

SOCIAL INCLUSION OF CHILDREN AND YOUNG PEOPLE WITH DISABILITIES



Council of Europe Disability Action Plan

Quality of life and full participation in society

COUNCIL OF EUROPE



CONSEIL DE L'EUROPE

Social inclusion of children and young people with disabilities

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**In co-operation with the Drafting Group on the rights
of children and young people with disabilities
of the Council of Europe Committee
of Experts on the Rights of People with Disabilities (CS-RPD)**

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PREFACE

The Council of Europe is a political organisation which was founded on 5 May 1949 by ten European countries in order to promote greater unity between its members. The Organisation now numbers 47 member states with a total population of more than 800 million people.

The main aims of the Council of Europe are to reinforce democracy, human rights and the rule of law and to develop common responses to political, social, cultural and legal challenges in its member states. Since 1989, the Council of Europe has integrated most of the countries of central and eastern Europe into its structures. It currently supports them by capacity-building activities, develops neighbourhood policies with non-member states and implements joint programmes with the European Union in its fields of competence.

Disability-related activities of the Council of Europe lie at the heart of Council of Europe activities in favour of human rights. They are guided by the Council of Europe Disability Action Plan 2006-2015¹ (Recommendation CM/Rec(2006)5 of the Committee of Ministers to

¹ Council of Europe Action Plan to promote the rights and full participation of people with disabilities in society: improving the quality of life of people with disabilities in Europe 2006-2015 (called Council of Europe Disability Action Plan 2006-2015)

member states) and the United Nations Convention on the Rights of Persons with Disabilities. These activities are suggested and monitored by experts coming from all 47 member states, the observer states, various Council of Europe committees and bodies and from several international organisations both governmental and non-governmental.

The present report was prepared by Mr Helmut Heinen (Belgium), with the help of a Drafting Group on the rights of children and young people with disabilities, the composition of which appears in Appendix 1 of this publication. The report aims to highlight the challenges and consolidate the policy responses for protecting and promoting the rights of boys and girls, young men and young women with disabilities facing systemic barriers, negative attitudes and social exclusion.

The publication identifies the actions which should be taken by governments to tackle challenges existing in the main spheres of life of children and young people with disabilities as set out in this report. Examples of good practice from Council of Europe member states are also provided as an illustration rather than an exhaustive account of existing measures, because a full and thorough consultation of all member states was not possible in the short time available.

The Secretariat of the Council of Europe would like to thank the consultant and all the experts who have worked on the drafting of this report and of Recommendation CM/Rec(2013)2 of the Committee of Ministers to member States on ensuring full inclusion of children and young people with disabilities into society. It hopes that the two texts will invite the various European stakeholders to adapt their regulations, policies and practices in order to build obstacle-free societies for and with all children and young people, including imperatively those with disabilities.

EXECUTIVE SUMMARY

This report accompanies Recommendation CM/Rec(2013)2 of the Committee of Ministers of the Council of Europe to member States on ensuring full inclusion of children and young people with disabilities into society. It provides the background to the recommendation and sets out to highlight the main elements for creating a completely inclusive society in which children and young people with disabilities are actively involved and where their needs and expectations are taken into consideration. It also refers to the physical and human obstacles which are still present and hamper the social inclusion of the group concerned.

Member states should provide high-quality education in schools for all children and young people without exception. Even though education provides an ideal setting in which to transmit the underlying values of a society for all, and although education is a milestone in the process of integrating children and young people in society, it is important also to stress other equally important aspects of life. For instance, it is absolutely vital to ensure transition from the education system to working life by means of an individual integration plan providing professional support in accordance with individual needs, housing tailored to the young people's capacities and choices, and the greatest possible autonomous mobility. Another

key factor is active citizenship for children and young people with disabilities. Vocational integration and increasing the employment rate of people with disabilities are further decisive factors in their social inclusion.

In order to promote their participation as citizens, it is vital to highlight the potential of children and young people with disabilities, promote an open and welcoming environment and help them find their place in the various fields of public and political life. The emphasis must be on developing their autonomy, and particularly on reinforcing their self-confidence and self-esteem through cultural, sports and recreational activities. High-quality training of professionals, preferably with additional training in “inclusion competences”, is essential as a means of setting the process of social inclusion in motion.

Very close attention must be paid to protecting children and young people with disabilities against abuse, ill-treatment and violence because they are automatically exposed to higher risks. It is very important to correct social representations and eliminate embarrassment and fear by demystifying disability. Changing attitudes, social representations and the general perception of disability is one of the key factors in improving social inclusion. The media can make a major contribution here by providing information and raising awareness.

Member states should devise success indicators and establish assessment mechanisms to be applied regularly. Examples of good practice should be highlighted and exchanged. Large-scale publication of the results of the assessments and the degree of inclusion (inclusion index) gradually achieved could not only trigger a knock-on effect but also improve the image of people with disabilities in society. The report underlines the developments still needed and the measures to be taken so that children and young people with disabilities can be actively involved in society.

Social inclusion is a societal process which requires a broad consensus within which all stakeholders in a given society must co-operate.

*“[...] man is designed to be a success and the universe is designed to support that success”
(UNESCO report: Learning to be, Paris, 1972).*

INTRODUCTION

Persons with disabilities are full-fledged citizens who enjoy the same rights as the rest of the population. They have an active role to play in our society, and this is especially true of children and young people with disabilities. This is highlighted in the Council of Europe Disability Action Plan 2006-2015 (Recommendation Rec(2006)5) and the United Nations Convention on the Rights of Persons with Disabilities (2006). Furthermore, the best interest of the child must override any other consideration in any decision concerning children.

For instance, Art. 4 §3 of the Convention requires states parties to “closely consult with and actively involve persons with disabilities, including children with disabilities” in the development of any measure relevant to them.

In order to build up inclusive and participative societies which respect the provisions of these instruments, it is necessary to prioritise young people, because they are tomorrow’s adults. Children and young people with and without disabilities are the future of society. They must be allowed to grow up together. Non-disabled children will quite naturally learn about difference, live with it and respect it. They will be the stakeholders and guarantors of a society which values diversity. These efforts are also aimed at a sustainable strategy for an inclusive society.

The fact is that many children and young people with disabilities in Europe are still living in segregative systems. Although wide-ranging action is being conducted to trigger a change of paradigm towards a social and environmental approach to disability and deinstitutionalisation has considerably progressed in a number of countries, the social inclusion process is far from completed.

All children with disabilities should be able to live with their own families, barring exceptional circumstances. In order to achieve this, it is vital that we listen to them, take them seriously and promote their self-esteem, as well as supporting and reinforcing their families in their capabilities (empowerment). The transition from institutionalisation to an active life in all sectors of society also requires that early intervention services and other high-quality local services be set up, geared to advising and supporting children and young people with disabilities and their families. This also necessitates respite services capable of occasionally relieving the families.

Moreover, the children and young people with disabilities who live in our midst still come up against a whole range of obstacles, barriers and prejudices. Sometimes they even experience clearly discriminatory situations where they are quite simply excluded from participation in activities. Youngsters with disabilities are the

young people who are in greatest need of support, back-up and special attention if they are to find their way in society. This should preferably involve a customised approach based on their abilities and interests, also taking account of their needs so that they can fully participate in the life of the community.

They should be encouraged to maximise their self-reliance, decide their own future and enter the labour market. Depending on their impairments, they should be provided with the facilities and aids which they need to shoulder their rights and responsibilities in their everyday lives.

The general services operating in the social, health and educational sectors should open up in order to adapt their installations to accommodate children and young people with disabilities and give them the wherewithal for active involvement in society.

Professionals and other stakeholders in these sectors should have compulsory additional training in “inclusion competences”² in order to acquire the requisite strategies, methods, resources and willpower to ensure the success of this ambitious project. There is, unfortunately, a desperate lack of competences in this field.

² Helmut Heinen (see Appendix 2 – Definitions).

