Information communication technology and other adjustments for disabled people
Tinto, Level 0

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<td>Apple and Accessibility: Building technology to support special needs, A051</td>
<td>Sarah Herrlinger, Senior Manager, Global Accessibility Policy and Initiatives, Apple Inc., USA</td>
<td>For more than 25 years, Apple has provided new and innovative solutions for persons with disabilities, allowing them to access and enjoy using the Mac, iPhone, iPad and other Apple technology. Apple includes groundbreaking assistive technology in its products, as standard features, at no additional cost. Find out more about how Apple’s award winning technology is changing the way people live their lives.</td>
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<td>The ICT capacity building project directed to eradicating poverty, inequalities, and creating quality employment, A096</td>
<td>Myung-hwa Yoo, Secretary General, Korean Society for Rehabilitation of Persons with Disabilities(KSRPD)/Asia and Pacific Disability Forum(APDF), South Korea</td>
<td>Disability, IT and decent jobs This presentation shows the outcome of the inclusive and sustainable capacity building project in place since 2013 as a part of the 10-year plan to solve the digital divide and create quality jobs for persons with disabilities in Asia and Pacific region. At this moment, the world is suffering from serious inequality problems of persons with disabilities such as poverty, unemployment and in education. According to the World Report on disability by World Health Organization (WHO), the core problem that aggravates the inequality of persons with disabilities is serious digital divide. More importantly, serious digital divide has led to longstanding inequality, lack of employment opportunities, and poverty that passes on to the generations to come. We are operating comprehensive and sustainable Capacity Building Project that seeks to address the problems of poverty, inequalities and lack of decent jobs that people with disabilities in the world face. The project called Global ICT Challenge is to achieve and support SDGs goal 4, 7, 9. This project is not an one-off, but rather a repeatable and outlined process for youths with disabilities. The project consists of three major steps. The first step is education. We provide e-Learning education for youths with disabilities who have limited access to information technology. Second, we evaluate the effectiveness of this education in each country by holding international IT paralympiad where youths with disabilities from different countries are invited to compete. These youths are selected through domestic competition in each country. Lastly, we establish an IT center and provide support for managing IT classes, facilitating employment and assisting start-ups in the host country of IT paralympiad. The establishment of IT center has been conducted as three-year plan and the results have been very promising.</td>
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<td>Access to Work providing financial support for disabled people in employment, A144</td>
<td>Stuart Edwards Access to Work Strategy Lead, Department for Work and Pensions, England</td>
<td>There is no set amount for an Access to Work grant. How much you get depends on your circumstances. The money can pay for things like: adaptations to the equipment you use special equipment fares to work if you can’t use public transport a support worker or job coach to help you in your workplace a support service if you have a mental health condition and you’re absent from work or finding it difficult to work disability awareness training for your colleagues a communicator at a job interview the cost of moving your equipment if you change location or job</td>
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<td>Disabled Living Foundation providing equipment for employment, A145</td>
<td>Ed Mylles, Interim Director, Disabled Living Foundation, England</td>
<td>The Disabled Living Foundation (DLF) is a national charity which provides impartial advice and information about equipment/assistive technology designed to enable older and disabled people to live more independently. Services offered by DLF include the following: Helpline. Equipment Demonstration Centre. Factsheets. DLF Data – largest independent knowledge base of AT in Europe for healthcare professionals. Living Made Easy - impartial advice and information website with over 10,000 products listed. AskSARA - online self-help guide. You’reable - online community. Loan library of simple electronic equipment aids.</td>
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| Consequences of demographic change on rehabilitation in German Pension Insurance, A041 | Uwe Egner, Vice-director in the Department of Rehabilitation, German Federal Pension Insurance, Germany | **Background**
The system of social security is facing the challenge to improve the work capacity of older employees in order to compensate for the decreasing number of younger employees and its consequences. Rehabilitation of German Federal Pension Insurance (GFPI) has to maintain the employability of insured employees over a longer period, and therefore focuses on older rehabilitees and their needs to reduce the risk of early retirement pension claims.  

**Methods**
We analyzed routine data of rehabilitation and routine data of early retirement pension claims over a period of 10 years. In addition, we used secondary data collected through the routine survey of rehabilitees.  

**Results**
The analysis of survey data indicates that on the one hand, only one quarter of surveyed rehabilitees in their fifties believe that occupational elements of medical rehabilitation are helpful. On the other hand, the share of rehabilitees over fifty receiving work-related support during the medical rehabilitation is lower than the share of rehabilitees under fifty.  

The analysis of payment contributions after medical rehabilitation shows that only 68% of rehabilitees in their fifties pay continuous contributions to the pension insurance system compared to 75% of people between 30 and 49. A further analysis reveals that the amount and type of payment contributions can be used as predictors for early retirement. A risk index can be created to predict the individual risk of early retirement.  

**Conclusion**
GFPI has to identify insured persons with high probability of early retirement in a systematic way and intervene as early as possible in order to avoid payments for early retirement pensions. It is necessary to offer sufficient treatment concepts of rehabilitation for older people, aiming at return to work. Workplace orientated therapy has to be intensified, especially for people over 50 to maintain the employability of this age group.  

| The AUVA return to work strategy and model, A003 | Dominique Dressler, Head, International Relations, Austrian Workers' Compensation Board (AUVA), Austria | **Introduction**
The AUVA (Austrian Workers’ Compensation Board) has since its creation over 125 years ago provided a gradually improving development of a comprehensive return to work strategy and model.  

**Description**
The AUVA RTW model is encompassing: it reaches from prevention of occupational accidents and diseases, through efficient first aid, post-accident medical treatment in specialized trauma hospitals and if necessary rehabilitation in specialized rehabilitation centers, all the way to tailor-made individual RTW interventions if and where necessary. For these, 2 main options are first considered:  

- **a)** Return to the previous workplace and possibly previous job possible, for instance with financial support to the employers, internal or external requalification, mobility support or adaptations, or  

- **b)** When return to the previous workplace is not possible, what training/retraining measures are possible with financial support, adaptations, mobility support, etc.?  

**Conclusion/Recommendation**
The AUVA model is highly successful. With all the above steps, of 450 persons requiring in-patient treatment at a hospital after an accident at work, only 1 person will not be able to return to work.  

| How thinking differently about accessibility can be good for society and good for business, A138 | Elaine Draper, Director, accessibility and inclusion Barclays UK, England | **How Do It?** is a simple idea with revolutionary impact.  
Barclays have an ambition to become the most accessible & inclusive company in the FTSE 100, this is not only because it is the right thing to do, but because it makes good commercial sense. Like many organisations, we have a long history of respecting and implementing legal frameworks such as DDA. However in recent years we have fundamentally changed the way we think about accessibility, actively seeking out new and innovative ways to remove historical barriers and allow ease of access to all - when you build for more complex needs, you often find solutions that make it easier for everyone!  
We are still on a journey and there is a lot more that we want to achieve and do, but we have already learnt a lot:  
- how to leverage digital technology to eliminate historic barriers  
- how focusing on accessibility can drive not only closer engagement with customers, but also unlock a passion and commitment in our colleagues  
- innovations that we have implemented include; introduction of high visibility debit cards for customers with visual impairments; development of a secure app to enable instant BSL interpretation via iPad in our branches; money skills training & support for young people with learning difficulties; fully accessible pan disability digital training; accessibility training for our colleagues  
To deliver a true step change for people with disabilities we need government, private and third sectors working in partnership, sharing aspirations, learning and solutions. We have seen over the last few years that by sharing our story, learning from others and collaborating on initiatives with external partners, we can create a template and momentum for others in the private sector - showing that equitable access for all is good for individuals, business and society.  

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World of work  
Moorfoot, Level 0
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<td>The transition from school to work of young adults with disabilities in</td>
<td>Nancy Reims, Senior Researcher, Institute for Employment Research, Germany</td>
<td>Due to a disadvantaged societal position, young adults with disabilities can take advantage of programmes of occupational rehabilitation (OR) to manage the critical transition from school to work. It remains unclear if and for whom OR provides an institutional bridge into employment or if young disabled people follow misleading pathways away from employment. Based on administrative data of the German Federal Employment Agency, the study observes young people in OR who finished lower or medium secondary schooling in 2008 and took part in vocational counselling in the same year. The data contains detailed information on schooling, labour market programmes and employment biographies, as well as sociodemographic and disability-specific information. Using sequence analysis and an observation period of 5.5 years, the transition period between school, OR and labour market integration can be observed. By applying optimal matching and cluster analysis (ward method), the population is grouped into seven types of promotion biographies. The results suggest that a large part of young adults with disabilities are promoted by the company-internal, as well as company-external vocational training, often leading into employment. However, one third of the population is divided into two groups not showing any vocational training during the first five years after schooling. For one part, those young people take part in many different measures with no obvious integration strategy mostly leading into unemployment. On average, they often completed a special school and frequently finish OR early due to a lack in cooperation. For another part, a cluster can be identified that is characterized by longer periods of data gaps. In comparison, this cluster contains more women and more people with psychological disabilities than other clusters. Gaps might represent periods of child rearing, sickness absences without benefit receipt, as well as full-time vocational school training often preferred by women.</td>
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<td>occupational rehabilitation, A016</td>
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<td>A Study on Applying Intensive Interaction Approach on Adults with Severe</td>
<td>LAI Lai-lai, Lily, Service Manager, Fu Hong Society, Hong Kong</td>
<td>Intensive Interaction has been a practical approach to facilitate the development of communication abilities to children and adults with severe and multiple learning difficulties. Fu Hong Society (FHS) is a service provider supporting adults with intellectual disabilities. Most of the service users are lack of communication abilities, and a few of them even avoid any contact with others which completely blocks their participation in daily activities. In 2009, FHS started the Intensive Interaction pilot study on adults with severe intellectual disabilities and ASD. Two cases had been followed for four months. Using structural experience sharing and analysis of video tapes, we found that the subjects had considerable increase in eye contacts. When being engaged to play, they would move closer to the workers. It indicated that trustful relationship had been established. Moreover, they were generally more socially responsive and enjoyable in communication with others. The second phase of Intensive Interaction study was carried out in 2010. By creating a responsive environment, four adults with severe and multiple learning difficulties displayed positive improvement in communications abilities. Their attention span was comparatively longer, and they became more sociable as there was more frequent display of non-verbal behaviors. Since then, Intensive Interaction approach was extended to all day training centers of FHS in 2015. The purpose of this paper is to draw the experiences and lessons learnt on the implementation of Intensive Interaction approach in FHS, and discuss how continuous improvement strategy was developed, and the implication of the case findings for future study.</td>
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<td>Intellectual Disabilities and ASD, A095</td>
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<td>This paper shows the persistence of differences treatment in education</td>
<td>Eko Budiamatdjo, Statistician, BPS Statistics, Indonesia</td>
<td>No one left behind' targeted to the whole field of development, including the field of education. Education has included highly developed because UNESCO has set the target of education for all (EFA), which has also been incorporated into the MDG's. EFA has been set for a long time by UNESCO, but still found a group of people who are not in school. That populations include internally displaced persons, ethnic minorities, disabled persons, and so on which are the ones hard to reach. Groups of disabled persons not only from the community but also the age group of disabled persons, namely children, youth, and elderly included there in may be classified on gender is male and female. This paper aims to show the persistence of differences of treatment in education experienced by children (girls) with disabilities. Children (girls) are categorized as groups of people who are vulnerable to the treatment received from adults, society and the environment. Especially if the children were as well as persons with disabilities. In Indonesia, in 2015, net enrollment rate in primary school was around 96.70 percent, secondary school about 77.82 percent, and high school around 59.71 percent. These figures shows not all children are educated according to age. These children probably is earlier to school or late to school. There are still children in Indonesia who have not acquired the rights to attend school due to the remote location of the school, poverty, and disability. Many paper linking ou</td>
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<td>experienced by girls with disabilities, A113</td>
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<td>Bringing Disability Leadership to the Forefront: The Calibre Leadership</td>
<td>Leyla Okhaid, Head of the Centre for Diversity and Inclusion, Imperial</td>
<td>The topic of &quot;Authentic Leadership&quot; is one that is written and spoken about at great length. There have been over 1000 studies in an attempt to determine the definitive styles, characteristics, or personality traits of great leaders. However, when discussing leadership in a conventional context; disabled leadership is all too often forgotten about, often viewed as an aspect of a person that is to be put to one side. The medical model preferred to that of the social model. Many disabled employees, to overcome the unique barriers they face in the workplace, utilise skills that are thought essential for leadership. Yet, many disabled people find the term 'leader' daunting, and struggle to apply it to themselves. Disabled leadership is a topic that has been championed in the UK by disability rights organisations, in order to go beyond disability and towards an inclusive society. However, the concept of inclusive society has not been embraced and embedded fully in the workplace. In an attempt to address this disparity, Imperial College London runs a leadership programme for disabled staff entitled Calibre, and has done so for four years. The programme enabled a safe space for discussion and for unique leadership strategies to be explored. The results were clear, given the time, space and directive support the participants blossomed into leaders in their own right. As all organisations consider leadership for the twenty first century, it is essential that as a part of authentic leadership, disabled employees' needs are not only met; but they are given the development they need to flourish in the workplace. This will enable them to become the leaders that they are and that they are entitled to be.</td>
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<td>Programme, A012</td>
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### Presentation: Ripples in the Water, a Norwegian Project for employing people with a disability, A015

**Presenter:** Alf Åge Lenne, Head of Department of Labour Policy in Confederation of Norwegian Enterprise, Confederation of Norwegian Enterprise/Businesses, Norway

**Content:**
The Confederation of Norwegian Enterprise (NHO) has a membership base of more than 23000 members and is Norway's main employers' organisation. Since its initiation in 2012, Ripples in the water has resulted in 1200-1400 job-seekers with disabilities being hired by NHO-companies on a yearly basis, with a steady yearly increase in the number hired. A methodology has been developed to ensure that job-seekers meet necessary requirements set by employers. Ripples in the water can also be an integral part of a company's CSR-strategy.

Ripples in the water has recently been exported to Hungary, where the Corvinus University in Budapest has developed a training programme for companies in CSR, as well as courses for students. The results of the Hungarian project will be made available in English.

### Presentation: National Grid’s inspirational EmployAbility program with an intern telling his life changing story, A037

**Presenter:** Mark Pickles, Co-founder, EmployAbility, Let’s Work Together, National Grid, England

**Content:**
Since National Grid and Round Oak Special School launched ‘EmployAbility, Let’s Work Together’ in 2013, our programme has changed lives. We provide supported internships to students with learning disabilities helping them to achieve paid employment and fulfill their lifetime ambitions. Historically these students are left out of the labour market; UK government data shows that only 8% of these students will achieve paid employment. Our success rate is 60-70%.

The programme is truly transformational. Students assimilate to their new surroundings and start to ‘walk taller’. They fulfill roles with the support of job coaches and realise the value they can add. This increases their self-confidence and they develop their social, communication and business skills. At the end of the programme they have self-belief, confidence and are ‘job ready’. This benefits businesses, the economy, families and communities.

We have expanded our programme to partner with 8 special schools / colleges close to 4 of our offices. This enables us to provide opportunities for 24 students a year. EmployAbility has very positive impacts on our organisation culture. Our experience is that colleagues with disabilities add real value and, having often overcome significant barriers in their personal life, demonstrate perseverance to manage challenges in the business environment. It is changing the way we feel and act about disability and inspires colleagues.

National Grid is extensively promoting EmployAbility to inspire external businesses to follow. Some are starting their own programmes. We are not content to change tens of lives. Our ambition is to change hundreds and thousands.

Our proposal for the World Congress is for one of our interns to tell his life story - starting with being diagnosed with meningitis, the challenges he faced with slow development and how EmployAbility has changed his life. A senior manager will tell how we made this a reality and how others can too.

### Presentation: We build disability-smart organisations to improve business performance by increasing confidence, accessibility and profitability, A146

**Presenter:** George Selvanera, Strategy & External Affairs Director, Business Disability Forum, England

**Content:**
Our purpose
We build disability-smart organisations to improve business performance by increasing confidence, accessibility, productivity and profitability.

What we do
We do this by bringing together business people, disabled opinion leaders and government to understand what needs to change if disabled people are to be treated fairly so that they can contribute to business success, to society and to economic growth.

Business Disability Forum is a not-for-profit member organisation that makes it easier and more rewarding to do business with and employ disabled people.

We have more than twenty years experience of working with public and private sector organisations, formerly as the Employers’ Forum on Disability. Our members employ almost 20% of the UK workforce and, together, we seek to remove the barriers between public and private organisations and disabled people. We are a key stakeholder for both business and government. We have contributed to the establishment and development of meaningful disability discrimination legislation in the UK.

Business Disability Forum provides pragmatic support by sharing expertise, giving advice, providing training and facilitating networking opportunities. This helps organisations become fully accessible to disabled customers and employees.

Up-streaming healthy work conversations in routine health and social care practice to facilitate and promote work participation, A163

**Presenter:** Christine Parker & Rachel Martin, Senior Lecturers, University of Salford, England

**Content:**
“Early intervention for those who develop a health condition should be provided by healthcare professionals who increasingly see retention in or return to work as a key outcome in the treatment and care of working age people” (Black, 2008). However, research suggests inconsistencies in tackling work issues in routine health and social care and a mismatch between attitudes, beliefs and behaviours of service users and practitioners in regard to who should start the conversation about work and what they should do once the topic has been raised. Practitioners who do raise the work question appear to be unsure how they might effectively engage with the workplace to support the individual back to work: including concerns around confidentiality, specialism and scope of practice.

Health Education North West, through the Greater Manchester Public Health Network (GMPHN), commissioned a team from the University of Salford to develop and deliver a training programme for frontline health and social care practitioners including: Allied Health Professionals; Psychological Wellbeing Practitioners; Audiologists; Podiatrists; Ophthalmologists; Counsellors; Health Trainers; Support Assistants; and a hospital Chaplain. Participants came from public, private and third sector organisations. A total of 185 practitioners (12 cohorts) attended the training aimed at raising awareness of work as an important health outcome and developing knowledge and skills to support service users to stay in/ return to work with/following a health problem, using a stepped model of practice that starts with ‘sowing the seed’ and having Healthy Work Conversations (HWCs) upstream in routine practice.

The project was initially evaluated using pre and post questionnaires and a follow up survey online, to assess changes in awareness, knowledge and confidence in applying the HWCs model in practice. A further follow up study using focus groups and telephone interviews is currently in progress to identify potential progress in this area: looking at the perspectives of practitioners who attended the training around the practicalities of going on to apply HWCs in their own context.
The presentation shows research results of the evaluation of the German BGG Legislation, A039

Felix Welti, Chair for Social and Health Law, Rehabilitation and Disability Law, Universität Kassel, Germany

I. Purpose
The German federal law of equal treatment of disabled persons (Behindertengleichstellungsgesetz des Bundes, BGG) came into effect in 2002. An evaluation of this law was required by the national plan of action for the implementation of the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and was published by Welti et al. in 2014.

II. Methods
Jurisprudential analyses in combination with surveys where used for this research. In its socio-scientific research approach, the evaluation team performed a survey among government agencies dealing with the BGG. Organizations of disabled people and disabled employees of the government agencies were also included in the research approach. Legally, the evaluation has focused on the legal questions arising from the data provided by the social science research done in advance and has taken CRPD in account. Both legal literature and relevant case-law of German Courts as well as the ECJ have been analysed.

III. Implications
The council for disabled employees of companies and government agencies is an obligatory part of German industrial relations. It supports the enforcements of rights of disabled employees.

Our research shows that the council for disabled employees takes significant responsibility for the implementation of the BGG and it is also expected to do so.

Furthermore the survey revealed that the councils for disabled employees are also responsible for the implementation of accessibility in government agencies. It showed that in most cases government agencies and councils for disabled employees in the planning process of accessibility projects. Here workplace accessibility and accessibility for the public overlap.

However councils for disabled employees face restricted resources to meet these responsibilities and have legally only an uncertain mandate.

Action is needed to define specific functions of councils for disabled employees in regard to the BGG and accessibility strategy.

New approaches to rehabilitation
Ochil, Level +1

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| Return to work in Germany: Disability Management offers possibilities to reach this target, A048 | Oliver Fröhike, Head of unit disability management, German Social Accident Insurance, Germany | The obligation to offer a return to work program for sick and injured employees, which is required by German law, is globally unparalleled. Its goal is to overcome the inability to work and to secure the workplace in the long run.

The training as a Certified Disability Management Professional – (CDMP), developed in Canada, provides guidance for meeting the statutory requirements in Germany. It conveys competencies that enable the participating actors to reintegrate employees which have been absent from the workplace for a long time ("more than xx weeks?).

Besides competencies in the field of medicine, psychology, prevention and workplace design the training also conveys the required communicational skills, which enable the participants to negotiate appropriately with all involved stakeholders.

The standardized Disability Management education as well as the balanced and mandatory advanced training concept subsequent to the exam ensure an appropriate implementation of the statutory requirements. |

| Voluntary work in organizations and associations - presentation of research results, A098 | Jouni Puimalainen, Researcher, Finnish Central Association for Mental Health / Rehabilitation Foundation, Finland | In recent years has the research on organizations or in organizations been of growing interest. What kind of research should be done and how and what kind of connection this research have to academic research?

Eleven organizations working for persons with substance abuse or mental health problems started a 4-year research program in 2015. When planning the program main priorities were strengthening co-operation and research knowledge in organizations, supporting development of organizations by research and focusing research on topics of mutual interest.

Program is divided into three subprograms: 1) research on organizations’ actions, 2) research on needs of those citizens that are reached by the organizations and 3) research on persons who do voluntary work or peer work or work as experts of experience in the organizations.

Main aim of the third subprogram is to examine critically concepts of voluntary work, peer and expert by experience. The aim is also to examine their background, how they are applied and what are the results of the action.

As a one part of the program a questionnaire survey was conducted in May – June 2016. Electronic questionnaires were directed to the personnel of organizations and to those working voluntarily and also to peers and experts by experience.

In questionnaires the personnel is asked e.g. how important to the organization is the voluntary work or peer work or work of experts of experience, are they rewarded somehow, is there work guidance for them and how the work of them should be developed.

