.ascod.org tel: + 202 7443137/744 3138 fax:+202 744 3125 info@ascod.org</p>
		<p>Asia Paralympic Council (APC): Asia: Until such a time as an independent regional organisation is created, the IPC has established APC as the sole regional representative body. The APC supervises and coordinates the organisation of Asia Para Games and other multi-disability competitions. www.asianparalympic.org</p>
		<p>The Americas Paralympic Committee (APC - Comit� Parol�mpico de Am�ricas) is the regional organization, recognized as the sole regional representative of the Americas Region. c/o Comit� Parol�mpico Brasileiro (CPB), SBN Qd. 02 Bl. F Lt. 12 Ed. Via Capital, 14� andar, CEP 70040-020 - Bras�lia/DF - Brasil, Tel.: + 55 61 30313021, Fax: + 55 61 30313023, http://www.americasparalympic.org/apc/opencms/en/cpb@cpb.org.br.</p>
		<p>European Paralympic Committee (EPC): The EPC is an independent regional organisation that oversees European Championships in a number of Paralympic sports and is composed of 47 National Paralympic Committees and the European branches of four disability-specific International Organisations of Sports for the Disabled. c/o Italian Paralympic Committee, Via Flaminia Nuova 830, 00191, Rome Italy www.europaralympic.org tel: +39 06 3685 6224 fax: +39 06 3685 6332 president@comitatoparalimpico.it</p>
		<p>Oceania Paralympic Committee (OPC) - Oceania: Is an independent regional organisation of National Paralympic Committees from the Oceania region. The OPC is managed through the Australian Paralympic Committee. c/o Australian Paralympic Committee, Building A, 1 Herb Elliott Ave, Sydney Olympic Park, sydney NSW 2127, Australia tel: + 61 2 873 62611 fax: + 61 2 97460189 darren.peters@paralympic.org.au</p>

Name of Organisation and Description	Contact	Regional Chapters
<p>Survivor Corps., formerly known as Landmine Survivors Network (LSN): Is an international organisation created by and for survivors, linking them to healthcare and rehabilitation services, providing social and economic reintegration programs and working to ban landmines. Survivor Corp. also builds peer relationships that help transform victims into survivors and ultimately, into participating citizens. Survivor Corps. has been a leader in the campaign for the UN Disability Rights Convention. Its programs have reached out to survivors in 43 of the 87 most mine-affected countries and regions.</p>	<p>2100 M Street, NW, Suite 302, Washington DC 20037, USA www.survivorcorps.org tel: + 1 202 464 0007 info@landminesurvivors.org</p>	
<p>Leonard Cheshire International(LCI): Is an non-governmental organization with 60 years of promoting positive attitudes to disability and empowering people with disabilities. LCI strengthens the local capacity of organisations and institutions in such areas as education and community-based rehabilitation. Its Center for Conflict Recovery provides training for health professionals. When necessary, LCI will also directly work on policy or service development.</p>	<p>30 Millbank, London, SW1P 4QD, United Kingdom www.lcint.org tel: 00 4420 7802 8200 fax: 004420 7802 8275 international@lc-uk.org</p>	
<p>Light for the World-Christoffel Development Cooperation: Is an Austrian non-governmental developmental organisation committed to helping people who have eye diseases, are blind or otherwise disabled in underprivileged regions. The work focuses on preventing blindness and restoring eyesight, rehabilitating blind persons and people with other disabilities, preventing and treating disabling conditions and promoting the rights of persons with disabilities. Activities include training local specialists and youth with disabilities, advocating for disability rights, supporting community-based rehabilitation programs and building the capacity of local organisations to advocate on behalf of children and adults with disabilities.</p>	<p>Neiderhofstrasse 26, 1120 Vienna Austria www.light-for-the-world.org tel: +43 1 810 13 00 fax: + 43 1 810 13 00 info@light-for-the-world.org</p>	
<p>International Save the Children Alliance: Is a leading child rights organisation and an umbrella organisation of 27 member organisations working together in over 100 countries. The work is coordinated from Save the Children Alliance Secretariat in London. The Alliance's member organisations are based in Australia, Canada, Denmark, Dominican Republic, Egypt, Fiji, Finland, Germany, Guatemala, Honduras, Iceland, Italy, Japan, Jordan, Republic of Korea, Lithuania, Mexico, Netherlands, New Zealand, Norway, Romania, Spain, Swaziland, Sweden, United Kingdom, United States.</p>	<p>Second Floor Cambridge House 100 Cambridge Grove London W6 0LE United Kingdom Tel: +44 (0) 20 8748 2554 Fax: +44 (0) 20 8237 8000</p>	<p>Save the Children UK promotes the right of disabled children to develop their potential, get an education, have a say, and take part in society. It challenge institutions to include disabled children in all legislation, planning and decision-making and supports community-based alternatives to institutions and specialist services. Safe UK's Disability Advisor: Tina Hyder t.hyder@savethechildren.org.uk tel: +44 (0) 20 7012 6855 website:www.savethechildren.org.uk</p>