States should provide decent incomes for persons with disabilities incapable of working. They should defray the additional costs arising from young people's disabilities in order to ensure genuinely equal opportunities in society. This is particularly necessary because job insecurity can be considered an additional handicap which makes social inclusion even more difficult.

While member states have, to a greater or lesser extent, progressed towards an integrated and transversal policy involving and empowering all societal stakeholders, in 2012-2013³ the negative repercussions of the financial crisis are obvious throughout Europe. This crisis in a large number of states is liable to curb or even halt the current trend towards an inclusive society, because public social expenditure is generally the prime target of cuts.

There is a high risk that small community-based services which are vital for any effort at inclusion will be deeply concerned by the crisis and will have to close down because of it. On the other hand, the traditional institutions are more soundly based. This phenomenon of re-institutionalisation and other forms of exclusion or isolation linked to the lack of competent aid are inimical to the aims of social inclusion and must at all costs be combated and halted by the member states. It is

³ Years of the preparation of the report.

above all in times of economic recession that states must do their utmost to fulfil the fundamental obligations of society and assign absolute priority to protecting the most vulnerable groups, e.g. by transferring specific resources and tailoring services to the needs of the persons concerned.

The whole of society must unite in a broad consensus on social inclusion. This process comprises multiple factors which are intertwined and mutually interdependent like the links in a chain.

The Council of Europe experts, being concerned to ensure the progress of this enormous European undertaking, and having conducted wide-ranging discussions on the situation of children and young people with disabilities in the 47 member states, have decided to submit a Recommendation to the Committee of Ministers in order to promote the social inclusion of children and young people with disabilities in our European societies.

In pursuance of the goals mentioned in the definition of social cohesion, viz. to “ensure the well-being of all its members – minimising disparities and avoiding marginalisation –

to manage differences and divisions and ensure the means of achieving welfare for all members”⁴, the member states should therefore continue to expend the requisite efforts to prevent a return to segregative systems.

We must take up this challenge in order to build a Europe for and with all children and young people.

⁴ **New Strategy and Council of Europe Action Plan for Social Cohesion (2010).**

Social Investment

Social investment is the provision and use of finance to generate social, or social as well as economic, returns. Under the social investment approach, social support is considered an investment in individuals and in society as a whole.

Investing in social services does not just make social sense, it also makes economic sense: social services as an economic sector have grown much faster than other sectors of the economy in the period 2000 – 2009 and have generated about 5% of the total economic output of the European Union. They have the potential, in meeting growing need, to play a significant role in economic recovery as well.

Different methods have been developed, like Social Accounting, SROI (social return on investment) and SOFIE (social, financial and ecological evaluation).

The **concept of social return on investment (SROI)**, developed in the US in the 1990s, has been used also in European countries to measure the economic output of social services and enterprises. Non-profit organisations supporting persons with disabilities are shown to be capable, through their activities, of generating cost savings and profits for the public purse. This also has positive outcomes for future decision makers as positive changes to the situation

of service users, organisational structures and processes will have positive and lasting outcomes.

A high level of general well-being contributes positively to society's productivity and competitiveness and decreases the costs of services and social benefits needed to tackle social exclusion and poverty. Investing in the equal opportunities of disabled children and young people helps them to develop their full potential, to live independently as adults and to contribute to society through their skills and capacities.

At times of shrinking resources when public money has to be spent particularly carefully, it is more important than ever to ensure that available resources are used to serve the community in the best possible way. **Innovative social services** help make this possible. Research shows that funding for services supporting people in the community goes further than funding used to keep people in big, institutionalised settings. Intervening directly within communities even before there is a need for institutional care (with children for instance) is a much more rights-based, proactive, beneficial and economically viable approach to the social crisis that confronts us.

Contribution by Ms Eveliina Poyhonen (Finland)

The impact of the financial, economic and social crisis on social services for persons with disabilities

The European Association of Service Providers for Persons with Disabilities (EASPD) has been monitoring the impact of the crisis on social services for persons with disabilities and consequently on service users since 2009 and has noticed that both services and users have been severely affected by the crisis and also by the austerity measures put in place by Governments to fight it.

Studies carried out and statistics collected over the past 4 years clearly show that persons with disabilities and the services supporting them have suffered disproportionately because of this.

Specifically, social services have been hit in a number of ways:

- **Decrease in budgets available for social services**, both in terms of grants or subsidies given by authorities at various levels (local to national) and of grants/loans by private institutions or donors e.g. foundations;
- **Unavailability or stricter terms of loans** offered by banks – making it very difficult to carry out renovation or innovation plans;

- **Negative effects on long-term strategies and planning**, jeopardising service offers because of a lack of long-term financial security;
- **Reductions in levels of services offered**, closures or inappropriate merging of services;
- **Staff reductions in social service centres, or worsening pay and working conditions** as a direct consequence of decreased funding; exacerbation of “brain drain” already experienced in the sector in several eastern European countries;
- **Cuts in independent living support and decreases in personal assistance schemes.** As a consequence, independent living for increasing numbers of persons with disabilities has been put at risk, and a worrying trend towards re-institutionalisation has been noticed in a number of countries;
- **Re-institutionalisation:** In some countries, legislative and policy reforms that were initiated prior to the crisis and which aimed at implementing the UNCRPD have been abandoned owing to a lack of resources. Additionally, services are now expected to support increasing numbers of people and at times this means increasing the maximum number of beds per room, or reduced square metres per resident in

residential care, thus perpetuating institutionalisation;

Further consequences for service users are as follows:

- **Decreased employment opportunities for persons with disabilities**, both in sheltered settings and on the open labour market. The rate of unemployment for persons with disabilities is much higher than for non-disabled persons, and funding for innovative programmes aimed at bringing disabled people to the open labour market has decreased dramatically;
- **Adverse effects on inclusive education.**

It also follows that because of a severe reduction in the support and service offer, persons with disabilities and their carers are forced to pay a greater proportion on the costs of services out of their own pockets, and to make up for the insufficient level of services available by relying on family or informal carers. This causes serious equity questions, both for disabled people and their carers.

Contribution by the European Association of Service Providers for Persons with Disabilities (EASPD)

1. EDUCATION

Background and challenges

Education can be regarded as the basis for the inclusion of children and young people with disabilities in society. This makes it crucial to ensure that children and young people with disabilities have the same right to education as all other children and young people. This is what is stated in Articles 15 and 17 of the revised European Social Charter and in Action Line No. 4 of the Council of Europe Disability Action Plan 2006-2015 on “Education”. UNESCO’s Salamanca Statement of 1994 and the United Nations Convention on the Rights of Persons with Disabilities of 2006 place the emphasis on school for all and education for all children and young people in mainstream schools. For instance, Article 24, point 2 of the Convention states that in realising the right to education, states parties must ensure that 'persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live’ and that “reasonable accommodation of the individual’s requirements is provided”. The same requirement is stated in Article 24, point 5, of the Convention in relation to general tertiary education, vocational training, adult education and life long learning.

Since the adoption of these instruments, most member states have taken positive steps, albeit to varying degrees. Whereas in some member states school for all has already been achieved, others have only just begun a gradual transition to an inclusive form of education in the medium or long term. Although mentalities have changed considerably, professionals, parents and political leaders are still hesitant about putting inclusive education into practice. Where inclusion projects co-exist with special education, there is still some reluctance, particularly among teachers but also among parents and in society as a whole. Questions also remain about cost and efficiency.

The belief that education in mainstream schools is less expensive than special education is a fallacy which could lead to the trivialisation of the needs of children and young people with disabilities. However, providing funding for education does not necessarily add to the quality of the education on offer or how well children and young people with disabilities are integrated into mainstream education. Major obstacles are brought about by inflexible systems which leave no room for adapting methods or tailoring curricula to individuals. For teaching staff to subscribe fully and firmly to this change in approach, it is essential for them to be trained, guided and supported.

Inclusion in education necessitates a comprehensive approach to the whole school system. Schools must adapt to the students' educational needs, and not the reverse.