As for the voluntaries, peers and expert by experience, they are asked e.g. what kind of work they do, why they want to do it, how is the personnel reacting to them and how they would develop their work. |
Collaboration of OTS and PRM physicians in support of persons with disability, Czech and European experience, A129

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<td>Jiri Votava, MD, Assoc. Prof, National Secretary of RI, Czech National Council of Persons with Disability, Czech Republic</td>
<td>Czech physicians participated on the development of OT study in Prague in 90ties. They both also collaborate with organization of persons with disability (PwD), which became more active in 90ties. Till now physicians support OT development by several ways: through collaboration with Czech OT Association, in Czech Society of Rehabilitation and Physical Medicine (SRPM), Czech delegates in European Section of Physical and Rehabilitation Medicine (PRM) of UEMS, also by lecturing for OTs in universities. Delegates of PRM section represent practically all countries of EU and also several non-EU. They meet twice a year and they prepare basic documents about their specialization in Europe. The White Book (WB) on Physical and Rehabilitation Medicine in Europe is under actualization at present. Rehabilitation teamwork is important principle of PRM and OTs are important members of the team. Therefore survey about situation of OT in different European countries (as seen by PRM doctors) was realized and its conclusions will be included in WB. This experience will allow to compare situation in different European countries. In the Czech Republic, positive development of OT continues. No OT program is now in Slovakia and Czechs will support its development. Since OTs are specialist, who are most responsible for rehabilitation of PwD and coordination between medical rehabilitation and other parts of comprehensive rehabilitation. Development of OTs in each country also indicates situation of PwD and their ability to reach active and independent living. Certain experience from PRM section can be useful for OTs. OT survey shows knowledge of PRM physicians about development of OT in their countries and willingness to support it. Close collaboration between PwD and qualified specialists in rehabilitation medicine helps to develop program of comprehensive rehabilitation.</td>
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The future of disability employment in Australia in the time of the NDIS, A121

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<td>Rick Kane, CEO, Disability Employment, Australia, Australia</td>
<td>Australia is currently trialling the National Disability Insurance Scheme (NDIS), a world-first social reform of disability services. Over the next three years the NDIS is expected to increase from 30,000 to about 460,000 participants. A core aspiration of the NDIS is independence through employment and economic participation. The NDIS is one of Australia’s greatest social reforms. Its goal is a society where employment for people with disability is expected and the norm. It is striving for an employment participation rate of 80% for people with disability. In 2012 labour force participation rate for people with disability aged 15-64 was 52.8% (ABS). This is an ambitious goal and it should be. For the NDIS to work and pay for itself, a large percentage of its participants are expected to become independent contributing members of society. Concurrently, the Australian Disability Employment Services (DES) is undergoing a review of its efficacy and capacity to deliver improved outcomes. The new DES is expected to align with contemporary disability policy, best articulated by the NDIS principles of person-centred, choice/control and individualised funding. Australia’s DES providers are the flagship for the NDIS employment aspirations to be realised but to align with NDIS principles they will have to change their financial, governance, human resources and service delivery model. This presentation will explain and explore the intersection of these two significant reforms and imagine how disability employment assistance is shaping in Australia. It will context other government reviews and reforms (Harper Competition Review, McClure Welfare Review, Mental Health Reforms, Australian Human Rights Commission Willing to Work Inquiry and the nascent Investment Approach). The Australian reforms could well light the way for greater disability reforms around the world.</td>
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Inclusive provision or specialist services? Harris, Level +1

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<td>Findings on disability in Malaysian Universities, A024</td>
<td>Malaysia’s education blueprint (Ministry of Education Malaysia, 2012) is moving towards an inclusive education model, which consists of the willingness to accept students with disability. It is the aim of the country that by 2025, every child with special needs has access to a high-quality education that is tailored to his or her particular needs and every teacher is equipped with the basic knowledge of special education to explore the successes and challenges in exercising social inclusion of PWDs on selected Malaysian campuses. This study employed a qualitative approach using interviews to further explore and capture the available facilities, and participants’ experience. Interview data was analysed using MAXQDA software for thematic analysis. Themes and subthemes emerged from the concepts derived from the interview guide, words/ideas frequently mentioned by the participants, and transcriptions that showed similarities, differences or links between items. One of the themes emerged was ‘university’s roles’ with five sub-themes: a) facilities b) academic c) awareness d) policy for students with disabilities e) inclusion of PWDs in Malaysian universities Suggestions regarding the findings will be discussed.</td>
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<td>Removing barriers in education settings to create an inclusive and accessible society, A100</td>
<td>Removing barriers in education settings to create an inclusive and accessible society was the title of the American University in Cairo’s Disability conference held on April 2016. The conference’s recommendations of current challenges include, but are not limited to, the following: Education system (Schools and universities) - Special adaptation to be executed in schools and universities including classrooms in order to be accessible for different types of disabilities. - Awareness and training for educators: teachers and professors are not aware of the diversity in classrooms; therefore, they must be trained and educated about different types of disabilities to be able to provide equally appropriate services to all students. Educators are not delivering the curriculum according to the diversified population of students in the classroom since a “pedagogy philosophy” is not applicable in schools nor universities. - Curriculum modifications: Modifications need to be considering two important aspects; one of which is how this curriculum will be delivered in various ways/forms to all student including student with disability. Additionally, how these modifications will consider the uniqueness of every student in order to be able to learn at his/ her utmost.</td>
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<td>Closing the Gap of Education for Adolescent Disabled, A107</td>
<td>Amiek Chamami, Statistician, BPS Statistics, Indonesia</td>
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<td>This research policy paper aims to assess the education inclusion of disabled people in developing country such as Indonesia by measuring the comparison tendency between adolescent disabled and Non disabled. In further, the deep analysis and measurement for adolescent disabled will be thoroughly conducted in order to find the causal and problem-solution of existing the gap and exclusion of adolescent disabled in the rights access of education for all. Paper research scientific on education inclusion for adolescent with disability still very rare to be done in developing country due to, among other: data provision, NOT in high demand by policy makers as identified an uncommon issues, scientist’s interest, research fund availability and the availability of human resources as scientists who are concerned in disability issues research. Regarding to the objective of the project been stated above, therefore, this research paper is really important in terms of supporting SDGs achievement on the 4th Goals, stated that “Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all”, particularly on adolescent disability education. This research data source is mainly derived from secondary macro data-set been collected by BPS Statistics Indonesia annually called the National Socio Economic Survey (briefly called Susenas). The Statistical method applied in the analysis for inferential demand is the logistic regression (Logit) analysis probability method. This applied method can provide a specific indicator measurement on inequality between adolescent disability and non-disabled to education and in each of education level links to the demographic characteristics of population. These specifics in summary this research paper reports that rural, older and poorer adolescent disabled persons tend having worst access to education and can be categorized as exclusion into education program in terms of unavailability the hard and soft education infrastructure, the exclusion into development program started from planning, implementing, monitoring evaluation and regulation. The demographic indicator been involved, namely : sex, age group, residential, type of disability, the access availability to training education as an informal education. The Susenas 2012 found 5,999,900 people with disabled and identified the adolescent age group is two third out of the total disabled people of Indonesia. The inequality access of education for regular adolescent is 3.264 point times compared to the adolescent disabled person (this resulted from logit statistical calculation). Most of disabled persons only had graduated primary school detail analysis definitely would become guidance to support for policy makers and policy formulation in the disability development program.</td>
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<th>A Unique Service Model of a Small Group Home for Persons with Intellectual Disabilities in Hong Kong and the Challenges It Faces, A091</th>
<th>Fr. Giosuè Bonzi, Founder and Spiritual Advisor, Fu Hong Society, Hong Kong</th>
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<td>Fu Hong Society (FHS), a service provider in Hong Kong, firmly believes that love and family life are integral to the lives and psychosocial wellbeing of individuals with disabilities, and the basic human rights transcending physical and intellectual barriers. Since 1977, FHS launched a self-financed small group home project, which was and is still a unique service in Hong Kong. It provides homes for persons with intellectual disabilities who are either orphans or without parental care. Each home is located in an apartment, accommodating 5 to 8 individuals with intellectual disabilities. Staff and volunteers of a home are called “Elder Brother, Housemothers and Regular Friends”, and they together play the essential roles to form a family with home members. The first-hand experience of Fr. Giosuè Bonzi, a founder of FHS, and the Elder Brother who has been living with home members for almost 20 years, writes that the small group homes enable its members to enjoy the rights of family and community life. The home members’ smiles and positive attitude to life, which are hard to be witnessed in ordinary hostels, show that love and family life are the two most vital elements for everyone’s life. Although this non-mainstream service is not yet subvented by the Government, its social significance is gaining increasing community support, and being recognized as a good practice in other cities in China.</td>
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<th>Stories about &quot;illness&quot; and stories about life – Approaching a forgotten generation of persons with intellectual disabilities, A133</th>
<th>Prof. Dr. Erik Weber, Professor for Inclusive Education, Ev. Hochschule Darmstadt, University of Applied Sciences, Germany</th>
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<td>25 years after the first steps concerning de-institutionalization in Germany the author tried to find out, how lives of the persons living in the former psychiatric hospitals have changed. Methods: The field research was done by a qualitative approach. Within one year, about 30 qualitative biographical interviews were made with persons with intellectual and developmental disabilities, some of them with their relatives or staff members. Main challenge was to find out the perspectives of persons with intellectual disability who cannot speak. Data analysis was made using elements of the grounded theory. Results: Central result of the research is the awareness that there are possibilities to change the living conditions through de-institutionalization. The biographical approach also shows that modern institutions are still characterized by aspects of structural violence and isolation. Living independently is still a big challenge for the persons themselves and for the service providers. Conclusions: Changing the living conditions for persons with intellectual disabilities through de-institutionalization was a successful process in some parts of Germany. Existing institutions and the central stakeholders should have a stronger focus on better access to the social environment and a true participation of people with intellectual disabilities.</td>
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- Schools and Universities segregate students with disabilities all through their academic years.
- Limited use of technology and assistive technology is lacking in the education system.
- Community: Acceptance and attitudes towards people with disabilities: the effective participation and full acceptance/inclusion in the society for persons with disabilities is severely hindered.
- Lack of accessibility and mobility:
  - Laws: Enforcement and implementation of laws for inclusion
- Funding: Integration in the mainstream education system in Egypt for students with disabilities is expensive. Government does not supply proper training nor equipment for inclusion; therefore, financial load falls solely on parents and caregivers.

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- Integration in the mainstream education system in Egypt for students with disabilities is expensive. Government does not supply proper training nor equipment for inclusion; therefore, financial load falls solely on parents and caregivers.
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<td>Becoming a soldier: The process of Inclusion of Individuals with intellectual disabilities in Militia, A045</td>
<td>Shirli Werner, Senior Lecturer, Paul Baerwald School of Social Work and Social Welfare, Hebrew University of Jerusalem, Israel</td>
<td>Background: The centrality of the military within Israeli society makes it a highly important setting for inclusion and for identity development. The &quot;Equal in Uniform&quot; project has been developed recently to provide people with intellectual disabilities (ID) with the opportunity to join the military. The aim of this study was to examine the self-identity of young adults with ID who serve within the project. Methods: As part of a qualitative phenomenological study, 49 semi-structured interviews were conducted several times with 31 individuals with ID throughout the project. Results: Findings showed that military service was important for the participants and resulted in them developing an identity of a soldier. This identity carried with it positive implications and enhanced their self-efficacy. Participants described their participation in the military as an opportunity to take an active part in socially-valued roles. Discussion: Findings will be discussed in terms of the impact of the &quot;Equal in Uniform&quot; projects on the self-identity of individuals with ID. Furthermore, the meaning for the individual of successfully completing socially-valued roles for the self-efficacy will be discussed.</td>
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<td>Designing barrier-free websites for people with intellectual disabilities: What do the experts say?, A124</td>
<td>Marie Heide, Research Fellow, University of Cologne, Unit of Labour and Vocational Rehabilitation, Cologne, Germany</td>
<td>Over the last few years, the world-wide-web has become an essential part of daily life, affecting education, employment and leisure. But there are many people which still reap few or no benefits from these technologies, and they can only use them with difficulty, if at all: According to a study by Aktion Mensch (2010), only half of the internet users with intellectual disabilities in the study were able to use the Internet without help from other people. Many of these people faced barriers when they used the internet, such as technical barriers resulting from low web site usability. However, the Internet could be especially helpful for people with intellectual disabilities by providing opportunities to get information, network and engage with others in a self-sufficient manner (Lewthwaite, 2014). The project “Online-Dabeit” focuses on the specific criteria that need to be considered when developing barrier-free websites for people with intellectual disabilities. Based on the German federal ordinance on barrier-free information technology (BITV 2.0), which was implemented in addition to the international guidelines of the W3 consortium (WCAG 2.0), the project aims at developing recommendations about how to include user-oriented aspects in BITV 2.0. These may include both technical and linguistic requirements as well as content-related aspects, i.e., the specific information needs of people with intellectual disabilities. These research questions will be examined using expert interviews with members of the target group. The results will be compiled and discussed at a subsequent future workshop, integrating a variety of existing and new perspectives and collaborations. In addition to supporting the development of barrier-free web-sites for people with special needs, the project aims at sensitizing society for the specific barriers faced by people with intellectual disabilities when using the Internet.</td>
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<td>Adopting Gap Model in Supporting Residential Homes for Ageing Individuals with Intellectual Disabilities, A093</td>
<td>CHAN Yuk-chu, Judy and LAU Tzehei, Vico, Senior Service Manager and Nursing Officer, Fu Hong Society, Hong Kong</td>
<td>In Hong Kong, residential homes for people with intellectual disabilities are provided by non-government organizations (NGOs), and support also training and rehabilitation. These homes are now facing critical challenges as users are getting old. Fu Hong Society (FHS) operates 22 hostels, with a team of multi-disciplinary professional staff including social workers, nurses, occupational therapists, physiotherapists and clinical psychologists. As an illustration, one of FHS’s hostels has 72 service users whose average age is 45 years old, and some of them have stayed in the hostel for over 36 years. The mental and physical conditions of these service users have deteriorated over the years. In order to meet the changing needs of the aging service users, a strategy map has been used to review the home operation under four perspectives, namely, customer, internal process, finance, and learning and growth. In each perspective, Gap Model of service quality is employed to find out what should be improved so as to get high customer satisfaction, achieve positive ageing, and reduce the stress of caring staff by deploying new technology and equipment. This paper discusses the relevance and usefulness of Gap Model of service quality as a tool to identify gaps between the optimized allocation and integration of the inputs (resources), and the current allocation-level. Customer gap and Service Provider Gaps include knowledge, service design and standard, performance, communication. This may reveal service areas requiring improvement.</td>
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<td>Promoting quality of life and independence of people with Intellectual disability by self-advocacy, A058</td>
<td>Shosh Kaminsky, Director of Knowledge Development and Management department and supervisor of the Community and Social Change department, Beit Issie Shapiro, Israel</td>
<td>Influencing policy: developing a national Self-Advocacy and leadership Group of people with Intellectual Developmental Disabilities in Israel Purpose: To promote quality of life and independence of people with IDD (PWIDD) by building their abilities to express their needs, wishes, dreams, preferences and to influence policy. Description of the project: Local level - Based on the model of community development: Initially, focusing on building grassroots local groups in which the members addressed issues of importance to their life in their communities. Each group is led by a self-advocate and has the support of a facilitator; both have been trained and receive ongoing guidance, knowledge and skills needed for group management and for self-advocacy. Presently, 12 groups of self-advocates with 120 participants are operating nationwide. National level - includes representatives from various organizations and is nationally active in social change and influencing policy. Based on the model of social action – people who experience social injustice, neglect, or inequality, organize with the help of a facilitator, and learn how to create change and influence national policy. The members of the national team participate in a training providing them necessary knowledge, skills and tools for policy influence. They prepare position papers and participate in various committees and forums in which they represent and fight for their rights as equals in society. They attend and express their positions on relevant issues in meetings at the Israeli Parliament. Most recently they succeeded in changing the law of guardianship to add the option of supported decision making as an alternative to guardianship. Their next agenda is to promote independent living in the community. National network of self-advocates - join a larger network of self-advocates with various disabilities and are also invited to take part in different coalitions, committees and to present their work in conferen</td>
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<td>People with complex learning disabilities researching relevant issues of their lives, A050</td>
<td>Dr Dana Roth, Director of Research and Evaluation Department, Beit Issie Shapiro, Israel</td>
<td>Researching with us – not about us: Autonomy, dependency, self-image &amp; Quality of life of people with complex learning disabilities. Purpose: The focus of this research was identified by People with complex learning disability (PWCLD) to be of great importance due to challenges they experience in different settings (work, community, service providers and families) which need a better understanding and clarity. Approach: Reciprocity between researchers and subjects who are &quot;experts by experience&quot; is the shared principle of &quot;emancipatory&quot; &quot;inclusive,&quot; &quot;participatory action&quot; and most recently &quot;collaborative&quot; research approaches (Bigby, Frawley &amp; Ramcharan, 2014). The level of involvement and participation of the people with the disability in the research process is what defines the difference between the approaches. The present study was conducted utilizing the inclusive approach with full and equal participation amongst all members of the research team on all elements of the research. Method: 107 PWCLD responded to questionnaires selected and adapted by the research team: Quality of life Questionnaire (QOL) (Cummins, 2005); Autonomy, Dependence scale (Bekker &amp; Van - Assen, 2006) which address 3 factor: relationship, initiative and independent thinking; Self Esteem Questionnaire (Rosenberg, 1965) and Sociodemographic information. Results: Most significant findings are the positive correlations between: self-image and QOL; QOL and initiative; initiative and self-image; self-image and independent thinking and between initiative and independent thinking. Relationships were a very dominant area with significant findings. Implications: 1. Relationships are an area which must be addressed with relation to self-esteem, quality of life and to autonomy-dependence issues. 2. Independent thinking and initiative are areas which to address from early years of development and intervention. 3. Inclusive research is a MUST when conducting research on lives of people with disability.</td>
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<td>Inclusion of students with SEN in international assessments, A006</td>
<td>Dr Barbara LeRoy, Research Associate, Developmental Disabilities Institute, Wayne State University, USA</td>
<td>The Program of International Student Assessment (PISA/OECD) has been including students with special educational needs since 2003. This study examined the participation and performance of these students across the administrations of the test, with an in depth focus on the 2012 assessment. In 2012, 10,717 students with special educational needs from 65 countries completed academic assessments in mathematics, reading, and science, as well as surveys of their educational experiences, learner behaviors and perceptions of school. Findings addressing participation, demographics, the educational environment, students' attitudes and performance across administration waves and countries will be presented. Implications for practice and policy will be discussed.</td>
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<td>The Wheelchair Service Provision Basic Test to assess knowledge proficiency in basic wheelchair service delivery, A068</td>
<td>Alexandria Miles, PhD Student, Graduate Student Researcher, International Society of Wheelchair Professionals, University of Pittsburgh School of Health and Rehabilitation Sciences, USA</td>
<td>Certification in healthcare is a notable way to identify competent professionals while protecting the well-being of consumers, clients, and patients; however, until recently, there was no internationally accepted way to measure the basic competency of wheelchair service professionals – individuals providing assessments, mobility aid prescription, training, and follow-up services to those using manual wheelchairs. Composed of wheelchair service provision experts and researchers, the newly established International Society of Wheelchair Professionals (ISWP) and partners developed the Wheelchair Service Provision - Basic Test (WSPBT) to assess the knowledge of clinicians providing wheelchair services worldwide. Since launch, 362 people have taken the Basic test; the pass rate is 70% with an average score of 73%. Analyses of variance (ANOVA) indicated there was no difference in scores based on experience level, meaning new and seasoned wheelchair service providers possessed the necessary level of knowledge to service manual wheelchair users at the basic level. This result indicates that the Wheelchair Service Provision - Basic Test is a valid method for measuring the basic competency of new and experienced wheelchair service professionals around the world, therefore, encourages translation of the test into the United Nations' official languages at minimum and the credentialing of providers who pass.</td>
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| An overview over barriers and facilitators for people with disabilities in work, A075 | Patricia Traub, Team Leader REHADAT, Vocational Rehabilitation and Inclusion, Cologne Institute for Economic Research (IW), Germany | The presentation, based on recent scientific studies and surveys carried out by the Cologne Institute for Economic Research (IW Köln), provides indications of both inhibitory and beneficial factors in the training and employment of people with disabilities in the labour force. • From a business perspective, what are the factors that favour or inhibit a company training young disabled people in Germany? • Which steps lead to the employment of people with disabilities? • What prompts companies to employ or train these employees? • What are the positive and negative factors? The studies show, for example, that companies in Germany that already employ a person with disabilities, have a higher probability of training adolescents with disabilities than those without employees with disabilities. External occupational establishments, such as vocational training centres, work closely with external training companies that provide long internships. Another study showed that more than 68 percent of graduates are in gainful employment later on. Another supporting factor for inclusion and continued employment is flexible work adaptation, which meets the individual needs of the disabled worker, for example with technical aids. The studies provide valuable information for the practical structuring of successful inclusion on the primary labour market, in which both the needs of those affected and the
Tinto, Level 0

Models of disability

Parallel Session B

Wednesday 26 October 2016, 11.00am-12.30 pm

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<td>An outline of the key elements of accessibility and inclusion from an Australian perspective, A044</td>
<td>Michael Fox, Chair, Rights &amp; Inclusion Australia, Australia</td>
<td>The Conference theme is to Create a More Inclusive World – and the global history and influence of RI is central to any discussion about accessibility and inclusion. This presentation will provide an outline of the key elements of accessibility and inclusion from an Australian perspective. Accessibility – CRPD Article 9 – requires access on an equal basis to the physical environment, housing, transportation, information and communications – in both urban and rural areas. Australia ratified the CRPD in 2008 and now provided comprehensive requirements for accessibility and inclusion generally in accordance with the CRPD. The one exception is housing and our current priority is to include mainstream accessible housing requirements in Australian building codes. The presentation will focus on housing accessibility as part of the ‘process of access’ and housing relationship to the NDS – 2010 to 2020 National Disability Strategy. The NDS provides a clear response to CRPD obligations. Inclusion is central to the CRPD and is referenced in many of the 50 CRPD Articles. Full inclusion and participation in all aspects of life is a key aspect of the CRPD and encapsulates the essential link between accessibility and inclusion. RI Global website focus is – Empowerment, Inclusion and Access – and the RI mission is to advance the rights and inclusion of people with disabilities across the world. RI played a major role in the drafting and adoption of the CRPD – and continues to be actively involved in the CRPD ratification and implementation process. RI has the opportunity to continue a history of leadership – by evolving the RI name to reflect global Rights and Inclusion.</td>
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<td>All inclusive in legal online discussions: A model for participation in Germany, A060</td>
<td>Larissa Beck, Managing Director, Deutsche Vereinigung für Rehabilitation (DVfR), Germany</td>
<td>The discussion platform <a href="http://www.reha-recht.de">www.reha-recht.de</a>, provided by the German Association for Rehabilitation (Deutsche Vereinigung für Rehabilitation, DVfR), offers various possibilities for the interested public to take part in the exchange on legal topics concerning rehabilitation and participation of disabled persons. DVfR unites all actors in the process of rehabilitation in Germany in order to implement the rights of disabled people to participate fully in society and live in a self-determined way. Using the discussion online tool helps to gain and spread impulses for legislation and legal practice which can be communicated towards the national social insurance funds and policy makers. <a href="http://www.reha-recht.de">www.reha-recht.de</a> was developed and is operated in cooperation with legal and health professionals and other interdisciplinary experts for rehabilitation and inclusion. The platform offers three portal areas for • scientific articles, • discussions, • information around issues in rehabilitation and participation laws. Experts from theory and practice publish scientific articles that can be commented by site users. Discussions on selected topics take place several times a year in a separate forum (<a href="http://fma.reha-recht.de">http://fma.reha-recht.de</a>), open to the public and accompanied by experts. Everybody can participate and post questions and experiences, thereby generating stimuli for research questions and scientific debate. A glossary for the clarification and discussion of key terms in rehabilitation and participation laws is another interactive element. The interdisciplinary exchange on <a href="http://www.reha-recht.de">www.reha-recht.de</a> contributes to the development of effective legal conditions for realizing self-determined participation and inclusion of disabled persons. They are invited to take part in discussions and use the accessible interactive tools. Finally <a href="http://www.reha-recht.de">www.reha-recht.de</a> should be seen as a measure to raise awareness for the situation and needs of disabled persons and to indicate ways to realize their rights.</td>
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<td>The presentation highlights the political strides persons with disabilities have</td>
<td>Wilson Keter, Member of County Assembly, Bomet County Assembly, Kenya</td>
<td>The presentation aims to examine how the Kenyan government has made strides in enhancing inclusivity of persons with disability in political leadership through equal opportunity and affirmative action legislation introduced by the new Kenyan Constitution. The presentation will make the argument that reaching top level positions though, still uncommon for persons living with disability in Kenya, has been made easier through the constitutional requirement for affirmative action. This has made Kenyans ready to accept persons with disabilities not only as equals but also as persons capable of taking up positions of leadership in society. The institutionalization of affirmative action for persons living with disability, in the presenter’s perspective, has thus worked towards ensuring the growth and advancement of persons with disability in the Kenyan political context. The presentation is based on the experience of the presenter who has benefited from the affirmative action legislation that has led to his appointment as a</td>
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Leonard Cheshire Disability and Inclusive Development Centre (LCIDC) and some of our current projects, A166

This presentation provides an overview of the Leonard Cheshire Disability and Inclusive Development Centre (LCIDC) and some of our current projects. The LCIDC is a collaboration between the International Department of Leonard Cheshire Disability and University College London. It is dedicated to research in low- and middle-income countries that can be used by groups, organisations and advocates worldwide to improve the lives of people with disabilities. We work in collaboration with universities, DPOs and governments; with UN organisations like DESA, UNICEF and UNESCO; and with disability-focused NGOs, like Handicap International and Sightsavers. We work on a variety of issues linked to disability and poverty. For example, we have just completed the first of a three-year DFID/ESRC funded project, Bridging the Gap: examining disability and development in 4 African Countries, undertaken in partnership with 5 African Universities (University of Nairobi, University of Sierra Leone, Makerere University, University of Zambia, Stellenbosch University) and a group of leading disability researchers. Central to this project is the concept of the ‘disability and development gap’, in which the lack of systematic or sustainable inclusion in international development efforts results in persons with disabilities falling increasingly behind their non-disabled peers. This project seeks to better understand not only what barriers exist in education, labour markets, access to medical care and social protection, but also why such barriers persist. This will allow us to better identify ways these barriers can be ‘bridged’. The second project, funded by DFAT, provides an academic home for the Washington Group on Disability Statistics. Over the coming four years, working with Dr Jennifer Madans and Mitchell Loeb, our Centre will provide support for training, research and dissemination of Washington Group tools to help monitor efforts to ensure equal inclusion of persons with disabilities in the SDGs.