A recent study by the European Association of Service Providers for Persons with Disabilities (EASPD) in 10 European countries shows that the number of pupils receiving an inclusive education is on the increase. At the same time, however, the number of pupils in special education is not decreasing. Does this result from an increase in the number of children and young people with disabilities in society, or from an urgent need to tailor curricula to individuals and review education strategies to stop pupils dropping out?

The fact remains that there is a risk of inclusion not being applied to those children and young people with more severe intellectual impairments, additional disabilities or an autistic spectrum disorder.

Action

Considering that inclusive education is one of the basic keys to the inclusion of children and young people with disabilities in society, to help them to find their place as fully-fledged citizens, and that all children and young people should be able to grow up together for the benefit of all, showing respect for others, the member states should:

- **promote the development of early intervention services tasked with providing quality education and rehabilitation programmes meeting the specific needs of children with disabilities from an early age and offering support designed to enhance parental skills;**
- **ensure that all children and young people, irrespective of the nature and degree of their disability, have equal access to education;**
- **encourage those in charge of education and training establishments at all levels to implement inclusive education programmes meeting the needs of all children and young people with or without disabilities;**
- **ensure that a high standard of training is provided for staff specialising in the disability field and that the training courses of all educational and support staff contain one module or more whose aim is to teach them skills related to inclusion;**
- **ensure that working conditions are created which benefit inclusive education and take appropriate measures for the teaching staff to be able to work on the basis of a practical and inclusive ethical framework, making provision for all children and young people with or without disabilities and viewing diversity as an asset rather than a drawback;**

- **take the necessary measures to make all buildings used in the education sector accessible and to make suitable technical aids and tailored communication programmes available;**
- **ensure that parents are involved as partners in every educational process involving their children and that effective support and respite services are provided for them so that they can continue to shoulder their responsibilities and institutionalisation can be avoided.**

Examples of good practice

Some European countries are providing specialised support in every regular school for the inclusion of students with disabilities. This support allows each school to feel more resourceful and confident to welcome students who, due to disability or other causes, may experience difficulties in the learning process and in the inclusion in the school community. These staff members are resources of the school and not of individual “cases”, and the scope of their activity is the school community as a whole.

The concept for AspIT in **Denmark** is a tailored training model for young people with Asperger Syndrome. It is based on young people's strengths, and develops the individual student's talent. During the programme, special consideration is given to the requirements of a person with Asperger syndrome needing to acquire new knowledge. This means small teaching teams with individualised learning in a safe and trusting everyday setting.

There is no doubt that young people can gain skills through training organised according to their specific needs. After three years of education, students have been proven to possess personal and IT-related skills that enable them to solve concrete tasks for companies implementing internship and

receive learning at a high IT professional level. Many young people who have undergone an AspIT education are characterised by being good at their work, very loyal, very honest, and some of them have an intelligence level between normal and high combined with an excellent memory capacity. Experience shows that such characteristics are appreciated by many companies.

In the **Netherlands**, service providers make assistants available for persons with disabilities, focusing on full inclusion in society. Every child signed in for guidance will have an assistant in the classroom. The assistant ensures that the child has a good spot in the classroom and can take part in the lessons by making some adjustments. For example, they can provide pictograms to make the spoken word understandable for the child. They help the child to attend school as independently as possible. They show the teacher what a child can do, and help the other children understand and help the child with a disability. The assistants at school are often the main reason why schools do accept children.

The assistant can also provide support in the family, or for going to the nursery, a playgroup, a neighbourhood centre or sports club. The assistant is there to teach the child about particular rules, to care and to assist in playing with other children or in sports.

In **Bulgaria**, education policy aims at providing suitable conditions for educating and for the development of everyone's potential. Children with special educational needs and/or with a chronic disease shall be provided with access to education in compliance with the educational programmes of the relevant kindergarten and school. There are teams for complex pedagogic assessment in all regions which assess the child's needs, support and co-ordinate the educational process. A number of integrated pupils in the 2011-2012 school year (1 222) were in pilot schools under a project entitled Integrating Education. The project is being implemented in partnership with the resource centres, and also with national representative organisations established by and for the people with disabilities. It contains five components – early assessment, early intervention, training, training kit, establishing a network for effective co-operation and exchange of experience at regional and municipal level.

In **Hungary**, a secondary school originally trained only physically disabled students. In 1993 when classes could not be filled up, the principal decided to admit non-disabled students; this is how inverse inclusion started. Since then there have been nearly 200 students learning together in an accessible environment where teachers and special education

teachers work together with great competence and patience. Non-disabled students usually easily adjust to this situation and rapidly learn how to behave or help their peers in a wheelchair. All can benefit from this type of education. Disabled students have real contact with non-disabled fellow students, they become friends, often meet after school as well. In this way, they undergo preparation for independent living outside the school environment. It is a great experience to see that inclusive education works.

Good inclusive practice in **the United Kingdom** (Northern Ireland) schools is widely evidenced in educational settings where a clear and deliberate focus is placed upon ensuring the learner is at the centre of all planning and decision making around their education before they even join the school community. This student centred approach enables schools to take into account the very unique and individual needs of learners with disabilities and ensures staff on the ground; principles, teachers and SEN assistants tailor and adapt their approach to the person in front of them rather than their disability. This proactive approach is at the forefront of a number of Grammar Schools throughout Northern Ireland. At these schools, regular reviews, forward planning and above all viewing the learner as an individual with hopes, dreams and aspirations allows the best possible outcome for the disabled individual, the school community and by extension

society at large.

A student's personal perspective

“As a young and ambitious student in Northern Ireland, I was very aware that the transition from primary to post primary would be fraught with potential difficulties for me due to the nature of my physical disability⁵. The school where I was to transfer to, however, worked in an incredibly proactive way to ensure that all obstacles and barriers were considered and circumvented at every stage of my new educational journey. I found the approach of the staff at the school pivotal in ensuring I could cope with the additional stresses and pressures I encountered. From the Principal downwards; the ethos of acceptance and creative thinking that was espoused allowed me to flourish from entry to exit. I was able to leave school among the top 5 of my contemporaries and go on to tertiary education. Being placed firmly at the centre of my educational planning gave me a feeling of empowerment and such a supportive environment also allowed me to springboard into career opportunities that would never have been an option otherwise.”

⁵ **The author of this contribution is a wheelchair user.**

2. TRANSITION FROM THE EDUCATION SYSTEM TO WORKING LIFE

Background and challenges

If the aim of the education system is to enable children and young people to develop their characters and potentials with a view to finding their place in society and being able to manage their lives in it autonomously and self-reliantly, the transition from the education system to working life is undoubtedly one of the key moments in the process. This is all the more valid for young people with disabilities.

It is a trajectory which unfolds throughout a person's life which the International Labour Office defines as follows: "... a process of social orientation that implies status change and role ... and is, therefore, central to integration into society. Transition does not merely mean playing a new role but requires a change in relationships, routines and self-image. ...In order to guarantee a smoother transition from school to the workplace, young people with disabilities need to develop goals and identify the role they ultimately want to play in society" (ILO, 1998)⁶.

⁶ Education, employment and training policies and programmes for youth with disabilities in four European countries, Geneva, International Labour Office (1998) (pp. 5 and 6).

Yet, after their compulsory schooling, young people with disabilities are very often incapable of finding the right path, either because no vocational integration measures have been adopted to help them or because they cannot find their way among those that do exist. Secondly, the career guidance and support services may not possess all the appropriate evaluation and counselling instruments needed to advise young people with disabilities, and it is important to ask them about their abilities, their interests and their life plans.

Of course, situations differ considerably from one country to another. However, it is clear that the success rate of this important step in life is still low, and that in most member states there are still too many impediments to the recruitment of young people with disabilities.

The International Labour Office considers that excluding people with disabilities from the world of work can cost states between 1 % and 7 % of GNP. These costs relate to their productive potential, the cost of disability benefits and allowances and the involvement of their families and health, support and care personnel⁷.

At this turning-point in their lives, young people with disabilities need information which they can understand about potential opportunities and

⁷ Overview of ILO Programmes.

additional qualifications; they need advice and support and assistance measures.

It has since been demonstrated that personalised planning can yield improved results. Greater co-ordination between all stakeholders is required to offer young people with disabilities a professional future allowing them to integrate more fully into society. It is crucial for this integration path to be an uninterrupted chain, starting at school and, ideally, ending with a job in the ordinary labour market.

Action

In view of these facts, the member states should facilitate and optimise the transition between education systems and working life by ensuring that all career guidance, assistance and support services:

- employ qualified “mentor-co-ordinators” to advise and assist young people in their integration efforts;**
- work consistently in networks, following a global approach but drawing up tailor-made social and vocational plans with those concerned;**
- have the appropriate evaluation, methodological and communication instruments to**

listen to young people and meet their specific needs;

- **provide sufficiently protracted and continuous follow-up services to prevent failures which can have adverse effects on all concerned.**

The member states should deploy a “supported employment” approach⁸ by:

- **ensuring that account is taken of the various stages in the transition from school to the workplace by arranging for placements, vocational qualification and retraining measures, and further training. Vocational guidance is a key factor and should start a few years before the end of schooling;**
- **ensuring that families are consulted and involved so as to be able to co-ordinate co-operation activities and making sure that the vocational integration process takes account of needs in the areas of housing, mobility and social skills;**
- **ensuring that there is co-operation between training services and social services and the other partners, providing the necessary services to enable young people with**

⁸ See Appendix 2 – Definitions.

disabilities to develop their characters and improve their physical and mental skills;

- **taking steps to secure equal opportunities for young people with disabilities on the labour market by introducing incentive measures for employers, prompting job creation both on the ordinary job market and in the social economy;**
- **supporting and promoting lifelong learning for people with disabilities;**
- **when young people with disabilities have such serious impairments that they cannot work, particular attention should be paid to ensuring that any other activities proposed are suitable, varied and socially rewarding.**

Examples of good practice

A 'return to work' project as assistant agricultural employee was recently launched in the **Netherlands**, for people a long way from the labour market, most of them with a mental disability. A job service, specialised in creating job opportunities for people with disabilities, delivers support and training to persons helping with work on a dairy farm.

The work environment of a dairy farm offers tranquillity, regularity and especially social security. Recurring daily tasks are easy to learn and work with animals often gives a lot of satisfaction. In the experience of the Job Service, dairy farmers often are highly motivated to support and promote this target group. As well as training in employee skills there is attention to possible societal barriers. The focus and the points of development differ for each participant, both in approach and in duration. The job coaches have expertise and a number of them are of agricultural origin. They are closely involved in this project and will provide part of the guidance and training.

Some European countries have been planning ahead the transition from education to post-academic life. Evidence suggests that if this transition is planned, for example three or four years in advance, it may

be more successful. This forward planning permits the motivations of the student to be respected, adequate training provided, and the structures “in the field” to develop a higher degree of responsiveness to the needs of preparation for working life.

In **Finland**, the new Act on Employment Services includes supported employment as one of their regular services. To increase the quality of the employment services a new vocational curriculum for supported employment was set up.

In Helsinki City, the Supported Employment Unit provides services to people of 18 years of age, residents in Helsinki and who have some disability in the autism spectrum such as Asperger syndrome, Attention deficit-hyperactivity disorder (ADHD) and/or dysphasia. The aim is to find a solution for customers leading to full or part-time job opportunities in the open labour market with the help of a Job Coach.

Client’s story from Supported Employment Services in Helsinki

The client has a qualification in cleaning and maintenance. He and his Job Coach from Supported Employment Services already met while the client was studying. The Job Coach suggested a job opportunity with a local department store as a

cleaner and stocking the shelves with different kind of products. The job began as a half-year traineeship. The Job Coach took care of the paper work with the client and with the employer concerning social and supplementary benefits. After six months of training, the client was partly subsidised by the Employment and Economic Development Office.

Now after two years the client needs the Job Coach mainly to support his professional development towards responsible adult life and to maintain the good employment relationship. A small workforce and a magnificent employer have been the most important features of the client's inclusion in real working life.

3. ACTIVE CITIZENSHIP AND PARTICIPATION

Background and challenges

Participation and full and effective inclusion in society, non-discrimination and respect for difference and acceptance of persons with disabilities as part of human diversity and humanity are the basic principles of the UN Convention on the Rights of Persons with Disabilities.

It follows from the Council of Europe Charter on Education for Democratic Citizenship that childhood and adolescence are the key stages of life in which to train young people for maximum autonomy and independence in adulthood. Children and young people with disabilities should therefore be allowed to grow up together with their non-disabled counterparts and be free to make their own choices and express their opinion on any matter concerning them. To exercise these rights they should be given assistance that is in keeping with their needs and their age.

In reality, however, the situation is quite different. Too many children and young people with disabilities in Europe still live in institutions and are separated from their family. Furthermore, many of those who do not live in institutions are not yet present in society and in people's minds. In many

member states, the right to behave as active citizens and to be able to take part in decision-making processes is still very rarely applied to children and young people with disabilities. They still too frequently encounter a whole series of obstacles which prevent them from participating and being recognised as fully-fledged citizens. Almost half (46 %) of all EU citizens consider that individuals are discriminated against on the grounds of disability⁹.

Whereas children and young people with disabilities can still express their opinion and their dissatisfaction, those with severe mental impairments are not able to do so because of their problems in expressing themselves and understanding. Responses to their needs in terms of exercising their rights as full citizens cover a very broad spectrum, ranging from full assistance to autonomy. Support must accordingly be personalised depending on their capabilities and their age.

There is no doubt that a process of deinstitutionalisation intended to involve children and young people with disabilities in the community could significantly contribute to a change in the situation.

⁹ Discrimination in the European Union in 2012 – Eurobarometer.

Action

To this end, member states should:

- **adopt the necessary measures to promote advice and support services for families so that they can continue to take responsibility for bringing up their disabled child;**
- **ensure that everything is done to continue, step up and speed up the transfer of children and young people living in institutions to life in an inclusive environment;**
- **ensure that all social agencies respect the right to citizenship of children and young people with disabilities by allowing them to be full players in society, enhancing their self-confidence and their sense of belonging to this society;**
- **ensure that information is made accessible to children and young people with disabilities by gearing it to their level of communication and understanding so that they can make informed choices about their future and their life plan;**
- **ensure that everything is done so that children and young people with disabilities can express their needs and wishes clearly and play an active role in public and political life, including the right to vote;**

- **take steps to ensure that partners in the cultural, sports and leisure sectors open up and adapt their facilities, which are generally designed for people without disabilities, so that children and young people with disabilities can make use of them;**
- **arrange training so that professionals or volunteers active in youth, culture, sports or recreational movements can acquire the necessary skills to work towards the social inclusion of all young people;**
- **organise awareness-raising programmes for children and young people without disabilities to teach them to live together in a democratic society in which differences are regarded as a source of enrichment.**

Examples of good practice

In **Finland**, persons with severe disabilities needing essential and recurrent assistance in their daily activities at home or outside the home are entitled to personal assistance. Personal assistance is a social service that the municipal authorities are responsible for providing, free of charge for persons with severe disabilities. For young people it provides pathways to independent living, education and work. There are different ways of organising the service, but the most common is that the disabled

person chooses and employs the personal assistant him/herself and is reimbursed by the municipality.

Personal assistance includes everyday activities, work and education, hobbies, social participation and social interaction. The purpose of personal assistance is to help a severely disabled person make his or her own choices both at home and outside the home. Personal assistance must be granted to the extent required. The extent of the person's need must be determined in such a way that the assistance enables a person to live with human dignity. Personal assistance for hobbies, social participation and social interaction must be at least 30 hours per month.

In **Denmark**, accompanying arrangements are provided for children and young people with disabilities to ensure that they get better opportunities to live on an equal footing with other children and young people. Furthermore, it is to ensure that they become more independent of help from their parents. This concerns, for example, access to leisure activities, shopping or going to the cinema without their parents.