Presentation

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<td>A prototype Tele-Rehabilitation platform that is easy to use, low cost, robust, and mobile, A043</td>
<td>Tom Gerards, PhD Student, University of Strathclyde, Scotland</td>
<td>Ageing populations are a global trend, and Scotland is no exception. In Scotland there currently also is a shortage of rehabilitation, leading to ever increasing financial pressures. In order to keep the finances from spiraling out of control the amount of rehabilitation delivered needs to be increased, without increasing cost or workload for an already overburdened service. Tele-Rehabilitation (the use of ICT to deliver rehabilitation over distance) has the potential to do just this; increase the amount of rehabilitation delivered without increasing cost. Many studies have explored some of the advantages that Tele-Rehabilitation offers, but the technology that has so far been developed typically is not suited for use at a large scale, holding Tele-Rehabilitation back from being used in practice. Therefore, a scalable prototype Tele-Rehabilitation platform that is geared toward including older adults has been developed. It offers advanced functions such as biofeedback, videoconferencing and exercise-gaming, yet it is mobile, robust, low cost, and very easy to use. This first prototype is laid out for the rehabilitation following total knee replacement for practical reasons, but it has generic value. It uses a touchscreen interface, simple menus and large buttons to accommodate for some of the changes in vision and motor skills due to ageing and is robust enough for use in a homely setting. The platform was found to be well accepted by Health Professionals, and the ease of use, as well as need for training for knee replacement patients has been investigated. Future work includes developing training, performing large scale studies and eventually implementation into practice, where it is expected to help patients’ regain their ability to perform Activities of Daily Living, allowing them to live happy fulfilling lives in their own home.</td>
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Risk Factors for Falls and Falls Management with Individuals with Intellectual Disabilities in Hong Kong, A097 | CHAN wai-hung, Rex, Regional Physiotherapist, Fu Hong Society, Hong Kong | Service users of Fu Hong Society (FHS), a major service provider in Hong Kong, have reported relatively high fall incidents. The users are individuals with intellectual and physical disabilities, and some of the fall incidents have a devastating effect, both as a result of the consequent trauma and more significantly, the ensuing loss of mobility. Recurrent falls may cause the users to become chair/bed bound ensuing a lot of complications and health / care related problems. There are evidence from literature that tailored-fitted exercise, medical and environmental interventions may play an important role in decreasing fall-related injuries. This paper reports on the findings of a research in exploring risk factors for falls and falls management with service users of FHS. The research will report on the application of the assessment and outcome measurement tools used to evaluate and prevent falls in the general population to adults with intellectual disabilities, and study how risk factors, evaluation, interventions, and prevention strategies may differ for individuals with intellectual disabilities. The research, carried out in 2013-2014, was to evaluate the effectiveness of a specifically designed fall exercise programme by respective changes in three balance assessment tools for users with intellectual disabilities (ID) at fall risk. Twenty-three users were screened for eligibility from seventy ID users of same selection criteria for twenty-four weeks of Fall prevention exercise training. Pre and post balance scores in terms of Timed up and Go test (TUG); Bergs Balance score(BBS); Tinetti Balance sub-scores were evaluated and compared for the completed treatment programme users. Findings showed significant improvement for respective three outcome indicators, BBS, TUG and Tinetti balance subscores. |

The presentation is based on a developing | Anne Rahikka, Research manager, Miina Sillanpää | The Wisdom at Senior Citizen’s Home was a two-year research and development project (2014-2016). The project consortium consisted of Miina Sillanpää Foundation and Wilhelmina Services Ltd. and five other organizations. The aims of the project were 1) to develop a new cost-effective and versatile rehabilitation service concept for senior citizens 2) to develop a model for developing rehabilitation services, which are based on the seniors’ own needs and 3) to pilot technology assisted rehabilitation as part of the project. The development process was carried out in the project with user experience and active dialogue with all stakeholders. The research of the study based on
Independent living
Kilsyth, Level 0

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| Independent living within social policies in the Arab States, A010 | Ola Abu Alghaib, PhD Researcher, University of East Anglia, England | The concepts of autonomy, self-determination, and inclusion are at the heart of the UN CPDR’s goals, which provide a framework within which to evaluate the situation of persons with disabilities and measure their progress toward living independently on an equal basis with others. Yet, even before the adoption of the UN CRPD, European countries had taken a number of policy measures toward improving the independent living of persons with disabilities. These included the promotion of de-institutionalization and provision of direct payment schemes, which have been seen as a promising development toward the empowerment of persons with disabilities to choose and manage their own care.

The philosophy of independent living is that all individuals should have the ability to control their life and choose their destiny, and determine, and inclusion are at the heart of the UN CPDR’s goals, which provide a framework within which to evaluate the situation of persons with disabilities and measure their progress toward living independently on an equal basis with others. The philosophy of independent living is that all individuals should have the ability to control their life and choose their daily actions. This involves access not only to personal support services but also to appropriate housing, transport, education, employment, and training. Across many high income countries for the past 20 years, cash payments have been recognized as a strategy contributing to breaking down inequalities. They have been considered by the disability movement as one of its key achievements toward citizenship.

Unfortunately, while Article 19 of the UN CRPD stipulates the right of persons with disabilities to independent living, evidence on how this right has been implemented in developing countries is still lacking. There is a gap in the literature on whether developing countries have yet foreseen direct payments as an empowering legislation that can enhance how persons with disabilities choose and control where, how, when, and by whom their support is provided. Using literature review and key informant interviews, this presentation will discuss current status in the MENA Region in relation to including options for independent living within Social Policies. It will also highlight identified gaps in relation to design and implementation.

Presents a new and innovative model for people with an intellectual disability | Rachel Waddington, General Manager, Project Independence, | Person with intellectual disabilities are often dependent on the care provided by family in meeting their most basic needs, including housing. Considerable difficulties can be encountered when these carers give up their position to provide this level of care, whether through old age, financial hardship or other constraints. Demand for permanent, sustainable and supported homes where choice and control are placed in the hands of the person with the disability is increasing. There is a stigma attached to large scale council living for people with an intellectual disability. These models can be replaced by smaller scale developments that provide independence and autonomy. House designs both externally and internally that fit within the local architecture assist in breaking down barriers to community inclusion. But whilst many of these new models help people with an intellectual disability develop supported decision making abilities they do not support financial development to allow for future home purchase. |
disability to own their homes, A032

Australia

individually grow and mature.

Looking to the future, disability housing needs to give control and choice, whilst providing individualism for financial growth and self-development. Home ownership for persons with a disability is an area of growing innovation and development. Project Independence (PI) offers people with an intellectual disability the opportunity to use a percentage of their Disability Support Pension to acquire home ownership. PI opens the door for personal financial growth whilst living in a supported, person-centred environment and the opportunity to transition into permanent independent living when the resident is ready to do so, at a time that suits them. There is no single model of housing that will suit all and solve the disability housing crisis currently faced, but innovative thinking, open and frank discussion and the use of international best practice as support gives us the starting points.

The relationship based approach to paid support, A052

Leanne K Peijman & Margaret Vermeij

Irvin, Management team, Homelife Association Inc, Australia

This presentation will explore the Relationship Based Approach (RBA) to paid support. Homelife has developed a relationship based framework of practice based on this approach. The Relationship Based Approach (RBA) identifies relationships as the focus of paid support and the means by which a person can achieve their aspirations, goals and plans, living an independent life of choice and control. RBA acknowledges relationships:
• between all participants are of the highest priority
• are not a consequence of paid support but a fundamental foundation of paid support
• create pathways to empowerment, citizenship and inclusion
• provide modeling for the development of natural relationships
• are organic (birth, life and death)

The RBA approach to relationships includes:
• Development
• Monitoring
• Termination/transition

Traditionally the focus of paid support is on the plan, the tasks to be performed and the outcomes/outputs to be achieved. Relationships are a consequence of the service delivered.

Traditional approaches to relationships include:
• Prevention
• Intervention
• Professional Boundaries

The RBA practice framework extends to team members (staff), other significant people in the life of the person accessing paid support and others in and around the service. Communication and language are the primary, critical underpinning skills in the relationship based approach focusing strongly on power balance, respect, dignity and the right of every individual to take risks and live a unique life of choice.

We will present a video of people accessing paid support using the RBA who will share their experience.

A Peer Support Project under the Recovery Model for Individuals with Mental Health Challenges, A090

Sung Hor-mui, Service Manager, and Lee Mang-Ying, Social Worker, Fu Hong Society, Hong Kong

The emergence of the community-based recovery-oriented practice in last decade reflects a transformational development. The recovery model developed in Hong Kong has eleven components in which “peer support” is one of the crucial elements contributing to individual wellness and social inclusion. The lived experiences of persons with mental health challenges who are in recovery are viewed as an invaluable asset and unique capacity. Through mutual support and peer relationship, personal attributes including self-esteem, emotional wellbeing, motivation, trust and sense of worthiness have been nurtured and enhanced. Furthermore, persons in recovery who are supported by peers tend to experience more thorough and longer lasting recovery.

Fu Hong Society (FHS) has implemented the peer support service project in its community psychiatric services for two years. A team of 3 peer-supporters who have lived experiences of mental health challenges were employed for service enhancement in early 2016. This paper reviews the experiences and practice of peer support service of FHS in Hong Kong. Positive outcomes are reported in the enhancement of the social support network and an increase of the usage of community resources. Positive personal recovery and proactive social inclusion are also reported.

Modern prosthetics and orthotics – an interdisciplinary approach

Carrick, Level +1

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<td>Southampton University</td>
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<td>The application of clinical engineering, A169</td>
<td>Dr P Worsley, Southampton University</td>
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<td>Incorporating a biopsychosocial approach, A170</td>
<td>Dr M Donovan-Hall, Southampton University</td>
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<td>Engaging the</td>
<td>Prof J Adams,</td>
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### Presentation

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| Share the methods we used to implement the NIDMAR disability management curriculum in Belgium, A083 | Decuman Saskia, PhD, National Institute for Health and Disability Insurance, Belgium | Implementation of the NIDMAR disability management curriculum in Belgium: from public call to a multidisciplinary consortium of DM-experts. 
Introduction: The Belgian National Institute for Health and Disability Insurance (NIHDI) aims to develop hands-on tools to support professionals active in guiding sick-listed people to return to work. One - to be developed - tool is a broad educational framework in the domain of work disability and return to work. The Canadian National Institute of Disability Management and Research (NIDMAR) offers a 25-module disability management curriculum that has the potential to be implemented in Belgium. The goal of our presentation is to share the methods we used to implement the NIDMAR disability management curriculum in Belgium. 
Methods: The NIHDI followed a 2-step procedure. In a first step (2014), experts screened the curriculum and showed that the education material needs modification to meet the Belgian social security context. The second step was to launch a public call (2015) to search DM-experts who can adapt the education material to the Belgian context, and b) teach the material. Inclusion criteria for experts were: in-depth knowledge on DM and Belgian social security, teaching skills, specific background to meet the content of each module (e.g. for the legislation module, we looked for experts with a judicial background), practical experience in DM, scientific experience (research, publications, presentations), and experts with a clear network in DM (knowledge about the broad group of professionals and stakeholders in DM). Results and implications: The NIHDI assigned the task (beginning 2016) to a multidisciplinary consortium of DM-experts with a different professional background (occupational/ insurance physicians, occupational therapists, psychologists, …). The first year of the program has started (23.02.2016) and will end in January 2017. At the end of the education, an examination (organized by NIHDI under the supervision of a Belgian test agency and examination committee) is foreseen. Students, passing the exam, will obtain the certification «return to work coordinator» or «disability management professional».

### The need for, and the delivery of, a consistent Disability Management Programme within the United Kingdom, A156

| Graham Halsey, Chairman, International Disability Management Standards Council - UK/Ireland, England | In the United Kingdom, finding a consistent approach to return to work planning following an illness or injury has long been a challenge. An accident or ill-health can cause an individual, the workplace and society many, previously unconsidered, issues. Many groups have taken up this challenge, but a consistent approach to this often complicated situation has not been developed. 
As far back as 2008, Dame Carol Black stated, in her report to the UK Government, that: “Any improvement in work-related support for those who develop health conditions will need to be underpinned by a fundamental change in the widespread perception around fitness for work;”… (Black, C., 2008, Working for a Healthier Tomorrow - Executive Summary) One solution is the Certified Disability Management Professional (CDMP) designation, founded by the National Institute for Disability Management and Research (NIDMAR) in Canada. NIDMAR has developed as a broad educational framework in the domain of work disability and return to work. The Canadian National Institute of Disability Management and Research (NIDMAR) offers a 25-module disability management curriculum that has the potential to be implemented in Belgium. The goal of our presentation is to share the methods we used to implement the NIDMAR disability management curriculum in Belgium. 
Methods: The NIHDI followed a 2-step procedure. In a first step (2014), experts screened the curriculum and showed that the education material needs modification to meet the Belgian social security context. The second step was to launch a public call (2015) to search DM-experts who can adapt the education material to the Belgian context, and b) teach the material. Inclusion criteria for experts were: in-depth knowledge on DM and Belgian social security, teaching skills, specific background to meet the content of each module (e.g. for the legislation module, we looked for experts with a judicial background), practical experience in DM, scientific experience (research, publications, presentations), and experts with a clear network in DM (knowledge about the broad group of professionals and stakeholders in DM). Results and implications: The NIHDI assigned the task (beginning 2016) to a multidisciplinary consortium of DM-experts with a different professional background (occupational/ insurance physicians, occupational therapists, psychologists, …). The first year of the program has started (23.02.2016) and will end in January 2017. At the end of the education, an examination (organized by NIHDI under the supervision of a Belgian test agency and examination committee) is foreseen. Students, passing the exam, will obtain the certification «return to work coordinator» or «disability management professional».

### Competencies Needed for Return to Work (RTW)

| Dr Madan Kundu, Associate Professor, Southern | The essence of Article 27: Work and Employment of the CRPD is to enhance employment outcome of persons with disabilities (PWD) globally. This cherished mission may be accomplished by two pronged approach: (1) to enhance employment outcomes of people with disabilities by imparting knowledge, skills and competencies to be competitive in the labor market and (2) to enhance competencies of RTW professionals and provide quality services to individuals with disabilities. RTW professionals are composed of RTW Coordinators, Supervisors, Case Managers, Rehabilitation Counselors, Job Placement Specialists, Job Coaches, and others. In |
Supported self-help
Harris, Level +1

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<td>Big White Wall: digital mental health services, A081</td>
<td>Claire Harding, Head of Impact and Research, Big White Wall, England</td>
<td>Millions of Britons seek mental health support on the internet every year: from Google, NHS Choices, and a huge array of websites and apps. The high prevalence of mental health problems, barriers to accessing mental health services, and a reluctance to talk openly about mental health issues with peers, employers and professionals may contribute to this demand. Big White Wall is a leading digital mental health provider and has supported over 40,000 people in the UK over the last seven years. It provides peer support which is moderated by professional counsellors 24 hours a day, self-management information, guided group programmes and one to one therapy. Its services are available to people aged 16+ through NHS bodies, universities and employers, often by self-referral. This presentation will provide an outline (and, if technology allows, a brief demonstration) of Big White Wall’s service and go on to discuss: - Big White Wall’s members: demographics, health conditions, and use of other services. How do these compare to people who use other types of mental health care? - Big White Wall’s research and impact assessment: the challenges and opportunities of conducting pragmatic research online, and innovative techniques for impact assessment - Big White Wall and commissioning: lessons learned from working within the NHS [Note: depending on time available the organisers may prefer a demonstration followed by a presentation focussed on one of the topics above. We would be happy to provide a more detailed abstract if this is the case].</td>
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<td>The Heart Manual Service NHS Lothian, embraces the future, not forgetting the past, A112</td>
<td>Louise Taylor, Head of Service, Heart Manual Department, NHS Lothian, Scotland</td>
<td>&quot;The Heart Manual programme: development, delivery and success.&quot; The Heart Manual Programme (NHS Lothian) is the UK’s leading home based supported self-management programme for individuals recovering from acute Myocardial Infarction and/or Revascularisation. Since its implementation in the 1990s, numerous published studies have accumulated evidence on its effectiveness. The Heart Manual is the most widely investigated, validated and recommended programme for an increasing number of patients and health authorities. With a global inference on supported self management in patient care, the programme is now used as a benchmark for other conditions. It is the only programme evidenced by three randomized control trials (RCTs) establishing a standard of excellence and quality endorsed by NICE. Used by numerous health boards throughout the UK and as far afield as Canada, Singapore, and recently China, the programme meets the needs of 15,000 individuals annually. The programmes are facilitated by specially trained clinicians (n=1500) to enable patients consensus and understanding in managing their long term condition, all supported by an NHS established infrastructure. An NHS owned resource since 1992 the Heart Manual programme has evolved through accumulated evidence and international publications to its most recent development, the Digital Format (2015). Winning a 1st prize NHS Scotland award in 2015, this format offers favourable choice to service users and clinicians. The recipe for the programme’s success is regularly requested. What makes it work? There are no secret ingredients but what we do know that it has supported the care of many individuals and their families over the years. Its evolution has also enabled other conditions such as Cancer to benefit from the model to support cancer survivors. Offering patients a choice in how they learn to manage their condition will not only improve inclusion and engagement but reduce unscheduled visits to hospital.</td>
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## Motorsport for All, race car, spinal cord injury, exclusion, inclusion, experiences, A108

Jarmo Perttunen, Principal Lecturer, Tampere University of Applied Science, Finland

For a young adult, becoming disabled usually means a total change in his/her life and quite often they are in risk of exclusion. The rehabilitation after spinal cord injury concentrates usually in physiological procedures. However, in many cases, young handicapped persons would need psychological attention perhaps even more than physiological. Many times after physical rehabilitation, the psychological condition is still poor and disabled young adults are suffering from lack for joy of life. Furthermore, the effectiveness of rehabilitation on psychological condition is not clear. The indicators and measurements are many times missing or they are unclear. If the zest for life is missing, also in order to obtain a new profession does not suffice. Therefore, we need means and tools to increase the joy of life and sense of inclusion to a sufficient level. Active participation in society and return to work life become possible only if the person him/herself wants this to happen. There are some evidences showing that re-training or education has not been inspiring, but a possibility to take part to experiences, like car racing activities, has shown a large interest among young patients. Within the Motorsport for All project, a class race car was constructed and equipped with a new type of a manual control device. All the subjects had possibilities drive and test the car several times in the different race circuits. The main goal of the project was to create and model a way, which helps young adults to participate in motor sport activities and improve this way their return to the working life after spinal cord injury. The Motorsport for All project improved accessibility of education and inclusion in the society. In a larger perspective, the results of the project helped handicapped persons to return to active working and social life.

## A qualitative survey focuses the perspective of employees in sheltered workshops on participation and recognition, A103

Mario Schreiner, Scientific Assistant, University of Kassel, Germany

Impact of vocational rehabilitation in sheltered workshops – social participation and recognition from the employees’ perspectives in sheltered workshops

The entire and equal participation on gainful employment is a predominantly intended target in modern society and constitutes a focal human right. By contribution to gainful employment social participation and inclusion can emerge. Based on this, social recognition can be achievable by incorporated output in society. According to article 27, the Convention of the United Nations on the rights of persons with disabilities therefore demands equal right of access as well as employment for persons with disabilities. Due to this, it is necessary to avoid special arrangements beyond the labor market for persons with disabilities. Nevertheless, in numerous countries there exist sheltered workshops which are a special form of employment beyond the labor market. On the one hand, employees in sheltered workshops are enabled to experience positive aspects of employment such as diurnal structure, social contact, experience of competence etc. On the other hand, employment in sheltered workshops carries the risk of permanent exclusion from the labor market, resulting in negative consequences concerning social inclusion in any aspects of life.

Rihitherto, there is a lack of empirical data on the effect of the employees’ occupation in sheltered workshops. In the context of a qualitative interview survey 20 employees of sheltered workshops in Germany were interviewed relating to their perception of participation and recognition in respect of their occupation. As a result, there are diverse types of employees to be identified. The range stretches from a convinced employee being an accepted member of a society focused on work to an employee experiencing work as a trigger of exclusion and contempt.

The results of the current qualitative survey contribute to a lively discussion on occupation in sheltered workshops involving the perspectives of the employees.

## Ageing well

Lowther, Level -1

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| Aging is an active verb, a process, not a label; to experience life, A055 | Peter Ghaali, Executive Director, Support Needy Lovely Centre, Uganda | In the most recent Uganda Health and Demographic Survey, “an older person was defined as one who was aged 60 years and above. Older persons are generally too weak to perform productive work and economically dependent on others, i.e. children, relatives and neighbors, among others, to survive.” Is this a fair description? It may well be. However, even weak people can be happy. Even those with no money can contribute to society. People aged 60+ in Uganda, regardless of economic status, are tilling fields, building houses, teaching classes, writing books, operating on patients, preaching sermons, buying land, participating in local government and even running for a fourth term in office.

Yes, the downside to aging in Uganda is a story to be told, but there’s more to this story. It is important that journalists write as much about the capacity of older persons as they do about their incapacity. Only a full picture of the lives of this demographic will help the next generation appreciate that a major policy shift is necessary to deal with those on the margins of society.

Older persons in Uganda are not just waiting to die. So why do we treat them as such?

Here are some hints on elder care; and what the presentation will focus on.

What is the current state of geriatric primary health care in the country?

What are the most common health problems among people aged 60+ and what training to doctors and nurses have to deal with these challenges?

What is the average annual cost of healthcare for older adults? What cost-sharing or government-funded provisions are available to lessen the burden of healthcare on pensioners?

With the isolations, what emotional or mental challenges are emerging? What socio-sympo support exists to deal with this?