During free information sessions on the system, participants will have the opportunity to talk to users, escorts, local social workers, parents of users, people who would like to be companions,

representatives of the municipalities and of the Danish Disability Organisations, or people who otherwise have a professional or personal interest in the accompanying scheme for children and young people between 12 and 18 years with physical or mental disabilities.

The information consist in booklets for young people and others, free after-work meetings on inclusion and the scheme, which aims to support children and young people's active citizenship and participation in society and support for autonomy, etc.

In **Bulgaria**, there is a national strategy for deinstitutionalisation of children in the Republic of Bulgaria 2010–2025 and an action plan for its implementation. Its main goal is to realise a successful model for taking the children out of the big institutions, and it includes setting up new services but mostly relies on the established network of community-based services. The action plan foresees implementation of 5 projects. The first project is “Childhood for everyone” which concerns about 1 800 children aged 3 or over with disabilities living in 24 institutions for children with mental disabilities and 31 medico-social care institutions for children. The main goal of the project is to close about 15 of them by 2014, and it is planned to establish 149 centres of family type in each of which 12 children could live with the support of the

personnel. It is important to change the quality of care by training personnel and also through monthly individual and group supervision. New centres will be established in big towns and provide the opportunity for quality medical, educational and social community service according to a national map of services including new residential and additional services.

4. PROTECTION FROM ABUSE AND ILL-TREATMENT

Context and challenges

In connection with the protection from abuse and ill treatment of children and youth with disabilities, we must first of all think about their rights as children, as regulated in the Convention on the Rights of the Child. Article 19 of this Convention states that the national authority “shall take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child”.

In addition, it is stated that “protective measures should, as appropriate, include effective procedures for the establishment of social programmes to provide necessary support for the child and for those who have the care of the child, as well as for other forms of prevention and for identification, reporting, referral, investigation, treatment and follow-up of instances of child maltreatment described heretofore, and, as appropriate, for judicial involvement”.

Bearing in mind the dimension of disability to be taken into account, the Convention on the Rights of Persons with Disabilities proposes 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. Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities are stipulated. In all actions concerning children with disabilities, the best interest of the child shall be a primary consideration.

There are provisions on liberty and security of person (Art. 14), freedom from torture or cruel, inhuman or degrading treatment or punishment (Art. 15) and freedom from exploitation, violence and abuse (Art. 16). Accordingly, all effective legislative, administrative, judicial or other measures should be taken to prevent persons with disabilities – children and adults –, on an equal basis with others, from being subjected to torture or cruel, inhuman or degrading treatment or punishment, as well as other measures to protect and prevent them, both within and outside the home, from all forms of exploitation, violence and abuse, including their gender-based aspects. It should be taken into account that protection services must be age-, gender- and disability-sensitive.

Actions

- **Promote the adoption, implementation and monitoring of integrated national strategies for the protection of children and young people with different kinds of disabilities from violence and abuse;**
- **Invest in evidence-based policy and programmes guided by the child's best interest to address factors giving rise to violence and to respond effectively when violence occurs;**
- **Establish a multidisciplinary and systematic framework integrated to the national planning process;**
- **Cross-sectorial co-ordination and co-operation among all sectors and local, regional and national authorities and other stakeholders;**
- **Take measures to promote the physical, cognitive and psychological recovery, rehabilitation and social reintegration of persons with disabilities who become victims of any form of exploitation, violence or abuse, by means including the provision of protection services. Such recovery and reintegration shall take place in an environment that fosters the health, welfare, self-respect, dignity and autonomy of the person and takes into account gender- and age-specific needs;**

- **Work within human rights and anti-discriminatory frameworks towards safeguarding people with disabilities against all forms of violence and abuse;**
- **Ensure access for children and young people with disabilities to services and support systems for victims of violence and abuse;**
- **Put in place effective legislation and policies, including women- and child-focused legislation and policies, to ensure that instances of exploitation, violence and abuse against children and young persons with disabilities are identified, investigated and, where appropriate, prosecuted;**
- **Focus policy or strategy on prevention of abuse or bullying of children and young people with disabilities;**
- **Pay special attention to the protection of children and young people with mental disabilities which are generally at greater risk of becoming victims especially in institutions;**
- **Staff employed to provide support or assistance to victims of violence or abuse should be made aware of the specific needs of children and young people with disabilities and should be trained to handle reports of violent incidents;**

- **In the event of violence or abuse, children and young people should be able to obtain immediate and appropriate support, assistance or services, with access, where necessary, to psychological support and health services adapted to their needs or security measures;**
- **Information and awareness-raising programmes on children and young people with disabilities should be undertaken at all levels, targeting the general public, families, their friends and other relatives, professionals, the business community and most importantly political decision makers;**
- **Governments should take measures to make public and private media aware of the need to present positive images of women and girls with disabilities in order to combat stereotypes and prejudices. The same applies to public and private advertising, public relations and marketing.**

According to the Council of Europe Disability Action Plan, specific actions should be implemented:

- **To establish safeguards to protect people with disabilities from violence and abuse through the effective implementation of policies and legislation, where necessary;**

- **To promote the availability of and access to training courses for people with disabilities to reduce the risk of violence and abuse, for example courses in self-confidence and empowerment;**
- **To develop processes, measures and protocols adapted to people with disabilities, to improve detection of violence and abuse, and to ensure that the necessary action is taken against perpetrators, including redress and adequate professional counselling in case of emotional problems;**
- **To ensure that disabled victims of violence and abuse, including domestic, have access to the relevant support services, including redress;**
- **To prevent and combat violence, ill-treatment and abuse in all situations by supporting families, raising public awareness and education, promoting discussion and co-operation among relevant parties;**
- **To support people with disabilities, in particular women, and their families, in situations of abuse through the provision of information and access to services;**
- **To ensure that systems are in place for the protection against abuse of persons with disabilities in psychiatric facilities, social care**

homes and institutions, orphanages and other institutional settings;

- **To ensure that relevant training is provided to all staff working in disability-specific institutional settings and mainstream support services;**
- **To train police and judicial authorities so that they can receive testimony from disabled people and treat instances of abuse seriously;**
- **To provide people with disabilities with information on how to avoid the occurrence of violence and abuse, how to recognise it and how to report it;**
- **To take effective legislative, administrative, judicial or other measures with strong sanctions in a transparent manner and to allow for independent review by civil society in order to prevent all forms of physical or mental violence, injury or abuse, neglect and negligent treatment, maltreatment, exploitation or abduction of people with disabilities;**
- **To implement the relevant provisions included in Recommendation Rec(2002)5 of the Committee of Ministers to member states on the protection of women against violence;**
- **To implement the relevant provisions included in Recommendation No. R (99) 4 of the Committee of Ministers to member states on**

principles concerning the legal protection of incapable adults;

- **To implement Resolution Res AP(2005)1 on safeguarding adults and children with disabilities against abuse and to take account of the relevant complementary report.**

Examples of good practice

People with a disability are particularly at risk of becoming victims of violence and abuse, so that girls and women with disabilities belong to an especially endangered group. Communication impairments are additional risk factors that make it even more difficult to speak about experiences of violence. Since 2006, victims have been entitled to legal support in criminal proceedings, and since 2009 they have also been entitled to psychosocial support in civil proceedings. This support in legal proceedings is provided by various organisations, and the costs are reimbursed by the Ministry of Justice (BMJ) by granting subsidies in **Austria**. Legal and psychosocial support during court proceedings have by now helped numerous people – the majority of them women and children – to cope better with the strain related to the cases. In this course of their training, aspiring judges have to take part in various events on the theme of protection of victims held by officially recognised victim protection organisations. The compulsory training programme includes a two week practical assignment at a facility for the protection of victims or welfare facility to raise the awareness of this issue among all candidates for the profession.

5. CHANGING ATTITUDES AND RAISING AWARENESS

Context and challenges

For some decades, the concept of institutionalisation has bred practices of evicting children and young people with disabilities. A dividing line between people with and without disabilities has entrenched itself in civil societies, bringing with it a certain inhibition, unease and even fears on both sides.

Movements of parents proclaiming their children's right to live in their families with their peers, in the normal social environment, have greatly contributed to rethinking this segregative strategy and have finally led to a change of paradigm. This approach actually provided the basis for such fundamental texts as the Convention on the Rights of the Child (1989), the Standard Rules on the Equalization of Opportunities for Persons with Disabilities (1993), the Convention on the Rights of Persons with Disabilities (2006), and also the Council of Europe Disability Action Plan 2006-2015, which declares the following:

“We have moved from seeing the disabled person as a patient in need of care who does not contribute to society to seeing him/her as a person who needs the present barriers removed in order to take a rightful place as a fully participative

member of society. Such barriers include attitudes and social, legal and environmental barriers. We therefore need to further facilitate the paradigm shift from the old medical model of disability to the social and human rights based model”.

Despite non-discriminatory national legislation in nearly all member states, this paradigm shift has not yet become second nature to the citizens in many member states. Those personally concerned and those close to them testify to obstacles that they regularly encounter in their fight/preoccupation/efforts for an active life in society. Broad strata of society have neither followed nor internalised this new outlook. Too many social representations of disability are still negative. It is therefore important to heighten public awareness so that all citizens realise that some of their attitudes and behaviours prevent children and young people with disabilities from participating in society.

Awareness-raising is needed among all the vital forces of society in order to alter the perception of the Other, so that doors can open more easily and everyday acts truly match the “inclusion” packaging.

Action

To achieve a lasting change of attitudes, member states should:

- **ensure that every effort is made to enable children and young people with disabilities to grow up with their able-bodied peers in all situations of society. It is they who are building the future of society and who will be the players responsible for tomorrow's inclusion policies;**

- **ensure that inquiries and research are conducted to determine how the image of people with disabilities stands in society, as well as the impediments and incentives to social inclusion of children and young people with disabilities, so that targeted programmes can be devised;**

- **promote co-operation with media players in regular programming of radio and TV awareness-raising campaigns on the requisite attitudes and behaviour to encourage the inclusion of children and young people with disabilities;**

- ensure that the staff of the general services intended for society at large are alerted and informed so as to adapt and extend their offers of services in order to accommodate children and young people with disabilities as well;
- ensure that local authorities are primed to make the dimension of including children and young people with disabilities a cross-cutting consideration in all their planning and decisions;
- ensure dissemination of the keys for understanding and action towards fuller appreciation of what a child or young person with a disability is, starting from testimonies by persons concerned pinpointing the obstacles which they meet and the various difficulties (in terms of attitudes or architecture) which detract from their social inclusion;
- promote the selection of examples of good practice in order to stimulate their proliferation and encourage the member states to pool their experience regarding exemplary projects.

To alter society's view and improve the image of children and young people with disabilities, member states should mobilise all players to make

awareness-raising moves, particularly by undertaking to carry out the following actions:

- **issue appeals in order to arrive at a common resolve to make society as a whole participate actively in the process of social inclusion of children and young people with disabilities through seminars, concept groups, training, etc.;**
- **ensure that society is made aware that disability forms part of human diversity and that children and young people with their different needs, their ideas, their abilities, their projects and their dreams represent an asset to our society;**
- **ensure that the presence of children and young people with disabilities in the media and in publications is increased, so that negative representations and prejudice are dispelled and it becomes normal for them to participate actively in everyday life;**
- **ensure that awareness-raising tools (CDs, films, publications, etc.) are made available to teachers and to organisers of youth groups and leisure activities to stimulate discussion and reflection on the importance of social inclusion of children and young people with disabilities;**

- **promote the organisation of simulation sessions for persons not affected by disability, placing them in the situations confronted by persons with disabilities: wheelchair obstacle courses, blindfold, non-speaking and non-hearing activities, role-playing, discussions and encounters with people with disabilities, etc. This enables them to “experience difference at first hand”, giving them a better understanding of the everyday challenges of social inclusion;**

- **ensure that the accomplishments of persons with disabilities in cultural productions (exhibitions, performances) and sports competitions are relayed regularly by the media, on the model of the 2012 London Paralympics, so that society can fully realise their abilities.**

Examples of good practice

A new study from the National Board in **Denmark** shows that targeted training can change children's attitudes to disability.

Targeted education about disabilities is thus a way to make children acquire a more open and nuanced view of what it means to live with a disability. The more differentiated approach to disability is among other things reflected in the fact, that after the course more students want to be friends with another child with a disability and would not mind sitting next to a classmate with disabilities.

In particular, there is a challenge to create an inclusive environment for some people with disabilities, such as learning disabilities, cerebral palsy and children with ADHD. But although some of the children have greater reservations about these disability groups, the study also shows that lessons conducted on disability have changed their view significantly.

In the German-speaking region of **Belgium**, the Inclusion Prize is awarded to originators of projects in the sectors of employment, housing, accessibility and mobility, education, sport and leisure as well as participation under which the inclusion of people with disabilities is exemplary.

Identification of mechanisms in realising human rights for children and youth with disabilities

De facto mechanisms

- External constraints can increase the motivation for change, in this case specifically towards system change: declining enrolment and a situation of competition between schools forces schools to rethink school models

Exemplary mechanisms

- Personal positive experience with inclusive education is a genuine requirement for sustainable change: genuine shift in consciousness best starts from the bottom / with the youngest members of society. If students or children in kindergarten experience in everyday life that it is quite normal to be different, to have different interests and abilities, it will be more likely for them as future parents to vote for and promote inclusive education themselves.
- Widespread promotion of inclusive education is

not only more sustainable, but also helps to minimise stigmatisation.¹⁰ Apart from that, it creates a climate of normality and confidence that inclusive education is feasible.¹¹

- The paradigm shift towards inclusion requires strengthening of systemic perspectives on inclusive education. This is not a question of integrating students with a greater or lesser need for support by providing additional teacher support. Rather, the school has to rethink its use of resources (staff, equipment) so that all students are equally welcome at a school and can learn on an equal basis.¹²
- Change requires long-term perspectives and the participation of all stakeholders.
 - Assistance and support helps children and young people with disabilities to "lead a normal (working) life" and to realise their own interests, desires and goals.

¹⁰ In the stigmatising model, students are "categorised" according to the severity of the disability and need for assistance. Allocation of teacher hours is fixed on that basis.

¹¹ Feelings (of confidence, etc.) de facto play a non-negligible role, so they should not be dismissed easily from an ethical point of view.

¹² This corresponds to the paradigm shift introduced by K. Tomasevski from integration to inclusion (see recommendation CM/Rec(2013)2).

- Transitions will be more successful if they are based on long-term perspectives with all stakeholders being involved (participatory approach). This allows everyone to "adjust" to the situation, reduce prejudices and make realistic and case-sensitive arrangements (reasonable accommodations, accessibility).
- Only if individual support needs are known (through close co-operation with stakeholders) can assistance forms and models jointly be found that allow an increasingly self-determined (working) life. "Personal assistance" is a good and workable model for people with disabilities for their own lives in the realms of the private and the social life to help people with disabilities to be self-determined.
- But individual and individualised support services not only help the child or young person acquire necessary skills, they can also help mediate between the child / young person and their environment.
- Individual life and job prospects of young people with disabilities can be improved if the existing capabilities are creatively harnessed to social or economic needs. Although nowadays resource-oriented individual support can be

regarded as a genuine concern and goal of education, it still seems necessary to apply this paradigm shift to people with disabilities and their disability-related special skills and sensitivities (see for example: AspIT). There seems to be a further need for creative combinations of special skills / sensibilities and existing niches for example in the labour market.

- New legislation, for example to increase equal participation in society for children and youth with disabilities, needs accompanying measures to ensure that the goal of equal participation is achieved not only in form but in fact.
 - States not only have the duty to promote change in social participation opportunities of children and youth with disabilities by law. Formal equality by law is only the first step required for real change.
 - For participation in practice to be improved, there is a need for further measures to ensure that those affected will actually be reached (information) and that they can actually perceive the new opportunities provided (need for assistance).