There are numerous community-based organizations working in the area of aging, elder care and support. |
| Rehabilitation goal setting in Danish home-based care is challenging for all parts involved, A120 | Merete Tonnesen, Social Anthropologist, Department of Forskning og Udvikling, Marselisborgcentret, Denmark | Background

Goal setting is an integral part of a rehabilitation process. It has several purposes: goals are set to strengthen the patient’s autonomy, to improve clinical outcomes, to evaluate outcomes, to meet professional, legislative and contractual requirements and to monitor change and alter strategy if needed.

In 2015, a new rehabilitation law was incorporated into Danish legislation on social services, stating that it is an obligation for the multidisciplinary team to set individual rehabilitation goals in cooperation with the person undergoing rehabilitation. Professionals in home based rehabilitation teams find goal setting essential. People undergoing rehabilitation find it important to be co-decision-makers in their process.

Nevertheless, studying the actual act of goal setting, it becomes apparent that there is a gap between the ideal world and the real world. The term “goal” is contested, professionals in multidisciplinary teams tend to set goals differently and there is an ongoing, ethical debate about the ownership to the goals.

My presentation addresses the abovementioned gap through empirical examples. |

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www.theheartmanual.com
| A survey revealed the need for the consensus in the use of outcome measures in stroke rehabilitation, A085 | Thomas Maribo, Associate Professor, Aarhus University, Denmark | Use of outcome measures in stroke rehabilitation in the transition from hospital to home-based rehabilitation
Stroke is a major chronic disease leading to long-term disability. In-hospital stays have been reduced, leading to increasing emphasis on home-based rehabilitation. Using relevant instruments to describe functioning helps ensure continuity in the transition.
The purpose was to examine the use of outcome measures used in clinical practice
Methods/analysis
A questionnaire was sent to hospitals discharging patients with stroke and municipalities’ health services treating stroke patients at home in an area covering a total population of three million.
The survey was targeted professionals typically involved in municipal health service.
The questionnaire had one open-ended question: “Which instruments, outcome measures or tests are commonly used to describe functioning in persons with stroke?”
Data were subjected to descriptive analysis. Instruments were separated into standardised (published) and “others”.
Results
85% of the hospitals and 90% of the municipalities returned the questionnaire. 95% of the hospitals and 96% of the municipalities used standardised instruments.
The hospitals reported 61 standardised instruments and 45 “other”. The municipalities reported 60 standardised instruments and 53 “other”.
A total of 89 standardised instruments were used to describe functioning in stroke patients.
No instrument was used in every hospital or municipality. A majority of instruments were used in just one or two places.
Discussion/conclusions
Health professionals are encouraged to use valid instruments in health care transitions, but there are no recommendations on which instruments to use. This survey of more than half the Danish health care sector shows that the vast majority of services use standardised instruments, but there is absolutely no consensus in the selection of instruments.
Impact/implications
There is a strong need for recommendations on which outcome measures should be used in stroke rehabilitation, especially in the transition between hospital and home-based rehabilitation.

| Deafness and Aging, A155 | Thomas Kaul, Professor, University of Cologne, Germany | Deafness and Aging in Germany
Deaf population is a minority group with a unique language (i.e. sign language) and cultural tradition. In Germany are living about 80,000 Deaf people. Since 10 years we research the life situation of the elderly Deaf and support the development of social and health care structures.
Methods
We analyzed statistical data and carried out quantitative and qualitative interviews with Deaf people, experts and institutions. The main objective was to analyze the life situation and the personal resources and to explore the quality and quantity of (specific) offers for elderly Deaf people to manage their life:
- Information, consulting
- Health care
- Living and housing in old age
- Educational and leisure opportunities
- Health care with dementia
Results
The family network of the elderly Deaf is not highly meshed.
The Deaf community is a positive social network.
If the mobility decreases, the contact to the Deaf community decreases, too.
Deaf elderly are more isolated and not well informed regarding statutory benefits and subsidies.
They experienced barriers to get relevant and necessary information.
Specific information in sign language is more or less not available
Professionals of social and healthcare are not sufficiently informed about the specific needs of Deaf people. This lack of knowledge leads to not supplying older Deaf people adequately.
There are hardly any offers available that take the specific situation of Deaf people into account. There are only a few services specifically targeted at Deaf people. Therefore Deaf people are often faced with the difficult decision to give up their residence in favor of an adequate supply.
As a result we set up networks and develop and support specific offers.

| Higher need for rehabilitation among aging employees associated with | Riikka Shemeikka, Director, Research, Rehabilitation Foundation, Finland | Socioeconomic differences in self-reported need for rehabilitation among aging employees in Finland
Authors: R. Shemeikka, H. Rinne, A. Saares & M. Parkkinen, Rehabilitation Foundation Finland
Introduction
Rehabilitation and enhancing quality of work life are potential means for supporting longer working careers, but more information is needed on their possibilities. Self-reported need for rehabilitation reflects respondent’s health, work ability and functional ability. The main aims were to find out 1) Are there socioeconomic differences in self-reported need for rehabilitation among aging employees? 2) Do differences in quality of work life explain socioeconomic differences?
Methods
### Low educational level and socioeconomic status can be reduced by enhancing the quality of work life, A159

Data consisted 4 399 employees aged 50-64 interviewed for Statistics Finland's Quality of Work Life Surveys 2003, 2008 and 2013. Analysis methods included cross tabulation, logistic regression analysis, confidence intervals and age standardization.

Results
Among men and women, 32 % and 39 % had experienced need for rehabilitation, respectively. Higher educational levels were associated with lower need for rehabilitation. Among men, blue-collar workers had higher need for rehabilitation than other employees, while among women there was a linear decrease in need associated with an increase in socioeconomic status. Quality of work life affected the need for rehabilitation: insecurity factors, like a perceived threat of unemployment, increased the need, while opportunities to influence own work had an opposite effect. Quality of work life explained part of the socioeconomic differentials in need for rehabilitation. However, some factors, like discrimination in career advancement opportunities, increased the socioeconomic differences.

Conclusions
Low educational level and socioeconomic status were associated with higher self-reported need for rehabilitation. Enhancing the quality of work life would reduce this need and might serve as a potential tool for supporting longer working careers. Higher need for rehabilitation among aging employees, associated with low educational level and socioeconomic status, can be reduced by enhancing the quality of work life.

### Aging among people with disability in Uganda. Disability does not mean inability, A072

Paul Bamubingirire, Programs Director, Save the Marginalized, Uganda

Uganda is a land locked country located in Africa, East Africa. It has population of 34 million people according to census carried out in 2014. It was believed that Uganda has 24 % of people above 84 years and among these, 9 % were PWDs. We as save the marginalized and the government believe that disability does not mean inability to perform quality work, but what was observed during the census was lack of skills to start up income generating activity. Save the marginalized has come up with good models in financial management to help elderly people with disability to manage themselves through a small saving and loan association to create a better living.

Uganda has developed a scheme of helping the aging population through wealth creation in which it is training all people with disability to live meaning full through start up kit. The kit has things like seeds, cows, sewing machines which has helped the aging women to start weaving sweaters for school going children. Uganda before the previous world congress had a challenge of poor constructions in hospitals and public places with aging people with disability but save the marginalized and the government have been at the forefront of advocating for accessibility to all building and in doing so, the government has instructed all physical plan authority not to authorize any building without the ramp to enable the elderly to access.

In Uganda save the marginalized is working so much to develop the capacity of the aging people with disability in different areas like hygiene, health and reproductive health. Save the marginalized Uganda is planning and extending loan scheme for the aging people and these loans are in terms of kind. STM offers a goat and when it produces, it is passed over to the next PWD with the motive of eradicating poverty among the people with disability. This abstract is intending to offer you light on how other members of RI should adopt skills and techniques of how to solve the problem of aging PWDs in our communities.

In Uganda we love seeing independent aging PWDs which helps to increase the life span of PWDs. The Ugandan expected life span is 55 years from that of 50 hence good indication of improvement.

Written by
Paul Bamubingirire
Programs director save the marginalized
Uganda

MA project planning and management

### Young people
Menteith, Level -1

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<td>Rehabilitative Daycare from a dream to reality, A001</td>
<td>Dr Hadar Yardeni, Head of the Department of Child Development &amp; Rehabilitation, Ministry of Health Office, Jerusalem, Israel</td>
<td>The Rehabilitative Daycare law (2000) was designed to ensure that a toddler with a disability will receive adequate care suited to his individual needs. Rehabilitative daycare regulates (2008) the treatment package for a toddler, according to his medical and functional status. The regulations differentiate between toddlers with special medical needs, and with complex medical needs. The regulations state that the response to the toddlers' needs will be given by the addition of assistants' or nursing hours if he meets special medical criteria. This creates a legal requirement for the employment of several nurses in the same rehabilitation Daycare, without professional justification. In Israel there are currently operating - 120 rehabilitation Daycares, with approximately 2,200 toddlers. At the enactment of the law, the increase in survival of preterm infants and children with severe and chronic illness was not anticipated. The rehabilitation Daycare population has become medically more complex. The population nowadays includes many toddlers with special and complex medical needs. In 2015–71 infants entitled to rehabilitation Daycare remained at home because of difficulties finding a personal nurse. In many Daycares, in collaboration with the Ministry of Health, a “workaround” routine made possible to recruit staff but currently there's a growing gap between rule of law and staff reality. There is great importance in updating the Rehabilitative Daycare regulations, in terms of standardization, connecting the nurse to the classroom and not to the individual toddler, and providing some medical authority to the assistants, after suitable training.</td>
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### Self-Determination, Vocational Rehabilitation, Engagement, and Recovery from Consumers' Perspective: A Qualitative Study, A046

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<td>Jessica Brooks, Assistant Professor, University of North Texas, USA</td>
<td>Limited vocational opportunities can exclude people with severe mental illness from community participation, stall upward mobility, and compromise their mental health recovery. The purpose of this research was to conduct a qualitative study using consensual qualitative research (CQR) methodology to better understand self-determination in relation to vocational rehabilitation (VR) readiness and engagement. This project supported the involvement of mental health consumers as co-investigators in research by including certified peer specialists (consumers/practitioners) in all stages of the study. The results indicate domains, core ideas, and themes related to past experiences with vocational services, attitudes toward employment, social support, barriers and facilitators for work, conceptualization of self-determination, view of vocational and mental health recovery, advice for consumers and service providers, and other comments. The presenter will discuss the implications of the findings for rehabilitation policy, practice, and research.</td>
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### Parents’ Partnership with a Service Provider in Enhancing Service Quality and Advocating Policy Changes, A089

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<td>Becky Luk and Illya Ng, Executive Director and user’s sister, Fu Hong Society, Hong Kong</td>
<td>This is a co-authored presentation delivered by the Executive Director (starting off as a social worker) of Fu Hong Society (FHS) - an NGO providing rehabilitation services to persons with intellectual disabilities in Hong Kong - and a Service User’s family member. Through a storytelling approach, they give personal accounts on how the role of the Service User’s Parent has developed over the years and how this consequently led to the creation of Fu Hong Parents’ Association (FHPA), and the combined efforts have forged a better service. Before 1990s, parents of children with intellectual disabilities in FHS were passive service users who unquestionably accepted what was provided. Over the years, through the initiative of some parents and proactive support offered to parents by FHS, parents organized self-help groups, and in 2000 founded FHPA which became the lead organization in organizing social and recreational activities, initiating “parents helping parent’s programmes”, monitoring the FHS staff and service performance in operation, and providing consultations on important aspects of FHS’s service planning and development. In recent years, FHPA was invited to send their representatives to serve as members in Committees and Council of FHS - the highest governing body. At the community level, FHPA has on several occasions taken a lead in forming coalition with other parents’ bodies to advocate for policy reforms on issues relating to the needs of ageing Service Users and the long waiting list of residential services. Based on their intimate collaboration of over 20 years, both presenters have experienced pain and laughter and witnessed inspiration and strife. In conclusion, they present their views on how to achieve the optimal results from cooperation and collaboration based not only on agency belief, mission and policy but also mutual understanding, reciprocal trust and respect, and true conviction in user participation.</td>
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### Handling autism children -> accurate diagnosis, appropriate education, treatment & strong support, A061

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<td>Asvirety Nurgusmy Yerly, Asir, National Secretary, Rehabilitation International for Indonesia and YPAC/Society for the Care of Children with Disabilities, Indonesia</td>
<td>Autism is a complex developmental disorder. An accurate diagnosis is the initial steps necessary, furthermore, they need appropriate education, treatment and strong support almost all his life. Education and care are two things that are always needed by autistic children like two sides of a coin. Indonesia has set up the system of education and health services for citizens both non-disabled and disabled through Act No. 20 of 2003 and Act No. 36 of 2009. Every citizen has the same rights to obtain an education. And every citizen who has any kind of disorders are also eligible for special education. Prevalence of autism has increased, followed by an increase in public demand for the availability of education and health services. In response to the community needs it happens the rise of autism clinics and schools with a wide range in accordance with the perception and availability of their resources, funds, because there is no policy governing education and care for autism specifically. YPAC as the oldest social organization engaged in the field of disability, feel responsible for the availability of education and health services. The challenge then begins with the establishment of clinic Mitra Ananda in Solo in 2005. With limited funds, it has gradually developed towards Education and Health Service Center for autism where the whole family support all education effort, what do parents and siblings do for them?? will be presented by his mother and sibling.</td>
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### Parallel Session C

**Wednesday 26 October 2016, 1.30-3.00 pm**

**WHO GATE project**

**Tinto, Level 0**

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| Presentation from GATE Research Team at Trinity University, A172 | Professor Malcolm MacLachlan, Professor of Global Health, Director, Ce | What is GATE? What has it done so far? What does it hope to do? What do you think it should do? **World Health Organisation - GATE Project**

The World Health Organisation (WHO) GATE project is a global initiative to realise obligations of the United Nations Convention on the Rights of Persons with Disabilities (UN CRPD), towards increasing access to assistive technology. |
The Global Cooperation on Assistive Technology (GATE) is a flagship programme and is in partnership with Assistive Health Technology (AHT), stakeholders who represent international organizations, donor agencies, professional organizations, academia, and user groups.

**What is the GATE initiative?**

**The vision of the GATE initiative:**

A world where every girl and boy, woman and man in need has access to high quality affordable assistive products to lead a healthy, productive and dignified life.

The GATE initiative has only one goal: to improve access to high-quality affordable assistive products globally.

To achieve this, the GATE initiative focuses on four interlinked activities:

1. **Policy:** National assistive technology policy framework (ATPF)
2. **Products:** Priority Assistive Products List (APL)
3. **Personnel:** Comprehensive assistive technology training programme (ATTP)
4. **Provision:** Single-window service provision model (ATSP)

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**My presentation looks at my invention**

www.assist-mi.com to remove barriers to disabled people every day goods and services. My invention assist-Mi a platform now employing disabled people like myself, A164

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**Gary McFarlane, CEO, assist-mi.com, England**


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**Kaz Laljee, Founder and Director, Positive About MS & Soc-Med Ltd, England**

As someone who is disabled (Primary Progressive Multiple Sclerosis) I quickly learnt the value of using social media. The importance was on many levels; from the ability to chat with old friends and colleagues without having to go through the difficulties of organising places to meet up and planning journeys. To being able to contact and view aids, adaptations and other disabled products. It allowed me to have freedom, independence and most of all... Autonomy!

The aim is to allow people to realise the potential that social media offers. Yes they can use it as a communication tool, but it can also provide opportunities. Social media users can setup and create projects, organisations, groups, awareness and even businesses; such is the power of social media.

On a personal level it can provide that outlet when you need advice, support and help from others affected by disability. It can be used as a tool to get the views, opinions and thoughts of people who can relate to your situation. There are a large amount of people already using social media, however statistics show that use of social media is not as high in the charity/voluntary sector. This will also highlight to the businesses and organisations that are stakeholders in the disability/accessibility sector, the opportunity that lies with social media.

More than anything, social media gives you control; and with the accessible technology we have now, it makes social media accessible to a large number of people with disabilities. Having a smart phone and using social media lets you be part of the conversation and be in contact with the world and empowers the individual.

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**Chet Cooper, Ability Magazine**

Detail to be confirmed

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**The important of social media, especially if you're disabled, A007**

**The American approach to reasonable accommodations, A181**
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<td><strong>The development of Ten Good Practice Principles in Vision Rehabilitation services in England, A084</strong></td>
<td>Joshua Feehan, Project Manager, Royal National Institute of Blind People (RNIB), England</td>
<td>Losing your sight can be devastating, whether it is recent or over time. But it doesn’t have to be that way. RNIB’s priority is to improve the lives of every blind and partially sighted person and recognises the importance of vision rehabilitation. It is the responsibility of local authorities to provide vision rehabilitation to support blind and partially sighted people at this crucial time. These services provide essential training and advice to enable people to learn and develop the right skills to ensure they are able to get around safely, continue with work and to do the everyday activities that are important to them. However these services are under significant pressures due to increasing demands on health and social care and the decrease in local government budgets. RNIB’s latest research highlights that 20 per cent of those affected by sight loss were never contacted by their local authority for support and less than a third did not receive any mobility training (My Voice, 2016). There are inconsistencies in the quality of service provision, therefore RNIB have devised Ten Principles of Good Practice in Vision Rehabilitation to address this. These principles detail all aspects of what a person with sight loss should expect including what should happen when they are contacted and when they are assessed. The principles are built upon existing evidence including the Care Act (2014) and extensive consultation was carried out with over 130 sight loss professionals and blind and partially sighted people. RNIB hopes these principles will help raise the standard of services across England and empower blind and partially sighted people to know what good vision rehabilitation looks like, launched in July 2016. We want to share our principles to a global audience and seek feedback on what is happening in this area around the world.</td>
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| **Demographical challenges..? Solution: Presentation of practice-based interdisciplinary rehabilitation with welfare technologies at Vikaergaarden, Aarhus, Denmark** | Kathrin Schmidt, Research Assistant, Technical University of Munich, Germany | The new Sustainable Development framework aims at guiding global development until 2030. Whilst the MDGs did not explicitly mention the importance of including persons with disabilities in the development agenda, the SDGs mention disability in seven of the 169 targets. The UNCRPD can easily be linked to the idea of sustainable and inclusive development: many of the rights enshrined in the UNCRPD directly relate to specific goals mentioned in the Sustainable Development framework. To ensure that persons with disabilities are adequately and sustainably considered in the process of implementation, it is necessary to apply different strategies. Not only is it crucial to convince politicians and development planners currently in office to include persons with disabilities in development processes, it is also timely to mainstream the topic of inclusive development in different study programmes to ensure that future professionals are able to think inclusively. The project “CBResearch”, which is carried out by Pwani University (Kenya) and Technische Universität München (Germany), focuses on the development of 4 modules based on the CBR matrix. The modules aim at linking the CBR Guidelines with theoretical concepts to provide an introduction to (dis)ability and CBR from an academic point of view. Besides investigating inclusion in the areas of health, education, social life, livelihood promotion and empowerment, it is also important to acquaint students with various approaches used to involve persons with disabilities as ‘experts in their own affairs’. Using an online platform the modules can be extended and updated continuously. Further modules can be added during or after of the project. At the end of the project, the modules will be publicly accessible and can be used to mainstream (dis)ability into study programmes. The paper will present the project outcome so far and discuss possibilities to insert the study modules into different study programmes. |

| **Analysis of the needs for the disabled residents in rural area, A135** | Inger Oddershede, Lotte Lucia Jelnes and Monica Ekström, Medical Rehabilitation Center, Aarhus, Denmark | Interdisciplinary rehabilitation and independently living with welfare technologies As an appetiser for the RI World Congress 2020 in Aarhus we will present Vikaergaarden a medical rehabilitation unit and center for testing and evaluation of welfare technology in praxis. Some examples of projects:  
- Monitoring of the sleep quality,  
- Implementing new virtual physical training programs.  
- Testing an evaluation device for a more general evaluation of the technologies. The presentation will be interdisciplinary presented by a nurse, an occupational therapist and a physiotherapist and will concern how we include welfare technology as a part of interdisciplinary investigation and rehabilitation in Aarhus. The Council have, as part of profound impairments and as a solution to the demographical challenges, decided to implement welfare technologies. The purpose is to make the citizens more independent and able to stay longer in their own home with minimum homecare without compromising the safety of both the citizens and the staff within the Social Healthcare Service Act. Every day we work interdisciplinary with testing, evaluation and implementation of the welfare technologies. We cooperate closely with the citizens, staff and companies; this gives us the opportunity to find out what specific products are best for the citizens in every given situation. Our experience gives decision makers a better basis for assessing which technologies needs to be implemented. With this presentation we want to give the participants a practice-based presentation of how we at Vikaergaarden test, evaluate and implement welfare technologies in the care and rehabilitation of the citizens. |
### Creative rehabilitation projects

**Kilsyth, Level 0**

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<td>Old Persons with Disability: The Development of Ageing Resilience</td>
<td>Dr. Lillis Heri Mis Cicih and Sri Rachmad, Lecturer and Researcher, University of Indonesia, Indonesia</td>
<td>Most of country in the world have faced ageing population is an emerging issues to development. Disability regarding to the ageing group of which caused by the reducing health and functioning physical of body can be included into persons with disability conceptually. The important factor of the healthy, active and productive ageing is resiliency, and it was indirectly associated with successful ageing. Related to some factors stated that resilience of ageing concept links to ability of disability health and productive ability. It was developed a new concept related to resilience of ageing, based on economic, health, environment, and social dimensions. It has direct indicators measurable, and could be used as a tool of elder’s problem detection among countries. Therefore this concept can be used by the government to prepare the resilience of the population in order to achieve healthy, active, and productive ageing. To enhance the prevention programs rather than treatment and strengthen the people for resiliency. The objective of study was to develop an Ageing Resilience Index (ARI), to present the relative ranks of 171 countries in the world. This study used cross sectional data from various sources of global data. The concept of ageing resilience based on the three concepts such as active ageing, national resilience, and sustainable development, with the countries as unit of statistical analysis. The ARI was developed based 19 indicators, where score of ARI is increasing in accordance with increasing in the ageing quality of life. The result of factor analysis based on four latent variables namely economic, environment, health, and social with the weight of 0.28, 0.25, and 0.23 respectively, the KMO value is 80%. At 1% significant level, this ARI has significant correlation of r=0.93 with HDI for 171 countries. The ARI could be implemented to measure the quality of life differences between the countries. Continued research encourage to replicate these findings is needed so to be able to recognize ageing resilience and implement in each country level.</td>
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<td>Describing the experiences and needs of disabled persons in a time of terror or war</td>
<td>Carmit-Noa Shpigelman, Assistant Professor, University of Haifa, Israel</td>
<td>Background: Exposure to chronic political violence such as terror, war, or continuous missile attacks has been found to be associated with mental and physical health problems, including elevated levels of anxiety, posttraumatic stress disorder, depression, health problems, and functioning difficulties. Studies that explored the impact of exposure to political violence have not included individuals with lifelong disabilities who may be at higher risk than the general population. Methods: The objectives of the study were: (1) to understand, describe, and map the experiences, challenges, and needs of individuals with lifelong disabilities, who have been exposed to chronic politically violent events in Israel; (2) to produce a list of recommendations on how to accommodate the emergency and rehabilitation services or to create new services that will meet the needs and protect the safety of this population. The study was conducted within the phenomenological-constructivist paradigm. Three focus groups consisting of 18 individuals with lifelong disabilities were conducted; each focus group included a specific disability type (physical, visual, and hearing impairment). Results: The participants reported encountering environmental barriers that limited their functioning and thus increased their level of distress. The participants also reported their needs at both personal (e.g., having a safe place and training sessions on how to cope successfully with chronic politically violent events) and organizational level (e.g., accessible public shelters and trained service providers who would be able to locate, communicate with, and assist individuals with disabilities during security threat situations). Conclusions: The study has important implications for rehabilitation practices in terms of learning how to accommodate services to meet the needs of individuals with disabilities in a way that should protect their safety and ensure their quality of life.</td>
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<td>Mobility through Participation for manual wheelchair user</td>
<td>Tanja Bungter, Researcher, Research Institute for Inclusion Through Physical</td>
<td>Background: Persons with acquired SCI need to develop and maintain adequate wheelchair mobility for more participation and inclusion. The project “Mobility is Participation” supported by the German Social Accident Insurance (DGUV) collected standardized data on wheelchair mobility and queried the need for advice on sport activities and courses that are located nearby the individuals. All data were forwarded to five guides throughout Germany who use a wheelchair themselves. These guides advised patients on regional sport activities and supported motivation for lifelong physical activity (peer concept). Methodology: The target group is individuals insured by employers’ liability insurance associations and accident insurances with acquired SCI using manual wheelchair. Standardized data were collected and analyzed to develop a manual that provides advice on how to participate in sport activities. The guide was tested in a pilot study with 20 participants who had SCI and used the manual. The evaluation showed that the manual was helpful and easy to understand. The guide was then revised and disseminated to all participants in the study. Conclusions: The guide was found to be helpful and easy to understand. It provided valuable information on how to participate in sport activities and was found to be effective in promoting wheelchair mobility and participation.</td>
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The need for choice within communities and care options to promote opportunities for autonomy, A047

Claire Turnbull, Transition Team Manager, Children’s Hospice Association Scotland, Scotland

Young people living with life shortening conditions are living longer and well into adulthood; however there is a currently emerging trend that their communities and the services they access are not able to meet their needs. Young disabled people are demanding more is done to provide them with help they need to live the lives that they want, and to support their aspirations around work, relationships, learning and social engagement. They often say to us ‘there is nothing out there’ and this reduces their opportunity for autonomy and independent living.