Contribution by Ms Katja Neuhoff (Germany)

6. CONCLUSION

Social inclusion should be a matter for broad consensus throughout society

In accordance with the aims set out in the definition of social cohesion as “the capacity of a society to ensure the well-being of all its members by minimising disparities, avoiding marginalisation, managing differences and divisions and ensuring the means of achieving welfare for all members”¹³, member states must continue to expend the requisite efforts to prevent any trend towards segregative systems. They must promote an inclusive culture by striving to develop a more open society in which difference is experienced as an enrichment and where all children and young people, without exception, can grow up side by side. This means remembering that each individual is different, that it is vital to take account of the individuality of needs and that each person must find the place that will enable him or her to participate actively in the functioning of society.

Although legislation is required to achieve this, we must endeavour to ensure the actual implementation of legislative measures in everyday life.

¹³ New Strategy and Council of Europe Action Plan for Social Cohesion (2010).

The most relevant factor is obviously high-quality teaching in schools for all children and young people – with or without disabilities –, a type of teaching which respects them, encourages them to develop their potential and enables them gradually to construct their personalities by means of successful learning experiences. Education and support for all students in the same school is a feature common to all top-performing school systems¹⁴. Initial and further training for all teaching, paramedical, psychological and social staff, a determination to include all children and young people, personalisation of educational goals and co-operation with parents are all decisive factors in establishing effective inclusive teaching.

The social inclusion of children and young people with disabilities requires such a major change of attitudes and mentalities in society that it must begin at a very early age in order to have a lasting effect.

Mainstreaming services must open up and adapt in order to be able to meet the needs of all. More specific additional services should be available to families close at hand, including early assistance, support for everyday activities, respite aid, etc.

¹⁴ OECD Programme for International Student Assessment (PISA).

All these services must be provided on the basis of a personalised approach taking account of the individual needs and the resources of the families concerned and of the children and young people with disabilities. Bearing in mind this approach, they should consider as their reference the International Classification of Functioning, Disability and Health (ICF). Beyond vocational and lifelong training, individual support is vital during the family-school and school-employment transition periods. The increasing rate of employment of people with disabilities is a further decisive factor in their social inclusion and participation.

Finally, member states should devise success indicators and establish assessment mechanisms. Examples of good practice should be highlighted and exchanged, while emphasising the potentials of children and young people with disabilities. A large-scale publication presenting the results of the assessments and the degree of inclusion gradually acquired could not only trigger a knock-on effect but also improve the image of persons with disabilities in society.

This societal process requires a broad consensus within which all stakeholders in a given society must co-operate. This challenge must be successfully tackled if we are to build a Europe for and with all children and young people.

APPENDIX 1: LIST OF EXPERTS

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APPENDIX 2: DEFINITIONS

For the purpose of the present report:

“Children” refers to every human being below the age of 18 unless under the law applicable to the child majority is attained earlier in accordance with the definition of the UN Convention on the Rights of the Child under its article 1;¹

“Disability” is an umbrella term for impairments, activity limitations and participation restrictions. It denotes the negative aspects of the interaction between an individual (with a health condition) and that individual's contextual factors (environmental and personal factors);²

“Early Intervention” can be defined in all forms of child-oriented training activities and parent-oriented guidance activities which are implemented in direct and immediate consequence of the identification of the developmental condition. Early Intervention pertains to the child as well as to the parents, the family and the broader network. Early intervention for children at risk or with developmental

¹ UN Convention on the Rights of the Child (1989).

² WHO International classification of functioning, disability and health: ICF (2001).

disabilities constitutes a process and entails several phases. These phases are identification, detection, diagnosis, training and guidance. Although these phases are listed here in their logical order, in practice they intersect and merge with each other and are not clearly distinguishable;³

“Empowerment” refers to the process of increasing personal, interpersonal, or political power so that individuals, families and communities can take action to improve their situations;⁴

By “inclusive competence” we mean the capacities required in order to act at the level of both the persons involved and their environment:

1) Accompanying, supporting, developing and preparing disabled persons for active participation in the life of society (empowerment), that is to say:

- Detecting and reinforcing their aptitudes, capacities and interests
- Assessing their needs in terms of aid and support

³ Early intervention for children with developmental disabilities: manifesto of the Euryaid working party (1993).

⁴ McCubbin & Cohen: Empowering Practice in Mental Health Social Work (Gutiérrez (1992)).

- Identifying the level and means of communication
- Understanding and respecting their wishes and expectations
- Helping them devise their own life projects
- Supporting them in exercising their rights and duties as citizens
- Accessing the resources available in their immediate environment

2) Advising those responsible on the obstacles and barriers to be eliminated and the necessary adjustments to activities and services to ensure that persons with disabilities can enjoy them in the same way as everyone else. Helping correct the image of disabled persons in society by spotlighting their aptitudes and the rewarding aspects of difference;⁵

“Inclusive education” inclusion in education is seen as a process of addressing and responding to the diversity of needs of all learners through increasing participation in learning, cultures and communities and reducing exclusion within and from education. It involves changes and modifications in content, approaches, structures and strategies, with a common vision which covers all children and young people and a conviction

⁵ Helmut HEINEN, Consultant, author of the Report.

that it is the responsibility of the regular system to educate all children and young people;⁶

“Inclusive society” is a society for all in which every individual, each with rights and responsibilities, has an opportunity to participate fully in its life;⁷

“Mainstreaming” means the (re)organisation, improvement, development and evaluation of policy processes, so that a disability perspective is incorporated in all policies at all levels and at all stages, by the actors normally involved in policy-making. In concrete terms, this implies that the needs, interests, competence and skills of people with disabilities are taken into account;⁸

“Persons with disabilities” include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others;⁹

⁶ UNESCO Policy Guidelines on Inclusive Education (2009).

⁷ The World Summit for Social Development (Copenhagen 1995).

⁸ Message of the Committee of Ministers to Steering Committees of the Council of Europe on Gender Mainstreaming (1998).

⁹ UN Convention on the Rights of Persons with Disabilities (2006).

“Reasonable accommodation” means necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to secure to persons with disabilities the enjoyment or exercise on equal terms with others of all human rights and fundamental freedoms;¹⁰

“Services of general interest” cover market and non-market services which the public authorities class as being of general interest and subject to specific public service obligations;¹¹

“Social cohesion” is the capacity of a society to ensure the well-being of all its members – minimising disparities and avoiding marginalisation – to manage differences and divisions and ensure the means of achieving welfare for all members;¹²

“Social inclusion” is the process by which efforts are made to ensure equal opportunities - that everyone, regardless of their background, can achieve their full potential in life. It is a multi-dimensional process aimed at creating conditions which enable full and active participation of every

¹⁰ UN Convention on the Rights of Persons with Disabilities (2006).

¹¹ Communication of the Commission of the European Communities Services of General Interest in Europe COM(2000) 580 final.

¹² New Strategy and Council of Europe Action Plan for Social Cohesion (2010).

member of the society in all aspects of life, including civic, social, economic and political activities, as well as participation in decision-making process;¹³

“Social services of general interest” include:

- health services;**
- statutory and complementary social security schemes, organised in various ways (mutual or occupational organisations), covering the main risks of life, such as those linked to health, ageing, occupational accidents, unemployment, retirement and disability;**
- other essential services provided directly to the person. These services that play a preventive and social cohesion role consist of customised assistance to facilitate social inclusion and safeguard fundamental rights. They comprise, first of all, assistance for persons faced by personal challenges or crises (such as debt, unemployment, drug addiction or family breakdown). Secondly, they include activities to ensure that the persons concerned are able to reintegrate fully into society (rehabilitation, language training for immigrants) and, in particular, the labour market (occupational**

¹³ Working definition from UN E-Dialogue 'Creating an Inclusive Society: Practical Strategies to Promote Social Integration' webpage accessed on 19/03/13

www.un.org/esa/socdev/sib/inclusive_society/social%20inclusion.html

training and reintegration). These services complement and support the role of families in caring for the youngest and oldest members of society in particular. Thirdly, these services include activities to integrate persons with long-term health or disability problems. Fourthly, they also include social housing, providing housing for disadvantaged citizens or socially less advantaged groups. Certain services can obviously include all of these four dimensions;¹⁴

“Stakeholder” can be a person, a group, or an organisation that may be affected, or have any kind interest in the project or in project’s outcome either directly or indirectly;¹⁵

“Supported Employment” is a method of working with disabled people and other disadvantaged groups to access and maintain paid employment in the open labour market. This method of working is a proactive policy in accordance with the United Nations Convention on the Rights of People with Disabilities. Supported Employment is altogether consistent with the concepts of empowerment, social inclusion, dignity and respect for individuals. Within Europe, agreement has been reached on

¹⁴ Communication from the Commission: Implementing the Community Lisbon programme: Social services of general interest in the European Union Brussels, 26 April 2006 COM (2006) 177 final.