The Transition Team in CHAS works directly with young people and their families who are moving away from both CHAS and paediatric services, into adulthood and age-appropriate resources. Our current 3 year project has drawn some initial conclusions and found that young people are asking for increased specialist provision, as well as increased opportunities for inclusion. Having choices and a range of options gives increased opportunities for autonomy, and as such, all communities and professionals need to work together to increase these opportunities.

In this workshop we will demonstrate how our direct work with young people is supporting change and aspirational thinking on their part, in a group of young people who have complex medical needs who wish to achieve more from life but have all too often lost the confidence to do so. We will examine initial findings from our work to date, and explore how we hope our project evaluation will influence future service delivery through the recommendations made. Some examples of how we have influenced current practice and created small yet significant changes within options offered for young people leaving our service will be shown, and we will highlight the needs of this cohort of young people.
Activity and Sport, Germany

on wheelchair mobility were collected in eight rehabilitation clinics using the “Activity Test on Wheelchair Mobility” (AWM). Data were completed with questionnaires on wheelchair mobility and physical activity. If advice and special support were needed, regional guides counseled individuals on possible sport activities and documented their advice using checklists.

Results
Between 03/2013 and 06/2015 a sample of 308 persons was gathered (91.9% male, 46 ± 11 years old, 76.3% paraplegia). According to the results of the “AWM” there was a medium or high need for action in 40.3% of all cases. 59.7% requested advice on sport activities located nearby. Five guides conducted a total of 161 consultations. 94.5% of the study participants rated the project using guides for advice as useful. 27.4% regularly participated in suggested activities, 13.7% participated irregularly and 28.8% plan on participating in suggested activities in the future. After the consultations, 18.6% joined a sports club and 20% plan to do so in the future.

Conclusion
Along with questionnaires, the “AWM” is suitable for an economic screening of wheelchair mobility. Working with advisory guides to support mobility during movement-oriented aftercare proved effective. A consistent nationwide approach will be pursued.

Towards a biopsychosocial approach of the disability: improvement of wheelchair and disability sectors in Romania, A174

Garnier Erika Andreia, Peer Group Training Coordinator, Motivation Romania Foundation, Romania

Within our new project, developed in partnership with Shaw Trust, we aim to strengthen the wheelchair sector in Romania to ensure people with mobility disabilities are able to access appropriate products through qualified service providers, allowing full participation in their communities.

On the other hand, we aim at strengthening the entire disability sector in Romania to ensure that different categories of specialists are able to approach the disability issues in an integrative biopsychosocial manner.

- The activities planned to take place focus on wheelchair service and ability trainings.

Wheelchair services
Motivation brings together an unparalleled team of professionals (wheelchair users, physical therapists, technicians, social workers, psychologists) to improve the quality of wheelchair service provision through:
1) Fostering an enabling environment toward effective wheelchair service development and management through stakeholder engagement and mobilization as well as local and national level advocacy efforts;
2) Expanding wheelchair service provision by diversifying the range of available products and bolstering the management and service capacity of all local partners;
3) Delivering WHO basic and intermediate training to wheelchair service personnel (managers, clinicians, technicians, trainers) to increase the human resource capacity for quality wheelchair service delivery in Romania.

Ability Trainings
Disability professionals from departments for social assistance, employment agencies, central and local authorities, NGOs, job recruitment agencies, social and employment service providers, schools etc. will receive disability awareness trainings each year. They will be included either in courses on the WHO International Classification of Functioning, Disability and Health, or in Employment Services Trainings, in order to develop a more complex and client-centred approach.

We also aim to provide training to family members, students and teachers.

Employee engagement
Carrick, Level +1

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<td>Exploring Tasks and Functions of Representative Bodies of Employees with Disabilities (RD) in German enterprises, A073</td>
<td>Stephanie Kohl, Scientific Associate, University of Cologne, Chair of Labour and Vocational Rehabilitation, Germany</td>
<td>One specific group of rehabilitation experts in German private and public sector are representative bodies of people with disabilities (RD), elected as a spokesperson by vote of workers with disabilities. Their extensive rights and duties are described in social security code 9 (SGB IX), including work integration, representing disabled workers' interests and counseling of workers with disabilities. Potential tasks and functions seem to have increased after ratification of UN-CRPD. Theoretically, these experts on social law can hold a key position in prevention of work disability and return to work, but expectations are limited by available resources in terms of time and capabilities. Thus, objective of the present study is to explore actual fields of activity of RD in contrast to tasks they consider to be essential. One of the few German studies on rehabilitation experts fields of activity was conducted by Niehaus et al. (2013) using a combination of the Rehabilitation Skills Inventory-Modified and the International Survey of Disability Management in a German translation. The sample of the study includes data of 21 RD, which is reanalyzed for the present paper to get a first exploratory impression of RDs tasks and functions. Exploratory analysis shows that RD chose more fields of activity to be of high importance than they were able to carry out regularly. For example 'representing the importance of disability management to corporate stakeholders (i.e. employers, worker’s unions)' was identified as very high in importance, but could only be engaged in less frequently. The study results in a first empirical description of tasks and functions of representative bodies of people with disabilities in Germany. It serves as a starting-point for further systematic research focused on their valuable role in inclusion in the workplace, shedding a light on the gap between raised expectations by UN-CRPD and limitations of everyday practice.</td>
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Research findings on policies and | Dori, Director, Center for | I wish to describe some of the research finding about policy and programs in Israel to increase employment of people with disability. One example is the 2009 amendment to the Social Security law, which allows people to earn money without losing their disability benefits. Only a small percent of people receiving disability entered employment following this law. A survey and focus groups among disability benefit recipients showed that most people are not sufficiently aware of the reform, or do not trust that they will... |
<p>| Programs to increase employment among people with disability in Israel, A079 | Disabilities, Myers-JDC-Brookdale Institute, Israel | be able to keep their benefits, upon which they depend. In addition, they are not aware of supported employment programs and need help in accessing them. I will also present some of the finding from the evaluations of three supported employment programs, using quantitative and qualitative methods. Each of the programs operated differently and was intended for people with a different disability - high functioning autism, borderline intellectual functioning, and ADHD. I will focus on common challenges which emerged, such as: 1) High turnover is common among the direct staff of these programs, and proved detrimental to the clients' in their process of seeking and adjusting to employment. 2) Clients often experience vast disappointment when confronted with the gap between their aspirations and the work options available to them, based on their abilities and the job market. They need sensitive yet realistic help in dealing with this. 3) The conditions that the clients need at the workplace, are not directly related to their diagnosed disability, and need to be carefully examined and defined. These findings can help in developing more effective ways to assist people with disability to find their place in the work market. |
| Utilizing the Systems Approach to Placement (SAP) based on the data collected in the USA, Japan, and Taiwan, return to work competencies and research issues will be presented, A102 | Jun Yaeda, Rh.D., Associate Professor, University of Tsukuba, Tokyo, Japan | Japan does not have a professional accrediting agency like the Council on Rehabilitation Education in the USA. Although Japan has been providing numerous training for job coaches, they are insufficient for RTW professionals. They encounter significant challenges and resulting stress in providing quality RTW services. A study with 398 Japanese job coaches found that having insufficient competencies was one of the main reasons for their work stress (Ishihara &amp; Yaeda, 2009). Therefore, this study was conducted to assess the self-perceived knowledge and skills of Japanese job coaches in providing quality RTW services to persons with disabilities. Return to work competencies of job coaches in Japan was assessed by Yaeda, Kundu, and Nishimura (2013), using one of the instruments of A Systems Approach to Placement (SAP), called Self-Assessment for Students or Counselors (SASC) (Kundu, Dutta, Chan, Torres, &amp; Fleming, 2011; and Kundu, Dutta, &amp; Chan, 2010; Kundu, Schiro-Geist, &amp; Dutta, 2005). Participants were 479 job coaches representing Work Support Centers or Work Support Agencies. A Japanese version of the 80-item Self-Assessment for Students or Counselors (SASC-J) was mailed to the participants. The overall Cronbach’s alpha coefficient was .98 (N=479). There was no significant difference in any of the SASC-J in 8 subsystems mean scores between the groups. The highest mean score of these 2 groups was the “Placement Personal” (2.30 and 2.31), and the lowest was the “Education” (1.40 and 1.46). The overall mean score of the SASC-J was 1.82 (SD = 0.63). A significant but moderately strong relationship was found between years of experience and the SASC-J (r = 0.30, p &lt; 0.01). The highest and lowest 10 competencies indicate the need for extensive education, training, certification, and licensure of RTW professionals in Japan. |
| Status of vocational competency development services for person with disabilities in Korean employment policy, A126 | Heung-Seek Cho, Ph.D., Professor, Seoul National University, South Korea | Recently South Korea is one of the richest countries in the world, however for the past 40 years it was one of the poorest countries. Through that period the government made every effort to improve both its economy and also welfare for its people with disabilities (PWD), and non-disabled people. But this doesn't mean that PWD don't face any challenges. In general, securing the fundamental human rights of PWD, such as the right to live and work, should be the basic ideology for employment of the disabled. Once this ideology is realized and practiced, the pursuit of equal employment opportunities for PWD would enable them to lead an equal life. In this regard, the employment policy for PWD is at the heart to ensure full participation and equal opportunities for PWD. Securing a job is more than a source of income and it is closely related to social integration, and status of vocational competency development services for PWD is very important in employment policy. Moreover, the population of Korea is on a decreasing trend and the workforce is expected to dwindle as well. It has been emphasized to expand the employment opportunities for PWD to create new workforce. The objective of this study is to let the world know the Korean vocational competency development services for PWD. Therefore this study will firstly introduce current population trend of PWD in Korea, secondly present Korean employment policy and system, and status of vocational competency development services for PWD, and finally suggest future policy directions for PWD in Korea. |
| Enhancing Income Generating for Persons with Disabilities through Environmental Activities, A056 | Judith Simbara, General Secretary, YPAC Nasional/ Indonesian Society for the Care of Children with Disabilities, Indonesia | Indonesian population of 250 million, 10% of it, has been identified as persons with disabilities (WHO report). The Indonesian Government has applied a quota of 1% for Indonesian companies to absorb workers of persons with disabilities. But, at the end, not only the quota cannot cover the high demand of seeking for suitable work for persons with disabilities, the minimum requirements to fill in the offered posts often cannot be met. This stemmed from various reasons, from the lack of proper training before entering the job market to the scarcity of access in obtaining a higher education and training for persons with disabilities to equip themselves to meet the required standard. On the other hand, fund for social activities cannot easily be obtained nowadays in this country (unlike when you seek sponsorship for entertainment events, etc.). In the budget constraints type of world that we are living now, we cannot rely on the mercy of others to provide persons with disabilities with suitable work. There must be other ways to show the potentials of persons with disabilities and involve their participation in the development activities in the country. One of the solutions is a cross-cutting issues of disabilities related activities with the environment issues. We may combine the activities from the recycle to planting activities. &quot;Kacang Koro&quot; a peanut plant for example, could be utilized for the nutrition for autism children. The idea is also to combine the Community Based Rehabilitation activities with preserving the environment through income generating related activities which could be implemented by persons with disabilities as pre-vocational training. Community participation may also trigger the issuance of local policy towards providing more attention to the needs of persons with disabilities (synergy activities with the local government and private sectors for the required training). |</p>
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| Planning and performance of post-discharge rehabilitation of older adults after hip fracture, A040 | Monica Milter Ehlers, PhD candidate, MSc in Nursing, RN, Department of Public Health, Aarhus University, Denmark | Title: Multidisciplinary post-discharge rehabilitation of community-dwelling older adults after hip fracture
Purpose: To investigate the planning and performance of post-discharge rehabilitation of community-dwelling older adults after hip fracture performed by an outgoing multidisciplinary hospital-based team and a municipal rehabilitation team.
Method and methodology: Post-discharge rehabilitation of community-dwelling older adults after hip fracture performed by outgoing multidisciplinary teams has been sparingly investigated in scientific studies. To investigate cooperation and diversities in the planning and performance of post-discharge rehabilitation, we performed focus group interviews with healthcare professionals from a hospital-based team and with a similar group from a municipal rehabilitation team. The recorded and transcribed interviews were analysed according to deductive content analysis; the International Classification of Functioning, Disability and Health (ICF model) was used as theoretical framework.
Findings: The planning and performance of post-discharge rehabilitation differed between the teams because one team used a biomedical and the other a biopsychosocial model of rehabilitation. Neither of the teams assessed the mental functions of the older adults, and information on planning, performance and goal-setting were sparingly shared between teams.
Implications of findings: Lack of information about core services and different approaches towards the older adults’ rehabilitation resulted in fragmented and overlapping elements of training and care. A structure based on the older adults’ goals, the components of the ICF model, and the services provided by each individual team is suggested to promote between-team cooperation and thus optimise the rehabilitation process. |
| The German recommendations for post-discharge neuro-rehabilitation: aiming at inclusion in all areas of society, A074 | Maren Bredehorst, MPH, PhD, Project coordinator, Bundesarbeitsgemeinschaft für Rehabilitation e. V., BAR (German Federal Rehabilitation Council), Germany | Purpose: to improve services for people with persistent disabilities due to acquired brain injury after discharge from in-patient treatment. During this phase of individual rehabilitation, it is necessary to select and coordinate services from and within various sectors such as medical and nursing care, social care, assistive technology, occupation, education and leisure. The overarching aim is to support participatory goal setting and decision making in rehabilitation, towards inclusion of disabled people in all areas of society.
Methods: The publication of the neurological-neurosurgical rehabilitation model (phase A to E) developed by major public funding bodies of rehabilitation in Germany recently had its 20th anniversary. For each phase, medical entry and exit criteria, goals and measures of treatment have been defined in subsequent multi-stakeholder negotiations hosted by the Federal Rehabilitation Council (BAR). Phase E originally focused on securing achievements of medical rehabilitation and on occupational reintegration. During the negotiations at BAR (2011-2013), the focus was broadened to include all above mentioned sectors. Services regulated in various legislative texts have been regrouped according to which rehabilitative goal they may contribute to in the individual case. The consented recommendations thus provide a canon of possible services and indicate respective funding bodies.
Implications: Negotiations of this kind are part of the self-regulation mechanism within the German rehabilitation system, which is characterized by its large variety of funding bodies. The phase E-recommendations help to make responsibilities and competencies of funders more transparent, so that people with acquired brain injury and their supporters know who to address. Hence they are also a good tool for case management. From a funder perspective, they constitute an important move away from the medical model towards a more social model of disability. Funders are now requested to re-orientate their services and quality criteria respectively and to engage inter-sectoral cooperation. |
| A critical discourse analysis of current rehabilitation policies’ effect on rehabilitation conceptualisations and practices, A134 | Anne-Sline Bergquist Reberg, Head Nurse, Ph.-d. fellow, Sunnaas Rehabilitation Hospital, Norway | Rehabilitation services are today influenced by growing medical and social knowledge and by global trends in integrated care: The expanded conceptualisation of objectives in services has developed rehabilitation to encompass social perspectives such as quality of life, human rights, and equal opportunities for people with disabilities. Political strategies of health costs, allocation of benefits, and effectiveness simultaneously affect the organisation and provision of rehabilitation services. This paper directs a critical gaze on policy developments for disabled and chronic ill using the case of Norway. Inspired by the work of Norman Fairclough (2003, 2013), it undertakes a critical discourse analysis of the interaction between medical and socio-political discourse in two influential White Papers in order to: 1) describe how the government’s political approaches appear in the texts, 2) interpret how these policies contribute to change conceptualisations of rehabilitation, and 3) discuss how expanded social perspectives redefine rehabilitation practices. As such it touches upon relevant critical medical sociological concerns.
The way medical and socio-political conceptual models are embedded in the two White Papers has revealed three orders of rehabilitation discourse: The discourse of ‘reaction’, the discourse of ‘action’, and the discourse of ‘pro-action’. The analysis outlines the repositioning of rehabilitation to adhere to socio-political approaches; however, a critical question is whether an identified ‘Socio-political Turn’ has some unintended consequences.
A major finding is how discursive practices enable governance by encouraging certain conduct and structuring possible actions by different people (Mills 2011) within the rehabilitation field in order to reduce health cost. Central is how current techniques of government see the individual as basic entity to which government is applied. Policies of self-conduct – or governmentality – are legitimized by associating viability of the population (Fadyl 2013), coordination strategies (Fossestøl 2009), and welfare state sustainability (Breimo 2016). |
| Assessing Vocational Rehabilitation Engagement of | Dr Madan Kundu, Professor and Chair, Southern University, | Empowering individuals to actively engage in their own treatment is increasingly considered a cornerstone of high quality health care and rehabilitation services (Barello, Graffigna, Vegni, & Bosio, 2014; Couler, 2012; Kang, Magura, Blankertz, Madison, & Spinelli, 2006; O’Brien, White, Fahmy, & Singh, 2005; Qazi et al., 2012; Tait, Birchwood, & Trower, 2002). A growing body of literature links patient engagement to health outcomes, health care costs, and patient satisfaction (Hibbard & Greene, 2013; Hibbard, Stockard, Mahoney, & Tusler, 2004; Wild, Cunningham, & Ryan, 2006). Despite demonstrations of the positive effects of client engagement in health and rehabilitative care on outcomes, there is not a practical, valid, and reliable brief measure to assess client engagement in |
### Inclusive societies

**Harris, Level +1**

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<td>Accessibility as an issue of the majority, of anti-discrimination, human rights and economy, A065</td>
<td>Max Rubisch, Head of department, Federal Ministry of Labour, Social Affairs and Consumer Protection, Austria</td>
<td>I will show the different aspects of accessibility. Accessibility is a majority issue: it concerns not only people with disabilities, but also older persons, persons with mobility problems and persons with heavy luggage – it concerns the majority of the population and it is comfortable for everyone. Accessibility is an anti-discrimination issue: in the Austrian Disability Equality Law, physical or technical barriers or barriers in information can be considered as discrimination on grounds of disability and can lead to financial compensation. But the Disability Equality Law is not enough – it must be complemented by other rules which require the accessibility of buildings, transport, information and communication. Accessibility is a human rights issue: the UN-Convention on the Rights of Persons with Disabilities (CRPD) wants to ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities. It requires an accessible environment to enable them to live independently and participate fully in all aspects of life. There is no independent living without an accessible environment. Accessibility is also an economic issue: in a short-term perspective it means additional costs. But there is evidence that investments in accessibility in a long-term perspective can avoid or reduce costs in many areas of society. In December 2015 the European Commission proposed a directive which will set common accessibility requirements for certain products and services related to information and communication in order to implement the CRPD on European level (European Accessibility Act). The directive aims to improve the functioning of the internal market, making it easier for companies to provide accessible products and services across borders. People with disabilities should benefit from a greater supply of accessible products and services at more competitive prices.</td>
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<td>The Effects of stigma in the workplace - mental health, A049</td>
<td>Jeanette Irwin, Customer service representative, Ecomaster, England</td>
<td>Working is the accessible right to all, it allows independence and gives people an income to freedom, without the support of businesses on health issues nothing will change and people who suffer from disability, mental health and other factors will never get the support they need. Offering support in the workplace to combat stress, understand healthcare and especially mentally health will prevent, promote and support lessening suffering creating inclusivity and it will allow for change in terms of absence and procedures and policies that do not always work for certain individuals. Any absence procedure should be based around a person centred approach the same with any type of learning and development. Making these factors fit for only certain types of people discriminates against lots of individuals. For the mental health of creators, visionaries, business leaders and to enhance the world of work this needs to change. Carl Rogers impacted healthcare in a huge and monumental way and this approach should be reflected in the work place, humans are not machines, robots or tools. Every person is motivated differently and everybody can achieve something. We all need one world that embraces all to make a positive and lasting difference to others. Make disability seen and not unheard.</td>
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**People With Disabilities: A Factor-Analytic Approach, A140**

| Department of Rehabilitation and Disability Studies, Baton Rouge, Louisiana, USA | VR services. The purpose of this study was to validate the Vocational Rehabilitation Engagement Scale (VRES) in a sample of state vocational rehabilitation (VR) service consumers. A total of 277 individuals with disabilities were recruited from Alaska, Kentucky, Florida, Michigan, New Mexico, Texas, Utah, and Wisconsin. The measurement structure of the VRES was evaluated using exploratory factor analysis and confirmatory factor analysis. Exploratory factor analysis results support a one-factor measurement structure of the VRES. Confirmatory factor analysis results also indicated a good model fit for the one factor measurement model. Internal consistency reliability (Cronbach’s α) for the scores on the VRES was computed to be .94. VR engagement was found to be associated with working alliance, vocational self-efficacy, internal motivation, and VR outcome expectancy in the expected direction. The VRES is a brief, reliable, and valid instrument for assessing VR engagement and contributes to the use of self-determination as a paradigm for improving motivation and engagement of people with disabilities receiving services from state VR agencies. |

**Standardized toolkit providing education and training tools for professionals working with individuals with Intellectual disabilities, A161**

| Chrisann Schiro-Geist, Ph.d., CRC-Full professor; Director of Institute on Disability, The University of Memphis, USA | Young Adults with intellectual and developmental disabilities (IDD) have traditionally struggled with transitioning to adulthood, particularly as it relates to employment and independent living. Only in recent years has there been a global increase in promoting the importance of working with this specific population of individuals with disabilities. The mapping of policy and service provision for people with IDD has been completed in 147 countries and both ID and autism have been included in WHO’s flagship mental health Gap Action Programme (mhGAP) (WHO 2008, 2010). As outlined in the Workforce Innovation and Opportunity Act (WIOA) of 2014, it is essential to improve the services and policies that foster the independence and social integration of transition-aged individuals with IDD. These services and policies often focus on improving individual skills related to employability, independent living, self-advocacy, and interpersonal interaction in secondary special education programs, but are often inadequate to meet all the needs of every student of this very diverse population. In an effort to address this global concern and to create a more inclusive world for individuals with IDD, rehabilitation professionals need to adopt adaptive, action-oriented practices to help transition young adults with disabilities to competitive employment and Independent Living. This presentation will introduce the Systems Approach to Life Transitions (SALT), which is a standardized toolkit providing education and training tools for Rehabilitation professionals. Derived from a person-centered perspective, the SALT toolkit can be used to create an Individualized Plan for Independent Living, and the equivalent of an Individualized Plan for Employment (IPE), in parallel with the Vocational Rehabilitation (VR) system. Following the presentation, the audience will be able to analyze and discuss SALT, and will able to specifically relate this information to working with individuals with IDD in global context. |
| The lived experience during transition from adolescence to adulthood for young people with cerebral palsy, A076 | Paul Boyle, Senior Lecturer, University of Brighton, England | More children with cerebral palsy are living through to adulthood and it may be that societal expectations are increasing regarding quality of life for people affected by disability. 'Growing up' may involve completing or furthering education, starting employment and entering into relationships – along with becoming increasingly independent. This may be challenging however for a young person living with a disability. It is this experience of life during these early adulthood years that interests the researcher. Similar studies have been carried out in other countries but not in the United Kingdom. Statutory services may be well established for children with cerebral palsy, but it appears the transition to adult services can be difficult, and there is limited research relating to how to support young adults to live meaningful lives. This poster presentation will outline a proposed doctoral study designed to answer the research question: What are the challenges that young people with cerebral palsy have experienced during their transition from adolescence to adulthood? A variety of methodologies have been considered, however the phenomenon of living with disability has become ever-more apparent and a phenomenological approach has been decided upon. If there is an increasing cultural expectation for the quality of life for those affected by disability to improve, then it would be reasonable to acquire a better understanding of the aspirations of young people living with cerebral palsy and the challenges they have experienced, in so doing illuminating what their life world is like. The poster will outline the preliminary research design with particular consideration to background literature and research methodology. The design is ongoing and a process of consultation with those affected by disability is currently underway. With this in mind it is hoped that feedback from conference attendees will be forthcoming. |
| Should disabled people be included in development programmes, A149 | Peter Ghaali, Executive Director, Support Needy Lovely Centre, Uganda | The answer is YES. Disability is present in all communities; it cuts across all economic classes, affects people of all ages and gender. Whether it’s providing advocacy advice to disabled people in developing countries, or sharing their perspectives at the United Nations, our job is to ensure the voices of disabled people are heard. During the time of millennium development goals, it is clear that people missed out opportunity. In this contest People with impairments, some of the poorest and most marginalized people in the world including Uganda in particular are often the last to benefit from various programmes designed to reduce poverty and marginalization. In 2015 the eight Millennium Development Goals (MDGs) that have guided development work since 2000 will be renewed. The MDGs have secured impressive progress on reducing extreme poverty, increasing primary school enrolment, and achieving gender equality. But the Goals were silent on disability; as a result disabled people have been forgotten by mainstream development work. What have we done to amplify the life of these groups:- GOVERNMENTS, PRIVATE SECTOR, and CIVIL SOCIETY where We support other NGOs and civil society organizations to create programmes and policies that are leaving no one behind. As The slogan ‘Disability is not inability’ is becoming increasingly visible as disabled people raise awareness of their rights and potential. People with all kind of impairments are calling for their skills, ambitions and talents to be recognised and for their views and needs to be properly represented. Disabled people have a right to participate in, and benefit from, development and their inclusion will help reduce the inequalities that are slowing down progress on the elimination of extreme poverty. The best approach is to works with local, regional and national groups of disabled people. They are central to our work. We believe nobody better understands the needs of disabled people, or how to overcome the barriers blocking inclusion, than disabled people themselves. These are local groups, run by and for disabled people. They come together to campaign for equality and to implement projects to change lives. We support them to turn their passion into powerful action. We give them the practical tools to progress their agenda and to build sustainable organisations that can scale and have ever increasing impact. Through Disabled People’s Organisations and their local networks we can reach the most isolated and least-served disabled people in communities. |
| Specifics of young adults with psychological disabilities in occupational rehabilitation, A014 | Silke Tophoven, Research Associate, Institute for Employment Research, Germany | In Germany, occupational rehabilitation generally helps people with disabilities to return to work. Furthermore, it helps young adults with disabilities to obtain vocational training in order to integrate in the labour market. These young adults often have learning disabilities. In recent years, a growing number of people with psychological disabilities can be observed. The purpose of this study is to describe the specifics of these young adults with psychological disabilities in occupational rehabilitation. Therefore, we have chosen a mixed-methods approach. On the quantitative side, we use administrative data of the German Federal Employment Agency. Thus, we are able to provide representative information on all people starting occupational rehabilitation between 2007 and 2014. On the qualitative side, we analyse biographical interviews of young adults in occupational rehabilitation. Thus, we are able to describe their specific life context and occupational rehabilitation process based on their individual perspective. In comparison with the population of occupational rehabilitants in general, persons with psychological disabilities are older and have a higher educational level. They more often show disrupted paths after school. The biographical interviews show that the stabilization of their psychological diseases plays an essential role within the process of occupational rehabilitation. Furthermore, the qualitative data reveals that psychological disabilities often occur in addition to another disability. This cannot be seen from our administrative data source. The growing number of young adults with psychological disabilities challenges the occupational rehabilitation system, as they need a strong psycho-social support during their occupational rehabilitation process. Especially with regard to the labour market integration, a good transition management seems to be central, as transitions are difficult to manage for young people with psychological disabilities. |

### Independence

**Poster**

**Lowther, Level -1**

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<td>How Neatebox utilises existing technology to</td>
<td>Gavin Neate, CEO and Founder, Neatebox, Scotland</td>
<td>Neatebox uses proximity aware technology to provide solutions. Our work is focused on ensuring solutions are inclusive by design. Using existing technology within smart phones and adopting advances in Bluetooth Low Energy (BLE) and Beacon Technology, Gavin and his team have developed a range of solutions that underline smart technology and its ability to be used by all. The products deliver solutions that can be used by anyone, including those with a disabilities or impairment, creating ‘a one product fits all offer.’</td>
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| **Introduction** | Although the home as a major importance in people with disability lives, few studies address disability in the literature on home and health for people living in private housing. Home has rarely been explored as perceived by people with disability and their family members, in their day-to-day lives. | Delphine Labbé, Postdoctoral fellow, and Sylvie Jutras University of British Columbia, Canada

**Objective(s)/Method.** Using the psycho-environmental potential model as an analytic framework, we conducted interviews with 31 families with a person with spinal cord injury (SCI). The interviews addressed their perceptions of how their dwelling was promoting or hampering their well-being at home in general. We also looked at how specific rooms in the house were favourable or unfavourable to well-being. Results. Findings showed that home was perceived as beneficial to well-being for various reasons covering a spectrum of psychological and social needs. The potential of places reflect their specialization, which should be considered in home adaptations. The disability seemed to permeate differently the experience of the people with SCI and their family members. People with SCI addressed disability mostly in terms of its direct consequences on their daily independence and functioning. Our findings also suggested how the need for the understanding of smart technology to form future solutions in this field. |
| **Question to the audience - what is happening in your country?** | Presenters are members of the Inclusive Communication Nation (Scotland) working group of people formed of people with communication support needs and organisations including Inclusion Scotland, Independent Living in Scotland Project, National Autistic Society, Royal College of Speech and Language Therapists, Scottish Accessible Information Forum, Stroke Association and Speakability. |

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| **Introduction** | The Finnish disability service system will increasingly host also children with disabilities and their families, who have immigrated to Finland. Both disability services and immigrant families face problems, because they do not always fit together very well. It is easily taken for granted that this problem of ill-fitting can be solved by promoting integration of these children and their families into Finnish society. | Mirkka Vuorento, Researcher, M.Soc.Sc., Rehabilitation Foundation, Finland

**Research data consists of the work diaries (N=10) of a professional, who worked as an integration advisor in a development project and guided and supported the families in the integration process. The diaries consist of advisors' documentation of the starting situation of, contacts made by and needs raised by the families as well as information about support and advice she had provided to the families and other professionals.** |

In our research we use narrative analysis to construct two stories of integration concerning the relationship between Finnish welfare services and families that have immigrated to Finland. We have collected from the data descriptions of occurrences and used them to construct two narrative stories. Both stories have the same story line: they start with justification of the need to fit the services and families together, continue with description of how the integration advisor accomplishes this and end with description of how the integration advisor is able to make herself redundant. We have named these stories as a conventional and reformistic story. The conventional story tells about the support the integration advisor offers to the families by following the cultural model story, whereas the reformistic story challenges the cultural model story and describes the support and guidance the integration advisor offers to other professionals. Finally, we discuss our research results in the light of methodological nationalism and scrutinize what kind of a model story would be worth chasing. |
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<td>Development of a hospital-based gait analysis system for use in gait rehabilitation programmes, A029</td>
<td>Gwenllian Tawy, PhD student, University of Strathclyde, Scotland</td>
<td>Gait analysis (GA) is used to analyse and interpret patterns of movement during walking. It often gathers quantitative data about the kinematics of joints. With this data, clinicians can develop a better understanding of the biomechanics underlying a disability, which in turn can be used to create patient-specific treatment or rehabilitation plans. Although GA has been found to be beneficial in improving mobility in disabled people, it is rarely used clinically for economic and practical reasons. This poses an accessibility problem to health professionals and patients who could benefit from using such facilities. The aim of this study was therefore to design a small-scale, affordable, and clinic-appropriate gait analysis system. We also designed a simple software package to supplement this system. Our set-up consists of a treadmill immediately surrounded by two frames, onto which motion capture cameras are mounted. This set-up has a significantly smaller footprint than the average gait laboratory, and it is also moveable; a function which is paramount for a hospital environment, where rooms are often multi-functional. The software is controlled with a foot-switch, enabling the clinician to be with the patient throughout the assessment. It uses a bespoke cluster-based biomechanical model. One benefit of this model when compared to traditional individual marker-based models is that the markers are not taped onto bare skin. Thus, patients do not have to change clothing for the assessments. Furthermore, no data processing is required by the clinician. Simplified results can therefore be viewed in real-time during the assessments. All data is also saved for future use. The feasibility of this method is currently being tested at the Royal Infirmary of Edinburgh. If successful, such systems could be used to aid clinical decision making and improve mobility in disabled people.</td>
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<td>To support Independent Living of adults with developmental disabilities through lifelong education after graduation, A036</td>
<td>Yeonsoo Jeong, Assistant Professor, Dankook University, South Korea</td>
<td>This study aims to support IL and community adaptation of adults with severe developmental disabilities (ASDD) after school graduation, from life-long education point of view in Korea. ASDD have been diagnosed by physical impairment and functional limitation of medical model and disabled person related law focused them as objects of benefit of temporary and segmental welfare services until now. Besides, they have not been provided with support from government and returned &quot;home again&quot; or entered to living institutions after school graduation in Korean circumstance. But now, a lot of studies and rights movements of disabled advocacy groups exist for ASDD with getting out institution centered service system in Korea, too. Especially movements and activities of various parents’ societies for people with the disability contributed to establish “The Act on right promotion and support of people with developmental disabilities” in April, 2014, and this law is in effect since November, 2015. Since then, life-long education support centers for ASDD are operating with Seoul as its center. The government plans to build a lot of centers over the country and to support various life-long education programs. The focus on life-long education of ASDD is result of demand of themselves and their parents and a lot of advocacy group on life centered education to deal whole living skills than intensive training of a particular area and this is the way of rehabilitation for ASDD, too. This study will search the IL support policy and laws of government by statistical data and explore activities related to life-long education of ASDD through the interview with the parents’ societies for people with a disability and special education experts, rehabilitation specialists, using qualitative research. Through this process, this study will suggest the role of life-long education and efficient IL methods for ASDD in the future.</td>
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<td>Practical application in leveraging web-based software in provision of inclusive supports worldwide, A042</td>
<td>Justin M. Brockie, Chief Operating Officer, Therap Services, USA</td>
<td>Systems supporting individuals needing long term services and supports have extensive record keeping, communication, and data sharing requirements. These may stand in the way of independence, personal choice, and community inclusion. Records are essential because people have service and support needs. Funders must know that individuals are safe, and have appropriate medical care, nutrition, personal care, and housing. Quality programs document planning, participation and progress in education, leisure time, and community life. Documentation is most manageable when individuals’ lives are most restricted. Inclusive, community based, person-centered services add complexity. Information shared among settings (family, residence, workplace, training program) must be private and secure. Record keeping is burdensome. Sharing among settings is inefficient and unreliable. Records become an impediment to inclusion. Therap Services LLC provides web-based record keeping for systems supporting individuals with disabilities in the United States, Puerto Rico, Canada and now, Sri Lanka and Bangladesh. The Therap system is based on the premise of secure transparency. Records exist in real time. Current information is available only to those who need it. Information is fully integrated, so billing, demographic, participation, health and medical data entry occurs only once and is consistent for all, including auditors. Our system is functional on multiple platforms, so it can be used in large and small settings throughout the world. Users can connect with our online supports and training is available only to those who need it.</td>
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adaptable across systems and cultures.
We have been proactive in making Therap available to families of individuals with disabilities, and the individuals themselves which has involved helping provider agencies and government entities shift paradigms about what data is for.
We would be pleased to describe how Therap is using web based data applications to promote inclusion.

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<th>Hacking wheelchairs with open design, digital fabrication and the maker movement, A152</th>
<th>Rachael Wallach, Founder, #HackOnWheels, England</th>
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<td>According to the World Health Organisation over 65 million people worldwide need a wheelchair to be part of society and live an independent life. However, to give freedom, a wheelchair must be customized to the body, environment, and lifestyle of its user. Due to the prohibitive price of traditional design, manufacturing, and distribution, 52 million people who need a wheelchair are deprived of this freedom. #HackOnWheels is the movement to create the first open source, fully customizable wheelchair. We are disrupting the design, manufacture and distribution of wheelchairs with open design, digital fabrication and the maker movement to: 1. Establish an online library of open source designs and instructions for making fully customisable wheelchairs that anyone can freely use, adapt and develop. 2. Galvanize a community of makers and people who need wheelchairs connected, inspired and enabled to create fully customised wheelchairs. Methods: We are doing this by: • Holding makeathons to kick-start the development of open source design concepts for fully customizable wheelchairs and their components. • Running competitions to incubate the design process and build prototypes. • Developing an online workspace to enable people who need wheelchairs, designers, hacker and makers to create, and refine and use open source designs. Implications: #HackOnWheels is inspiring people with and without disabilities to come together to share their knowledge and co-create customized wheelchairs and their components. Our makeathons are generating real innovations like: • 3D printed break levers that fit on to existing breaks making them easier to push • An individually contoured seat and backrest made from information generated by body scan milled out of high-density foam on a CNC machine. • A fully customizable wheelchair frame with joints that can be 3D printed at any angle. All our designs are open source, so free for anyone to use, develop, adapt and share. We are enabling wheelchair users to ‘hack’ their own wheelchairs.</td>
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being reintegrated in community, A077

the Rehabilitation of the Paralyzed (CRP), Bangladesh

was used to collect data from study participants using IDI guidelines. Data was analyzed using content analysis. Result: The model of engaging in an alternative occupation after a large trauma worked fabulously for Rana plaza survivors. Engaging in a relevant training, proper livelihood support provides them a solid foundation to come out of stress as this has given a livelihood security. Initially nobody was eager to return to the readymade garment factory, but fortunately some of them now joined in garment factory.

Conclusion: Community reintegration with engagement in an alternative occupation by CRP played an important role to improve the physical and psychological well-being of Rana Plaza Survivors following building collapse at Savar, Dhaka.

Adaptive Tools to Evaluate the Interventions’ Program on Climate Change and Disaster: Index of Disaster Preparedness Measurement, A105

Sri Hartini Rachmad and Widaryatmo, Researcher and Statistician, BPS Statistics, Indonesia

The high frequent of natural disasters in Indonesia had provoke the local, regional and national administration of Indonesia Government to implement disaster risk reduction and preparedness as an effort to strengthen the resilience against unexpected disaster. Therefore, the provision of Disaster Preparedness Index would be expected to facilitate the measurement of disaster knowledge level of community, as consequence, reducing the size of disaster victim can be anticipated. This research aims to examine the urgency of creating measurement related to evaluation-monitoring program development, particularly adaptation to vulnerable people links to climate change effect of which resulted by disaster in the peak disasterous region of Indonesia, namely Padang City. Padang city is mainly allocated in the coastal area and has experienced several catastrophic earthquakes and tsunami. Regarding the pilot survey result in 2013 was trying to portray on knowledge level, mindset and behavior of the people towards disaster where the type of disaster mostly as an effect of climate change, thus it is very urgent to do monitoring-evaluation. The sample size of survey covered approximately 250 households in the areas exposed to the disaster. The catastrophes are among other: floods, floods and landslide, landslides, earthquakes, tornadoes, land and forest fire, droughts, tidal waves/abrasion, and transportation accidents. The programs of disaster preparedness should be developed by humanitarian workers in order to minimize the loss of life and property, and help the people who live in earthquake and tsunami prone areas. This data survey is the cornerstone of effective emergency preparedness, conflict prevention, emergency relief, and the rehabilitation and reconstruction process. Furthermore, in the acute phase this data will be very crucial for implementing and targeting effective responses.

Implementing the Sendai Framework for Disaster Risk Reduction: disability inclusion as a continuum within Humanitarian Risk Management strategies, A118

Mathieu Simard, Deputy Vice-President Rehabilitation International North America Founding Member, Rehabilitation International’s Task Force on Disability, Armed Conflict, and Natural Disasters, Rehabilitation International, Canada

In the past decade, there has been a tremendous increase in the occurrence of geophysical and man-made disasters. The links between climate change, extreme events and social vulnerabilities are increasingly being explored. Initiatives have taken place in order to address such issues, such as the Paris Agreement in regard to climate change. Key initiatives have also been laid out to increase resilience and improve disasters preparedness and response. Such initiatives include the Sendai Framework for Disaster Risk Reduction. A specific area of interest has been to identify at-risk groups and the solutions to increase their resilience and decreasing the differential impacts of disasters on such groups. One such group is that of persons with disabilities. They are differentially impacted by disasters, experiencing 2 to 4 times the mortality rate of general population, yet being excluded from most disaster preparedness and disaster response programs.

This presentation therefore sets out to discuss the topic of Disability Inclusive Disaster Risk Reduction and Inclusive Disaster Risk Management. It will present the latest guidelines, outline practical solutions so as to increase resilience and address inclusion at all levels in humanitarian response, and identify present gaps while discussing future areas of work and collaboration.

The key aspects will be to draw from the challenges and international agreements leading to outline pathways for field implementation and monitoring.

The Emerging and Rapidly Evolving Role of Rehabilitation Professionals in Disaster Management, A147

Peter Skelton, Rehabilitation Project Manager, Handicap International/UK Emergency Medical Team, England

Rehabilitation in Emergencies is a rapidly evolving field. Disasters are a growing global problem, affecting more people each year. National and international responses are increasingly professionalized, and improving global preparedness and emergency responses are likely to result in a more and more people surviving emergencies with life changing injuries. However, the inclusion of rehabilitation in both disaster preparedness and response continues to lag behind. This presentation will bring participants up to date on recent key developments in the field, in particular the forthcoming publication of the WHO’s Minimum Standards for Rehabilitation in Emergency Medical Teams, which will soon require all surgical teams to include rehabilitation professionals. It will draw on my own experience in preparing rehabilitation professionals for disasters, and in responding to disasters, beginning with the Haiti Earthquake in 2010, and including more recent earthquake and typhoon responses, briefly referencing the role of rehabilitation in conflicts and mass migrations. It will also include lessons learned from my work with WHO coordinating the overall rehabilitation response in Nepal. Finally, it will introduce participants to effective ways of involving themselves in emergencies, whether through better personal, local or national preparedness, or through involvement with national or international emergency medical teams, drawing on my recent publication “Responding Internationally to Disasters: A Do’s and Don’t’s Guide for Rehabilitation Professionals”.

Technical and structural measures to manage disasters in road tunnels

Dr.-Ing. Dirk Boenke, Head of Transport & Environment, STUVA e. V.

Road tunnels represent an essential part of central road links. Fortunately serious traffic accidents in road tunnels occur very rarely. In the last years a high standard of safety could be reached in road tunnels thanks to ongoing technical and organisational improvements. However, if an accident happens this can have an enormous impact, especially to people with disabilities. They may not be able to leave the endangered area on a quick and safe way. In spite of the existing high standard in road tunnels in Europe, improving safety for all road users remains an important and generally recognised target.

STUVA, a non-governmental German research institute, worked on two research projects dealing with the improvement of safety in road tunnels, especially for people with disabilities. Based on the needs of persons with disabilities as users of road tunnels and their demands on the equipment and operation, several proposals for practicable implementation were made to further improve the level of security for all users. These measures cover for example improved accessibility and usability of emergency
with disabilities, A030  (Research Association for Underground Facilities), Germany

walkways, tactile detection of emergency exits, improved usability of doors in emergency exits and equipment of emergency call systems with barrier-free emergency call buttons mounted outside the cabin.

Some proposed measures are still under discussion to fix details for implementation, but some important measures have been adopted to updated technical standards (e. g. RABT = Guideline for Facilities and Operation in Road Tunnels) and will become a standard when building new tunnels or refurbishing existing tunnels in Germany.