¹⁵ Eric Bloemkolk, SOFT Tulip, expert in the Drafting Group.

the values and principles that should be present at all Supported Employment stages and activities and adhere to full citizenship rights of individuals;¹⁶

“Universal design” is a strategy, which aims to make the design and composition of different environments and products accessible and understandable to, as well as usable by, everyone, to the greatest extent in the most independent and natural manner possible, without the need for adaptation or specialised design solutions;¹⁷

“Young people” are persons between the ages of 15 and 24 on the understanding that youth is a constantly evolving heterogeneous group and that the experience of ‘being young’ varies enormously across regions and within countries.¹⁸

¹⁶ European Union of Supported Employment – Information Booklet and Quality Standards (2005).

¹⁷ Resolution ResAP(2001)1 on the introduction of the principles of universal design into the curricula of all occupations working on the built environment.

¹⁸ UNESCO webpage accessed on 19/03/13 (www.unesco.org/new/en/social-and-human-sciences/themes/youth/).

APPENDIX 3: LIST OF REFERENCE TEXTS/BIBLIOGRAPHY

1. Legal Instruments

1.1. Council of Europe Treaties

- **Convention for the Protection of Human Rights and Fundamental Freedoms (ETS No. 5)**
- **Protocol to the Convention for the Protection of Human Rights and Fundamental Freedoms (ETS No. 9)**
- **European Social Charter (ETS No. 35)**
- **Additional Protocol to the European Social Charter (ETS No. 158)**
- **European Convention on the Exercise of Children's Rights (ETS No. 160)**
- **Revised European Social Charter (ETS No. 163)**

1.1.1. Committee of Ministers Recommendations

- **Recommendation R(92)6 on a coherent policy for people with disabilities**
- **Recommendation No. R(98)3 on the access to higher education**
- **Recommendation Rec(2002)8 on child day-care**
- **Recommendation Rec(2003)6 on improving physical education and sport for children and young people in all European countries**

- **Recommendation Rec(2004)10 concerning the protection of the human rights and dignity of persons with mental disorder**
- **Recommendation Rec(2005)5 on the rights of children living in residential institutions**
- **Recommendation Rec(2006)5 on the Council of Europe Action Plan to promote the rights and full participation of people with disabilities in society: improving the quality of life of people with disabilities in Europe 2006-2015**
- **Recommendation Rec(2006)12 on empowering children in the new information and communications environment**
- **Recommendation Rec(2006)19 on policy to support positive parenting**
- **Recommendation CM/Rec(2007)6 on the public responsibility for higher education and research**
- **Recommendation CM/Rec(2007)13 on gender mainstreaming in education**
- **Recommendation CM/Rec(2009)3 on monitoring the protection of human rights and dignity of persons with mental disorder**
- **Recommendation CM/Rec(2009)8 on achieving full participation through Universal Design**
- **Recommendation CM/Rec(2009)9 on the education and social inclusion of children and young people with autism spectrum disorders**
- **Recommendation CM/Rec(2009)10 on integrated national strategies for the protection of children from violence**

- **Recommendation CM/Rec(2010)2 on deinstitutionalisation and community living of children with disabilities**
- **Recommendation CM/Rec(2011)12 on children's rights and social services friendly to children and families**
- **Recommendation CM/Rec(2012)2 on the participation of children and young people under the age of 18**
- **Recommendation CM/Rec(2012)6 on the protection and promotion of the rights of women and girls with disabilities**
- **Recommendation CM/Rec(2013)2 on ensuring full inclusion of children and young persons with disabilities into society**

1.1.2. Parliamentary Assembly of the Council of Europe (PACE)

- **Recommendation 1592 (2003), Report Doc. 9632 (2002) and Addendum Doc. 9632 (2003) entitled "Towards full social inclusion of persons with disabilities"**
- **Recommendations 1601 (2003) on "Improving the lot of abandoned children in institutions"**
- **Recommendation 1666 (2004) on "Europe-wide ban on corporal punishment of children"**
- **Recommendation 1698 (2005) and Report Doc. 10452 (2005) on "The rights of children in institutions: follow-up to Recommendation 1601 (2003)"**

- **Resolution 1642 (2009), Recommendation 1854 (2009) and Report Doc. 11694 (2008)** on “Access to rights for people with disabilities and their full and active participation in society”
- **Recommendation 1864 (2009)** on “Promoting the participation by children in decisions affecting them”
- **Resolution 1761 (2010) and Recommendation 1938 (2010)** on “Guaranteeing the right to education for children with illnesses or disabilities”
- **Resolution 1828 (2011)** on “Reversing the sharp decline in youth employment”
- **Resolution 1834 (2011) and Recommendation 1980 (2011)** on “Combating “child abuse images” through committed, transversal and internationally co-ordinated action”
- **Resolution 1852 (2011)** on “Psychological violence”
- **Resolution 1904 (2012)** on “The right to freedom of choice in education in Europe”

1.1.3. Congress of Local and Regional Authorities of the Council of Europe

- **Resolution 153 (2003) and Recommendation 129 (2003)** on “Employment and vulnerable groups”
- **Resolution 227 (2007) and Recommendation 208 (2007)** on “Access to public spaces and amenities for people with disabilities”

- **Resolution 289 (2009) and Recommendation 272 (2009) on “Preventing violence against children”**

1.2. United Nations

- **Convention on the Rights of the Child (1989)**
- **Standard Rules on the Equalisation of Opportunities for Persons with Disabilities (1993)**
- **The Salamanca Statement and Framework for Action on Special Needs Education (1994)**
- **Convention on the Rights of Persons with Disabilities (2006)**

1.2.1 World Health Organization

- **International Classification of Functioning, Disability and Health (ICF) (2001)**
- **International Classification of Diseases (ICD-10) (2010)**

2. Strategies of the Council of Europe and other documents

- **New Strategy and Council of Europe Action Plan for Social Cohesion (2010)**
- **Council of Europe Strategy for the Rights of the Child (2012-2015)**

- **Malaga Ministerial Declaration on People with disabilities** “Progressing towards full participation as citizens”, **Appendix 1 of CM(2003)114**

3. Publications of the Council of Europe

3.1. Education

DOMINO – A manual to use peer group education as a means to fight racism, xenophobia, anti-semitism and intolerance (2004)

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Companion – A campaign guide about education and learning for change in diversity, human rights and participation, Council of Europe Publishing (2008)

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A Council of Europe policy review, Child and youth participation in the Slovak Republic (2012)

Activity Report 2011 – European Committee of Social Rights, Council of Europe Publishing (2012)

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The work in the field of disability policies is central to the Council of Europe's action to promote the human rights of all the citizens of the "Europe of the 47".

The present report concerns the situation of children and young people with disabilities. It endeavours to highlight the challenges to be taken up and the political decisions required to remove the systemic barriers and counter the negative attitudes and social exclusion which prevent children and young people with disabilities from developing their potential, improving their quality of life and participating in social life. The Council of Europe is publishing this report in pursuit of its goal of constructing tolerant societies without obstacles to citizenship for all and with all, including all children and young people, notably those with disabilities.

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