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Convention on the Rights of People with Disabilities
Kilsyth, Level 0

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| **Brief overview of the project's outcomes, regarding the participation of persons with disabilities, A035** | Eva Nachtschat, Research Fellow, project staff, University of Innsbruck, Austria

The Convention on the Rights of Persons with Disabilities incarnates the overarching principle of inclusion. A common underestimated behaviour in our fast moving society might often be active participation. While the entire Convention appears under the very important principle of comprehensive inclusion, two significant provisions embody this principle and impose particular obligations to the member states of the Convention. The first provision which is essential in this context is Art. 4 It says in its sec 3 that States Parties shall closely consult and actively involve people with disabilities through their representative organisations in the development and implementation of new legislation, policies and other decision-making processes to implement the present convention. These are all the processes which concern or affect issues relating to persons with disabilities. The second meaningful provision here is Art 33 (3). This section specifies the member state’s obligation to involve civil society, this means representative organisations including persons with disabilities, in a way that ensures full participation in the monitoring process of the implementation of the convention. In a two year project the University of Innsbruck observed ongoing processes, specifically looking at the degree of participation and involvement of persons with disabilities in four comparative countries. These are Austria and Germany as countries of the Civil Law legal system, and New Zealand and Australia as representatives of the Common Law legal system. The overarching aim of the project is to find out, if and how the member states fulfill these obligations, and how participation of persons with disabilities is performed. For this reason, scholarly research and interpretation, personal, semi-structured interviews and surveys were conducted. The research and analyses gained interesting insights into and brought fruitful outcomes to the comparative countries. |

| Lessons from post-conflict independent living programmes for persons with intellectual disabilities, A031 | Aine Sperrin, PhD Student, Centre for Disability Law and Policy, UWI Galway, Ireland

This research examines the efficiency of rights protection afforded to people with intellectual disabilities under Article 19 of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), which enshrines the right to live independently and be included in the community. It focuses on the conflict states of Northern Ireland and Bosnia and Herzegovina. The research is funded by the Irish Research Council. Independent living is recognized as a fundamental human right in service provision for persons with disabilities. The use of disability as a non-politicised issue around which to develop cross-community dialogue in Northern Ireland will be examined. Recent years have seen the emergence of a new self-advocacy movement among people with intellectual disabilities in Bosnia and Herzegovina. The research will be limited to the periods of conflict and peace processes in Northern Ireland and Bosnia and Herzegovina to present day and how these efforts have been affected by the standards and obligations under the UNCRPD. It will include preliminary analysis of qualitative research with persons with intellectual disabilities and people working in the disability rights sectors of Northern Ireland and Bosnia and Herzegovina. The impact of legislation and policies on the lives of persons with intellectual disabilities will be evaluated as well as the legal mechanisms, including litigation, through which individuals and representative groups can utilize to realize their rights. These states were chosen because of their UNCRPD ratification status and their contemporary experiences with conflict and resolution, which I believe can contribute to a re-evaluation of human rights policies within the pillars of governance of a state. This research aims to identify lessons to be learned by the international community in the creation of a disability inclusive society in the wake of national conflict, with a particular focus on the right to live. |

| Effective education for persons with disabilities within the general education system, A004 | Kirsten Vollmer, Scientific Staff, Federal Institute of Vocational Education and Training of Germany, Germany

The Convention of the United Nations on the rights of persons with disabilities demands that persons with disabilities receive the support required, within the general education system, to facilitate their effective education. The presentation focuses on the chances and risks for vocational training of disabled persons in Germany given by the popularity of the term/word “inclusion”. It thereby outlines framework, current developments and concrete fields of activities and offers perspectives for approaches and initiatives to take. It mainly concentrates on the process started in Germany to implement the goals of the UN-Convention as far as vocational education and training of people with disabilities is concerned. Special attention is given to the task of enabling persons with disabilities to have effective access to general technical and vocational guidance programs, placement services and vocational and continuing training. |

| From DRR to response: Health and Rehabilitation perspectives in relation to Disability Inclusion, A117 | Jim Gosney, MD MPH, Chair, Committee on Rehabilitation Disaster Relief (CRDR), International Society of Physical and Rehabilitation

This presentation will focus on the role that rehabilitation professionals can play in addressing article 11 and 26 of the Convention on the rights of persons with disability. Their specific added value and capacities in responding to general and specific element of disaster risk management will be outlined. The presentation will cover both elements challenges and potentialities. The presentation aims to suggest ways for operationalization of the continuum from disaster preparedness and mitigation to disaster response and recovery. The presentation will also present share examples of good practices at local level and raise suggestions for future actions in the field of disaster risk management. This presentation will articulate with other specific thematic areas of DRM, namely the inclusion of persons with disabilities within DRM and the development of new guidelines and policies in the field of rehabilitation and DRM. |
## Culture and tourism
### Carrick, Level +1

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| National Tourist Board strategy to deliver accessible tourism, A008 | Chris McCoy MBE, Head of Accessible Tourism Programme, VisitScotland, Scotland | Strategy to Deliver Accessible Tourism  
Legislation in the UK has empowered disabled people, making it illegal for service providers to discriminate on the grounds of disability, but it has not enabled them. VisitScotland believes access is seen only as a compliance issue, not a market issue. Disabled people still have difficulty finding businesses to cater for their access requirements, and provide adequate information to help make informed choices. Disabled people are seen as “risk management”, requiring expensive adjustments, but not as valued customers, requiring new and innovative customer service. Changes have to be transformational; our aim is to move the mind-set of the industry and the driver for accessible tourism from compliance into the competitive marketplace. In 2013, the Accessible Tourism spend contributed £1.5 billion to Scotland’s economy. The tourism industry has effectively created an artificial sector of people with a disability and has ignored their ACTUAL aspirations. Following consultations with disabled people VisitScotland found “fear” had closed down the dialogue; disabled people don’t want special products, they want to be part of the mainstream. The arbitrary line defining disability is exactly that, an arbitrary line. The key to developing a tourism product is to look at the aspirations of potential visitors, the opportunities that exist within a destination. Customer aspirations should drive the product development. Creating a flexible and inclusive tourism product is vital to success and we need to involve disabled and listen to them. VisitScotland have adopted solutions through our strategy, networks, partnerships, and our accessible tourism destination projects which have engaged businesses in a new and innovative way. The response has been positive. Working in the UK and across Europe as partners together developing accessible tourism products/services and now sharing that vision with Congress to promote equality. |
<p>| Forest Glen Park Design Case Study – Universal Design in a Park and Recreational Setting, A131 | Mark Trieglaff, President, Accessibility Consulting and Training Services, Inc., USA | Forest Glen Park in Woodridge, Illinois was awarded a grant through the Kellogg Foundation to include Universal Design Principles into its new park. This session will highlight the process, from design, focus groups including people with disabilities, product selection and construction. We will examine six park elements as they relate not only to accessibility code, but how they embody Universal Design Principles. The elements are walkways, playground, playground surface, swings, raised water feature and garden bed, and picnic tables and shelter. All recreational elements of the 2.1 acre park incorporates at least one principle of Universal Design. The park provides gently sloped walkways that provide easy access to a greater number of people. These walkways provide smooth transitions to the playground and swing rubberized surfaces. The elevated play components of the playground are accessible by a ramp system going from one end of the playground to the other, allowing access to 90% of the play components making it more inclusive for all children and parents. A raised garden bed with a water feature provides easy access to gardening, a water fountain and various water features including interactive activation usable by both standing individuals and those using a wheelchair. The ledge along the side of the garden provides a person with limited stamina an area to participate without exerting a great deal of energy. This space and height design provides equitable use and easy spacing for approaching the fountain and raised garden bed. Multiple locations of accessible picnic tables offer choices to a person using a wheelchair to enjoy both the shade and the sun. The close proximity of the picnic tables to the other park features and raised garden allows visitors to enjoy the outdoors and be near the playground, garden and fountain to watch their children and friends. |
| Accessibility and Universal Design in a Zoological Setting, A132 | Mark Trieglaff, President, Accessibility Consulting and Training Services, Inc., USA | Zoos and Aquariums are places of wonder and enjoyment for many people. More than 700 million people visit zoos and aquariums worldwide. In the United States over 181 million people visit zoos and aquariums every year. This is more people than attend professional hockey, football, basketball and baseball games combined. While zoos and aquarium are popular places many people with disabilities still have difficulty visiting and enjoying their facilities. This session will take the opportunity to highlight Brookfield Zoo’s efforts becoming accessible to people with disabilities through the use of Universal Design. Information on the use of Universal Design for physical access of the park such as parking lots, entrance into main gates, entrances to exhibits and restaurants will be highlighted. In addition the session will present information on increasing access for visitors who have low vision, are blind, hard of hearing or deaf. Such efforts included developing large print maps, forming focus groups of low vision and blind visitors to increase access, by providing detailed life sized statues at exhibits, installing viewing windows for easy viewing, etc. For guests with hearing concerns, assistive listening devices were installed at all shows that transmitted directly to personal hearing aids or to receivers checked out at the front gates. Other enhancements include restrooms available to individuals needing assistance from a spouse or caretaker, a transportation system that had each tram with a wheelchair access space, benches and tables that provided wheelchair access and benches with companion seating. These efforts were noted as Brookfield Zoo won the “1999 Accessible Award” from the American Association of Museum and National Organization on Disability. In addition the Zoo is featured in “Universal Design Exemplars” for its use for Universal Design in the facilities and exhibits. |
| How live experience; which celebrates diversity at scale can be a catalyst for positive | Andrew Douglass, Founder, Parallel London, England | Real-life experiences shape our preferences and memories much more profoundly than what we read or see via any media. As such, live events are potentially much more powerful than any other form of marketing; especially if you know how to positively engage audiences and create connected communities long after the event is over. A live event also presents a very good opportunity to look at the inner workings of how inclusivity is represented in society and completely flip it on its head. This can help change the narrative and perception of disability; particularly if the event experience is fun, dynamic, surprising and celebratory. Using our experience and insight, we have created Parallel London (<a href="http://www.parallelondon.com">www.parallelondon.com</a>). This is a major live experience that has been designed and curated through |</p>
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<td>Mainstream and targeted measures to reduce violence against women with disabilities, A069</td>
<td>Sue Salthouse, Director, RI Australia, Australia</td>
<td>The CRPD recognizes that women with disabilities experience multiple discrimination (Article 6). It further focuses on how the intersection of these twin attributes of gender and disability discrimination result in women and girls being at greater risk of violence, abuse and neglect both in domestic settings and outside the home. This means that signatories to the CRPD are obligated to put legislation and policies in place to ensure that violence against women with disabilities is identified, investigated and prosecuted (Article 16). To a large extent this is not happening. In fact, any actions to reduce the incidence and prevalence of violence against women with disabilities must be seen in the wider context of reduction of violence against all women. And this requires action to address gender inequality. This paper examines the strategies being taken in Australia to address gender inequality, and reduce violence against women. It looks at the 12-year National Plan for the Reduction of Violence Against Women and their Children and the degree to which targeted and mainstream measures are being taken to include women with disabilities. A parallel social reform is taking place in the disability sector, with the roll-out of the National Disability Insurance Scheme. The paper outlines how advocates are working to ensure that gender is recognized as a cross-cutting issue in the Scheme and a risk factor for the experience of violence. Finally the paper looks at whether learnings in a national context can translate to other nations and the degree to which Australia is fulfilling its international obligations under CRPD Article 32 through a focus on violence reduction and the Disability Inclusive Development strategy.</td>
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<td>Structural selection processes during allocation into labour market measures for disabled people, A064</td>
<td>Angela Rauch, Senior Researcher, Institute for Employment Research, Germany</td>
<td>Societal participation of people with disabilities is one central concern of modern welfare states. In order to achieve participation in working life, a system of special active labour market schemes (occupational rehabilitation) targets people with disabilities. They can either participate in general programmes designed for all unemployed people or in rehabilitation-specific programmes. Our research focuses on identifying the selection process into different types of labour market measures and on highlighting possible influences on social determinants. We observe adults, who finished vocational training or already have working experience and are in need of an occupational rehabilitation after a health shock. The study is based on administrative data of the German Federal Employment Agency and includes all persons entering rehabilitation in the years 2010 to 2013. The data includes e.g. information on the type of disability, longitudinal information on biographical status, e.g. times of (un-)employment. Using multivariate logistic regression, the general probability of participation in labour market measures is observed. Afterwards the participation in specific main categories of measures is examined. Analyses show that general participation, as well as participation in certain measures is determined by gender, school education, age and particularly by the type of disability. People with psychical disability are less likely to participate in training measures than persons with musculo-skeletal disorders. People with a learning disability or with organic disabilities, by contrast, have a higher probability for participating in special rehabilitation measures. One might assume that placement officers consider a higher probability of labour market reintegration for people with specific types of disability and thus promote them. The results show that the allocation process is determined by structural and social selection processes indicating exclusion mechanisms.</td>
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| Describing assessment of rehabilitation needs in patients with cancers across health service sectors, A033 | Charlotte Handberg, PhD, Postdoctoral Fellow, Defactum and Aarhus University, Denmark | **Title**
A description of rehabilitation needs assessment among patients with cancer across health service sectors

**Purpose**
To describe rehabilitation needs among patients at hospitals and when out-patient rehabilitation starts.

**Methods & Materials**
Systematic assessment of rehabilitation needs seem prerequisite for sufficient rehabilitation, but little is known about cancer patients rehabilitation needs. Rehabilitation needs-assessment-forms from 192 cancer patients from two hospitals and two cancer-rehabilitation-programs from April to December 2015 were analysed. The forms had been completed by patient and healthcare professionals and include:

1) 58 fixed areas categorised in six domains; practical, work/education, family, physical, psychological and spiritual/religious
2) An area to document the rehabilitation plan.

Descriptive statistics were used to describe the 58 fixed areas.
### Addressing assessment of rehabilitation needs in patients with cancer across health service sectors, A034

**Presenter:** Charlotte Handberg, PhD, Postdoctoral Fellow, Defactum and Aarhus University, Denmark

**Title:** "It’s like pushing an elephant up the stairs": Addressing assessment of rehabilitation needs in patients with haematological cancers across health service sectors

**Purpose:** To analyze and describe patients with haematological cancers and healthcare professionals’ experiences and perspectives on the process of assessment of needs for cancer rehabilitation.

**Method and methodology:** The study was designed as a qualitative 5 month ethnographic field study in two haematology wards and two municipality rehabilitation programs. Symbolic Interactionism was the theoretical framework and Interpretive Description the methodology.

**Participants:** The participants were 38 patients and 41 healthcare professionals.

**Data:** Consisted of participant observations and semi-structured individual and focus group interviews.

**Findings:** Preliminary findings show insights into the divergence among patients’ and healthcare professionals’ perspectives. The healthcare professionals across health service sectors were preoccupied by the challenges on collaboration on assessment of needs. The patients on the contrary did not ascribe this collaboration and sector transition any importance. The patients further emphasized how they regarded their course of disease as being ‘as one’ and not fragmented by sectors. The patients supplementary expressed satisfaction with the whole process of assessment of needs, the involvement in the process and the needs-assessment-form itself whereas the healthcare professionals expressed dissatisfaction.

**Implications of findings:** The findings point to the assessment of cancer rehabilitation needs as meaningful for the patients to a much greater extent than the healthcare professionals. The importance of repeated systematic assessment of needs among patients with cancer in clinical practice is underpinned. The healthcare professionals’ perception of the complexities in collaboration across sectors needs to be addressed to ensure an identification of possible rehabilitation needs.

### Phobility - mobility barriers of people who suffer from anxiety disorder, A011

**Presenter:** Tamara Vlk, Project Associate, Vienna University of Technology, Austria

**Content:** The (public and private) traffic system is probably the largest and most inclusive social system of modern society. Equal opportunity of traffic participation of all user groups is key in many traffic policies from supranational (e.g. EU) to regional levels. While physical barriers in public and private transportation are well researched and much has been done in order to lower thresholds of participation, research on barriers of people with mental disorders is fairly neglected.

This paper presents results of an in-depth qualitative study on mobility barriers and travel mode choice of individuals who suffer from phobia, anxiety and obsessive-compulsive disorders that was conducted for the first time in Austria. Following a mixed-methods strategy, empirical data comprise problem-centered interviews, focus groups, several mobile methods (GPS-tracking, participant observation) and expert interviews.

It is argued that, in terms of travel mode choice and (psychical) mobility barriers, anxiety disorders are deeply related to the interaction order of public space. Using Goffman’s analytical scheme for understanding the situated social dimension of social action as developed in “Relations in Public” (1971), we argue that barriers of traffic participation for this group (or groups) of persons can be addressed as forms of situational insecurity, meaning the inability to constitute a normal appearance of the situation or to maintain the boundaries of the individual’s territories of the self. These sociological concepts can also be translated into problems of "designing situations" and thereby to develop innovative measures for mitigating barriers and to contribute to a more inclusive transportation system.

### Exploring the potential of Street Audits to make streets more inclusive, A125

**Presenter:** David Hunter, Associate Research Fellow, Transport Research Institute, Edinburgh Napier University, Scotland

**Content:** The paper describes and analyses recent ‘street audits’ carried out by the walking campaign group Living Streets in Edinburgh, in order to improve local neighbourhoods for pedestrians. ‘Inclusive design’ principles formed a fundamental part of the audits which aimed to identity aspects of the street that act as barriers to disabled people, recognising that removing such barriers often improves access not only for disabled people but also for other parts of the community. One example is the provision of level pavements across side roads which not only enhances access for wheelchair users, but also assists people who have young children in buggies and tourists using wheeled luggage. Another is the proliferation of ‘A-board’ advertisements placed on the pavement by shops which can be a particular hazard for people with visual impairments but also adversely affect all pedestrians using busy city streets. The participation of disabled people from the Edinburgh Access Panel in the audits added an important and distinctive dimension to the process, enriching the observations and insights gained. The paper goes on to explore the wider potential for street audits to make streets more inclusive but also considers the political and institutional difficulties which are encountered in the street audit process. These include the co-ordination of action provided by different council departments (roads, cleansing, licensing, etc) and different agencies (local council, police, etc).
### How to effectively support blind and partially sighted people to find or stay in work, A080

**Presenter:** Alex Saunders, Employment Impact Officer, Royal National Institute of Blind People (RNIB), England

This workshop sets out the case for innovative employment support services for blind and partially sighted people. It describes what we know works, and how to identify and design effective interventions that are sensitive to their complex needs.

We believe that blind or partially sighted people should not be excluded from employment; nor should sight loss equal job loss. Yet only 27% of registered blind and partially sighted people are in employment, and this number is falling.

We will equip delegates with the skills, tools and confidence to support working age people with sight loss seeking to find or stay in work. Most working age blind and partially sighted people require a specialised, resource-intensive model of support. But just like any other worker, working age people with sight loss will need the right tools to do the job – in this case additional tools that reduce or eliminate the need for eyesight. Key areas include:

- the role of technology
- mobility training and independent living skills
- making the most of residual vision
- support to develop confidence to communicate sight-specific needs and reasonable adjustments to employers
- pre-employment training and support
- effective peer support.

The workshop will discuss a number of useful resources, including RNIB’s guide for employers, our guide for employment professionals, and the Employment assessment toolkit, which has been designed to develop a clear understanding of what a person’s aspirations and abilities are in relation to employment, and what types of support is needed to help fulfil these.

Our aim is to ensure blind and partially sighted people are at our heart and influence everything we do. The workshop will conclude by demonstrating how our Working Age Customer Panel is contributing to employment research, service innovation, and support for employers and professionals.

### Sport Menteith, Level -1

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| Communicating Inclusion through Paralympic Sports, A123 | Gregor Doepke, Director of Corporate Communications and Chief Press Officer, German Social Accident Insurance (DGUV), Germany | Changing attitudes and behaviors by using the positive and emotional imagery of the Paralympic movement: for the German Social Accident Insurance (DGUV), sport is a suitable medium for promoting both rehabilitation and inclusion. Gregor Doepke, Director of Corporate Communications and Chief Press Officer of the DGUV, will report on the DGUV’s communication measures in the field of disabled sports. These range from publishing the “Paralympic Post”, a newspaper supplement that is written by student journalists during the Paralympic Games; to presenting a yearly award for the best journalistic contributions on the topic of disabled sports: the German Paralympic Media Award (GPMA); and to having produced the film “Gold - You can do more than you think”, a documentary about three Paralympic Athletes.
He will explain why the DGUV has engaged in these projects by placing them in the context of the “Action Plan of the German Social Accident Insurance on the implementation of the UN Convention of the Rights of Persons with Disabilities” and by linking them to one of the core goals of the German Social Accident Insurance: to rehabilitation. Moreover, Gregor Doepke will focus on how the aforementioned projects promote inclusion through the medium of sport. |
| Finding the right sport and being successful for people with handicap. A performance testing approach, A128 | Dr. Helge Riepenhof, Head of Sports Medicine department, BG Klinikum, Hamburg, Germany | To support people with disability finding the right sports within their limitations the BG Klinikum Hamburg developed a performance testing protocol. The purpose was to perform various tests with gradually increasing physical load to understand the functional capacity and limitation of the patient as well as identifying his or her talent for various sports. Also anthropometric data, extremity length, joint movement and personal interests and experiences in different sports were measured.
The patients underwent the tests in their current treatment even if for example patients with prosthetics were still in treatment and not final equipped.
The performance testing protocol focused on six different criteria:
- Movement and Strength of the upper spine, neck and shoulder girdle
- Movement and Strength of the upper extremities
- Movement and stability of the core
- Movement and Strength of the lower extremities
- Endurance
- Coordination
- Cognitive capacity
All tests followed a ramp test similar protocol by increasing the load continuously until the patients were exhausted or until they complained about symptoms like pain or discomfort. This procedure guaranteed a systematic increase of load and kept the risk of overload or frustration of the patient minimal. The collected data were the maximum strength measures, the general coordination and endurance capacity of the patients.
The study also identified all requirements and classification guidelines for the below mentioned sports, organized within the German handicapped Sporting federation (Deutscher Behindertensportbund DBS). The sports were analyzed in regards to mental and physiological criteria and based on this grouped in one out of ten different “Level of Performance” (LoP 1 to 10).
Following the tests, results and sport requirements were correlated to the different LoP’s. The results of the correlation were presented to the patients to demonstrate which sporting activity would fit for most to the individual circumstances from a medical and performance point of view. |
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<td>Accessibility Analysis of Android-based Smart Phones Targeted at People with Upper Limb Dysfunctions, A021</td>
<td>Kim Kyung Sik, Doctoral Student, Daegu University, South Korea</td>
<td>Disabled people and the aged in the era of ultra high speed information communication technology represented by Smart phone and Tablet PC came to be in a position of so-called ‘relatively weak people’ in the field of information communication due to inconvenience of use and difference in information acquisition and processing ability. Thus, a survey was conducted on Smart phone accessibility items based on previous studies of people with a disability with physical disabilities, brain lesions, myelopathy and muscular disabilities having more inconvenience relatively in their use of smart phone due to upper limb dysfunctions. Especially, people with upper limb dysfunctions with relatively weak grip had big inconvenience in the conditions of uses requiring actions such as grabbing and rotating the devices, and due to the characteristics of touch screen input method of Smart phone, presented a significant inconvenience due to a lack of a guide for keyboard input. As a result of questionnaires by the type of disability, it turned out that severe myelopathy causes the most inconvenience in using smart phone.</td>
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<td>Depression and maintenance of smoking cessation after myocardial infarction</td>
<td>Kathrine Hald, PhD student, Aarhus University &amp; Central Region, Denmark</td>
<td>Introduction We aimed to investigate the association between depression and maintenance of smoking cessation at 1-year follow-up in patients admitted with first-incidence acute myocardial infarction (MI) with a focus on educational level. Material and methods From the 1st of September 2002 to the 31st of December 2004, 388 patients &lt; 75 years old were admitted at Aarhus University Hospital in Denmark with first-incidence MI. Patients were included if they stopped smoking at admission or in the next 6 weeks, if they were screened for depression 6 weeks after admission and if they gave...</td>
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Individuals with the unique hand

Our results exhibit the following: First, group art therapy has a positive effect on cognitive skills of the elderly with dementia. Second, group art therapy has a positive effect on activities of daily living of the elderly with dementia.

The result of the study as summarized as follows: First, group art therapy had a positive effect on reducing depression of the elderly with dementia. Second, group art therapy using Korean painting material had a positive effect on improving activities of daily living of the elderly with dementia. Therefore, group art therapy using Korean painting media brought positive changes in depression and activities of daily living of the elderly with dementia.

Art-Lang Program had a positive effect on improving cognitive skills and activities of daily living of the elderly with dementia. Third, art-Lang Program had a positive effect on reducing depression of the elderly with dementia. Therefore, art-Lang Program is considered to have a positive effect on both emotional stability of the elderly with dementia but also on cognitive skills and depression for the elderly with mild dementia appropriate to the actual circumstances in Korea which is lack of developing specific and various programs in rehabilitation of the elderly with dementia. Subjects of the study are the elderly diagnosed with mild dementia by neurologists or scored 0 to 19 in MMSE-K which means level of ‘definite dementia’ among ones who are over the age of 65 and the control group consisted of 15 participants of 60 years or older. The experimental group and another 15 with control group. The program was applied to experimental group once a week, 90 minutes each session, and a total of 20 sessions.

The result of the study is considered that group art therapy can have a positive effect on cognitive skills and activities of daily living of the elderly with dementia through providing them the opportunity for repetitive cognitive and creative activities.

Group Art Therapy, Korean Painting Material, Depression, Activities of Daily Living, Elderly, dementia, A018

Yeo-Jin Jueng, Researcher, Daegu University, South Korea

This study was carried out to investigate the effects of group art therapy program using Korean painting material. The effects of group art therapy program using Korean painting media brought positive changes in depression and activities of daily living of the elderly with dementia through providing them the opportunity for repetitive cognitive and creative activities.

Group Art Therapy, Cognitive Skills, Elderly with Dementia, Activities of Daily Living, A017

Hye Jung Park, Researcher, Daegu University, South Korea

The purpose of this study was to investigate the effect of group art therapy on cognitive skills and activities of daily living for the elderly with dementia. Subjects of this study were randomly assigned 6 with experimental group and another 6 with control group. In total, 12 elderly over the age of 65 diagnosed with dementia who are hospitalized in sanatorium D located in the city participated. This program was applied twice a week, 60 minutes each session. A total of 12 sessions were undertaken in an activities room with the help of an assistant. As a supporting tool for the quantity analysis for the study, MMSE-K, the dementia diagnosis test, and the activities of daily living (ADL) test were conducted before, after, and 2 weeks after the completion of the program. In this study, the Mann-Whitney U-test which is a non-parametric statistical analysis was conducted with SSPS 18.0 statistic program for pre-homogeneity between the experimental group and the control group. And for comparing the pre-test and post-test within the group, Wilcoxon Signed Rank Test which is a non-parametric statistical analysis was conducted.

The results of the study are summarized as follows: First, group art therapy has a positive effect on cognitive skills of the elderly with dementia. Second, group art therapy has a positive effect on activities of daily living of the elderly with dementia. Third, art-Lang Program had a positive effect on reducing depression of the elderly with dementia. Therefore, art-Lang Program is considered to have a positive effect on both emotional stability of the elderly with dementia but also on cognitive skills and depression for the elderly with mild dementia appropriate to the actual circumstances in Korea which is lack of developing specific and various programs in rehabilitation of the elderly with dementia. Subjects of the study are the elderly diagnosed with mild dementia by neurologists or scored 0 to 19 in MMSE-K which means level of ‘definite dementia’ among ones who are over the age of 65 and the control group consisted of 15 participants of 60 years or older. The experimental group and another 15 with control group. The program was applied to experimental group once a week, 90 minutes each session, and a total of 20 sessions.

The result of the study is considered that group art therapy can have a positive effect on cognitive skills and activities of daily living of the elderly with dementia through providing them the opportunity for repetitive cognitive and creative activities.

Research on Studying English for hearing impairment though development of smart application, A022

Dae-young Na, Masters Student, Daegu University, South Korea

English learning devices or assistive learning devices have been developing so far. These devices are useful for the normal-hearing people because they are made on a hearing-based system. However, for the hearing-impaired people, these devices are useless since they can not hear the sounds. For these reasons, many experts feel that an effective English teaching method for the people with hearing impairment is needed, but the suitable and innovative teaching methods have not been suggested. Currently, two teaching methods are used: individual and group teaching. As for the English learning material and textbooks, learners’ levels and interest of the people with hearing impairment should be considered. And the present textbooks used at school now do not take into account these factors. So experts emphasized that the level of textbook, individualized education and development of visual materials are considered for the learners with special circumstances. In addition, previous studies demonstrated that visual materials such as pictures, word flash cards are more effective than those in typical group. A fatigue index was used to represent dynamic grip/pinch endurance. Larger the fatigue index value indicates larger strength decline during

Our results exhibit the unique hand strength and endurance characteristics in individuals with Down syndrome (DS) is a chromosomal disorder caused by the presence of all or part of an extra 21st chromosome. Individuals with DS have been characterized by insufficient motor ability and muscle weakness. There is still a lack of studies to explore hand abilities of these individuals, especially about hand strength and endurance. The purpose of this study was to understand muscle strength and endurance characteristics of hand grip and pinch in young individuals with DS. The participants were 48 individuals with DS (9 males and 39 females; mean age 17.8 ± 3.7 years) and 60 typically developing peers (30 males and 30 females; mean age 17.8 ± 3.7 years). A computerized dynamometer incorporating a digital dynamometer was used to measure voluntary hand force. Three tests were carried out on each hand: a 6-repetitions dynamic grip, a 4-repetitions dynamic pinch, and a 15-second static hold grip. Maximum strength value was obtained from each trial of the repetitions test. The repetitions test could also assess dynamic grip/pinch endurance, whereas the static hold test measured static grip endurance. The tests showed that the mean of grip/pinch strength on the repetitions test in DS group were significantly lower than those in typical group. A fatigue index was used to represent dynamic grip/pinch endurance. Larger the fatigue index value indicates larger strength decline during
**Developing a Social Skill Training Program for Autism Spectrum Disorder: Based on Needs of Parents**

**A009**

**Jo Soon Park, Professor, Daegu University, South Korea**

Developing a Social Skill Training Program for Autism Spectrum Disorder: Based on Needs of Parents

This study was carried out to develop a social skill training program for psychological and social rehabilitation of children with autism spectrum disorder through the survey on perception and demand of their parents and developing appropriate social skill training program about their needs. Children with autism spectrum disorder often could suffer from domain of interpersonal interaction, sociability and daily living activities. Specially, developing social skill ability would be very important goals for the psychological and social rehabilitation of children with autism spectrum disorder.

Recently, to provide evidence based practice were carried out for developing and applying a social skill training program for the psychological and social rehabilitation of children with autism spectrum disorder by summarizing and analysing the intervention of researchers conducted with various method of social skill training for them and illuminating best practice among those researchers. The evidence based practice means intervention program which certified its effect repeatedly by research method of good quality in scientific ways.

However, it could be doubtful that those so called 'evidence based practice' which proved their effect by synthetic researchers actually reflect the needs of rehabilitation program user. Accumulated knowledge through researchers could reflect experts opinion well, however, if rehabilitation program user’s needs didn’t reflected in those program, then evidence based program could have differences with actual application setting. Therefore, it is indeed necessary to explore user’s evaluation to reducing gap between research and demand of rehabilitation program user, and though this, I will develop and introduce a social skill training program which reflect user's need and various method of need assessment.

First of all, it is necessary to establish the identity of supported employment services. The research explores suggestions for supported employment as follows: for facilitating integrated employment for people with severe disabilities and, based on such findings, to explore ways to promote Koresas supported employment.

There are a lot of miracles that come with having a child with special need. June 17 1995 was the day that Zaky, my son who has autism was born. He is now 21 years old, my second child out of three. His development was different than his siblings, although his presence does not make a significant difference. Zaky has been getting the same treatment as his siblings, as if we don't have a special household. Although we experienced some hard times when he showed an unfamiliar behavior, and when he avoided to communicate and to socialize. As time goes by, along with hard work, dedication and a great amount of fighting spirit from his whole family, Zaky has grown up to be a great gentleman who's very well mannered and and enjoys playing the drum. One thing that is so special about Zaky is that he is such an inspiration and we decided to open "Klinik Terapi dan Sekolah Khusus Anak Mandiri” (Clinic Therapy and school for children with special needs "Anak Mandiri") with 130 students with special needs, 35 certified teachers, therapists, and staff. The name of our safe place has a special meaning that comes with Zaky's personal development through time. It was not an easy ride, as it needs a lot of commitment and consistency to make every step counts. I don’t mind having to pass all of that, because I know that every step I take is for my special son.

**Developing special education for children in Indonesia, A067**

**Atikah Bagawan, Consultant, YPAC Indonesia, Indonesia**

When I was a kid, I never understood why he enjoyed being on his own rather than playing around with other people, like how other kids are. But it didn’t matter to me, because he’s my brother. I just always thought that how he prefers to be, on his own. As time goes by I started to realize that he’s different, that he doesn’t have some things, and at the same time, he does have some incredible things. That time, I didn’t really mind, but I do mind to whatever causes him any unhappiness.

He gets upset, he gets sad, but he’s the friendliest and happiest person I know. He grew up to be person that most everyone wants to be, with something more, inspiration. It develops within time and uncountable efforts from everyone we know, especially my parents. Not having the information we needed didn’t make it any better for my family back then, it was tough, and it took them quite a while to be able accept the special condition. We know that our family would not be the same as other traditional families in Indonesia, because we have an incredible crew who will lit our life a little better. Little did we know that we are going to live the life of others.

He may not be fully aware of what his presence means to everyone, to every special child, to every parents, siblings, families, and communities. But I know that he’s happy when he sees a smile thrown at him. He has inspired too many lives, and I’m on that list. Seeing my parents fought for him, and how his special teachers helped our family get through the rocky road actually opened a new path for me. I declared my oath to help children with special needs, their families, and the community when I was in high school. That’s what I wanted to be, and I knew that it was my purpose of living.

**Disabled people's empowerment, A009**

**Gautam Chaudhury, CEO, Goodwill India, India**

I am a PWD from India. I have experience in this sector working as a Director programme in NGO in India. I am a Rotary foundation alumni

**Supported Employment for Increasing Employment of Individuals with the Most Significant Disabilities, A025**

**Woon-Hwan Na, Professor, Daegu University, South Korea**

In order for supported employment to establish itself as a measure for integrated employment for people with disabilities, various factors are considered for policy. Specifically, the factors include the specific eligibility for supported employment or various methods for supported employment, required budgets, and the training and placement of related skilled manpower. Above all, the most important success factor for supported employment is ongoing support services. The objectives of this research are to analyze the actual condition of supported employment, particularly, the actual state of supported employment in Korea and the United States as one of the methods for facilitating integrated employment for people with severe disabilities and, based on such findings, to explore ways to promote Korea's supported employment.

The research explores suggestions for supported employment as follows:

First of all, it is necessary to establish the identity of supported employment services. Second, it is necessary to clearly set the standards for the eligibility for supported employment services. Third, the scope and content of ongoing support services needs to be specified and extended in supported employment services. Accordingly, ① the scope and content of supported employment services is needed to extendely apply to the entire scope of services necessary for individuals with disabilities to perform fundamental tasks in integrated employment. ② an ongoing assessment leads to feedback, thus making it possible to apply the content and level of ongoing support services in a flexible way. ③ Personal assistance and income support services should be widely applied to eligible individuals for supported employment services. ④ In Korea, the period of the services is up to seven weeks, while it is less than 18 months in the United States, so the period of the services is needed to include the period until an individual can perform an essential task.

**A Study on Factors Affecting**

**So-Yun Oh, Doctoral Student,**

The purpose of this study is to examine the affecting factors on labor market entry of women with disability, and suggest the alternative policy for supporting system for labor market entry of women with disability. For this purpose, 7th panel survey of employment for the disabled in 2015(by Korea Employment Promotion Agency for the Disabled) was used to obtain a representative sample of subjects for this study. To analyze the labor market factors, career status of women with disabilities was used as the repetitions test. The results of group comparison showed that no significant differences in dynamic grip/pinch fatigue index between the two groups. A fatigue slope was obtained from the static hold grip, greater slope values indicates greater drop of strength. The results showed that the individuals with DS exhibited lesser decline of strength than those of the typical group. Our results exhibit the unique hand strength and endurance characteristics in individuals with DS. These findings would be relevant for daily living designs and vocational training for these individuals.
Building a Caring Community: A Model to Achieve Employment for Youth with Disabilities in Tanzania. A054

Meghan Hussey, International Field Director, Mosaic International, USA

Youth ages of 15-25 make up 60% of Africa’s population. Due to the large population boom which has outpaced economic growth, and an underdeveloped education system, an estimated 60% of Africa’s unemployed are youth. For youth with disabilities, the situation is even more dire. Less than 1% of children with disabilities in Tanzania attend primary school (UNICEF, 2009), and they are similarly excluded from vocational training. This leaves them without work and independent living skills. High levels of stigma mean many are hidden at home and unable to realize their full potential. Many international development programs focusing on youth economic empowerment exclude those with disabilities due to the misconception that their inclusion is too difficult in a developing country context. Even when not purposely excluded, these programs usually do not reach youth with disabilities, who are quite literally out of sight and out of mind. This presentation will use the Building a Caring Community program in Tanzania, which provides comprehensive services for individuals with intellectual disabilities and their families, as an example of promoting employment of youth with disabilities in a low-resource setting. It will first employ system mapping methodology to assess how different barriers within society lead to unemployment and social exclusion of persons with intellectual disabilities. It will then illustrate how community-based supports can change the situation and create enabling environments for youth with disabilities to transition to independence and supports individuals with intellectual disabilities who have used these supports and are now able to work. This will include qualitative interviews with the individuals with disabilities themselves, family members, and work supervisors. Through this, we will demonstrate a model of disability services promoting employment in a low income country that is informative and replicable.

Empowering a holistic age management: healthy and well-qualified employees in the automotive industry, A071

Mathilde Niehaus, Chair of labour and vocational rehabilitation, University of Cologne, Germany

Empowering a holistic age management: healthy and well-qualified employees in the automotive industry. Due to demographic changes and the resulting increase in retirement age, the proportion of older workers (with disabilities) in businesses will increase further within the coming years.

Therefore, more and more companies are concerned with the question how to contribute to maintaining the health and work ability of their employees.

Methods: We have analysed some major companies in the automotive industry, to identify successful concepts and developed a practical and transferrable model with the help of the associated companies (Adam Opel AG, Audi AG, Daimler AG, Porsche AG, Ford GmbH and Volkswagen AG, Robert Bosch GmbH). The focus was set on improving networks between the different players and procedures within companies as well as with external players involved in prevention and rehabilitation, e.g. health, accident and pension insurance funds.

Findings: The major challenges companies face in the field of workplace health promotion were identified and five „solutions“ were developed (2012-2015). One product is a manual for managers to raise management’s awareness of the issue, another (2) to support the organisation of performance indicators; (3) to communicate principles of ageing-appropriate work design; (4) to reach the employees with the programmes of workplace health promotion and (5) to improve the cooperation between companies and social insurance agencies. You can find the products on the project’s homepage http://www.pima-projekt.de

From School to Work: Experiences of College Graduates with Autism on Vocational Rehabilitation in Taiwan, A078

Ming Hung Wang, Professor, Graduate Institute of Rehabilitation Counseling, National Changhua University of Education, Taiwan

The number of students with disabilities in Taiwan has significantly increased. How to assist college students with disabilities to obtain employment after graduation has become the focus of attention recently. The purpose of this study is to explore the experiences of college graduates with autism from college into vocational rehabilitation services and then on to work. The finding may be beneficial to a better transition services from school to work in Taiwan.

Based on a qualitative approach, this study purposefully selected five students with autism who had completed their college education from a national VR data bank. Their ages are between 23-24. Four of them were male. Their college majors are diverse including computer science, digital multiple media design, sports, recreation management, and applied Japanese. They received VR services for last two years, and are currently either in the status of supported employment or the status of successful employment closure. Each participant and their significant support partners (mothers) were interviewed. Five focus groups were used for collecting VR professionals' opinions, including case managers and supported specialists. The major findings are: 1. A lack of career counseling and employment assistance resources for them on campus; 2. A lack of good connections between college and VR services; 3. VR professionals tended to ignore participants’ disability-related limitations and matched them to inappropriate jobs; 4. VR professionals did not have enough knowledge based on job information related to majors of college graduates with autism, and often located hands-on and semi-professional jobs to them; 5. Parents (mothers) often become major decision makers throughout the service processes, which may be beneficial or prove to be interfering.

Mortality among Finnish Seafarers in 2001-2013, A119

Hanna Rinne, Researcher, Rehabilitation Foundation, Finland

Previous studies have shown that seafarers have high risk of mortality. Seafarers are exposed to many occupational risk factors and risky health behavior. Earlier studies in Finland have shown that also Finnish seafarers have had high risk of mortality due to different causes of death.

The main aim of this study is to examine, whether there are still differences in mortality by cause of death between seafarers and other employees in Finland. In addition, we will investigate in seafarers’ mortality between different occupational groups.

We used longitudinal individual level register data based from the registers of The Seafarer’s Pension Fund of Finland, Statistics Finland and The Finnish Centre for Pensions. Study population was 25-64 years old seafarers during the year 2000 and reference population all other employees. The follow-up period was 2001-2013. Analysis methods included death rates (SDR per 10 000 py), age standardized mortality ratios (SMR) and confidence intervals. Mortality among seafarers was 1.3 times higher than among other employees. Among men, crew members had higher risk of death than officers. Engine personnel had higher risk of death than deck personnel. Engine crew had the highest mortality (SMR 195). Mortality seemed to be highest in seafarers with diabetes. Among females mortality was highest among galley crew (SMR 171).
### How Do I? links

**Jaakko Harkko**, Researcher, Rehabilitation Foundation, Finland

**Yvonne Frizzell**, Therapy Clinical Lead and Service Developer, Akbar Kare Institute, Peshawar, Pakistan

**Iiana Duvdevany**, Prof. in the school of social work, School of Social Work, University of Haifa, Israel

**Karl Bald**, PhD, Stephan Bamborsche, MD, PhD, FAAN and Sean Bussenius, Psychologist, Head physician at the P.A.N. Center and PR-Manager, Donnersmarck Foundation (Fürst Donnersmark-Stiftung), Germany

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### Study assesses the association between attaining secondary education and finding employment for rehabilitation allowance recipients, A122

**Working Life Transitions after Young Peoples’ Rehabilitation Allowance: a Finnish Register Linkage Study**

Young peoples’ rehabilitation allowance (RA), provided by Social Insurance Institution (SII), is granted for young people with reduced working ability and who need special support for their education or rehabilitation due to sickness or disability. This register linkage cohort study was conducted to assess whether and to which extent educational attainment of RA recipients was associated with their employment status. The target population of people receiving RA (n = 1,429 at the beginning of the follow-up; n = 1,392 at the end of the follow-up) was drawn from a 60 % representative sample of people living in Finland, born in 1983-1985 (n = 119,600; n = 117,108). The participants were followed from the age of 17 to 26. The primary outcome of the study was the employment status (1 = employed; 0 = other) at the end of the follow-up. The register linkage data was drawn from registers administered by Statistics of Finland and SII. Logistic regression was used to test statistical associations.

RA was the most frequent at 19 years of age. Of all who received RA, 21 % were employed at the end of the follow-up (50 % were on a disability pension). The employment rate was 8 % for those with up to primary school attainment, while the corresponding figure for those with secondary level attainment was 33 %. The odds of being employed was 4.88 (3.58-6.12) for those with secondary educational attainment, compared to those with lesser education, after controlling for gender and labour market position at the baseline. Attaining secondary education, which often is the objective of RA, was an important determinant of later labour market attachment. This study demonstrates the need for developing more comprehensive educational and employment supports for young people with disabilities.

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### Improving quality of life for children with disability in Pakistan, A013

**January 2006 Akbar Kare (AKi) was opened in Peshawar, Khyber Pakhtunkhwa (K.P.), Pakistan. It provides free, comprehensive, problem solving rehabilitation to children with neurodevelopmental disabilities. Families of children with Cerebral Palsy, Spina Bifida and other developmental disabilities had no place to go to find postural and mobility aids, advice on feeding issues, and gain an understanding of how to help their child develop and be included in all aspects of family and community life. We have an open door policy and thirty percent of our referrals are from our families telling other families.** Staff know that carers are the people who make the difference; no child is seen without them being integral to all activities. Our workshop is on-site. Standing frames, seating, wheelchair adaptations, mobility aids, and ‘chairs’ for the toddler with spina bifida are made. The carpenters join the clinicians and parents to assess children and design aids. All given away freely. K.P. is a conflict region; it is impoverished with high rates of illiteracy. Untended home births, early marriages and women observing purdah are common. We have successfully worked without gender segregation with families; siblings, grandparents, aunts and uncles are welcomed. 6,650 families are registered with us and each year this is increasing. We maintain a comprehensive digital database. We realise that for inclusion for our children we need to advocate with them for change and our statistics help to highlight issues. Constantly adding to our service we now have a teacher. We have also inaugurated an Early Intervention service to screen development of premature or ill babies and give support to their mothers. We work in a residential community from a converted house. We are also involved in continuous training our own staff and promoting awareness among paediatricians and other Therapists nationally.

### Social construction of sexuality in women with and without physical disability in Israel, A088

**Physical disability has crucial impact on the development of self-esteem and sexual identity. It is not the disability per se, but rather the contextual, social, physical and emotional dimensions that may have an influence on self-esteem and well-being. In recent years, special attention has been given to the social construction of sexuality in women with disabilities. The main assumption is that women with disabilities have the same experience as a certain set of skills: the ability to communicate and relate to others, mobility, or structuring your own time to name a few. People with brain damage (e.g. caused by stroke or head injury) lack these competences. Their lives are brought to a sudden halt leaving them incapable to fill out their roles as a parent, partner, friend, or colleagues. With the P.A.N. Centre – Centre for Post Acute Neurorehabilitation – the Donnersmarck Foundation has developed a cutting edge facility and concept that supports persons with acquired brain impairments to find a way back to everyday life. Focusing on clients with a promising potential after their initial hospital phase, an interdisciplinary team of specialists works out a person-centered strategy to help them regain as many functions and abilities as possible. This requires close cooperation with each client to set individual rehabilitation milestones and a daily routine set the benchmark. Our presentation will indicate how for persons with brain damage a wholistic rehabilitation is a prerequisite for staying active members of an inclusive society.**

Guided by the UN-Convention on the rights of persons with disabilities, the concept of the P.A.N. Centre is in accordance with Article 26, which stresses the importance of rehabilitation to enable people with disabilities to attain and maintain maximum independence to participate in all aspects of life. The Donnersmarck Foundation is an operative foundation based in Berlin, Germany. Founded 1916, it provides rehabilitation, care, assistance, and support for people with physical disabilities and promotes related research.

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### How Do I? links

**Taryl Law**, Co-
Conceptualized by Tom Casson, the Lead for Lifelong Learning at Swiss Cottage School Development and Research Centre, a 5-times Outstanding SEN school, our app addressed a challenge identified by many working and living with people with learning difficulties: how can we teach independence skills in an independent way? Solidly branded NFC tags are stuck to objects around the house and in the community, launching step-by-step, thoughtfully designed instructional videos to teach life or employment skills, e.g. How to make a cup of tea on the kettle; How to use an ATM at the cash machine; How to complete a process? at work.

We’ve just won a special Recognition award in Nesta's 2016 Inclusive Tech Prize. User testing showed us how powerful and engaging the NFC features are, and consultation and co-design continues to inform the development of How Do I?. We are currently collaborating with our newest pilot partners Action for Kids (in vocational settings) and MyLife (in a supported living context), with our official UK launch planned for September 2016. We have been invited to trial with Project Search’s 400 US sites in 2017, leading us to a formal launch in the US at their August 2017 conference.

We are passionate about creating inclusive communities, and will have a significant impact on employment opportunities for people with additional needs. Our distribution centre will be based at the school, employing people with additional needs as apprentices and using How Do I? to support them in their work, creating a model for other employers who want to employ people with learning disabilities, but aren’t sure how best to support them.

Our aim is not exclusively to produce an exceptional resource, but to change cultural views and expectations for vulnerable people.

Objectives This work aims to determine cut-off values for the risk of employees in hospital care to become psychologically ill from a high workload. Determining cut-off values serves to develop early warning indicators to fight health risks and inability to work due to psychological overload at an early stage. Methods All employees involved in caring for patients in 49 breast cancer centers in North Rhine-Westphalia have been included in the study (physicians, nurses and therapists). 1050 employees participated in the survey (response rate 51%). The Well-Being Index “WHO-5” and the subscale “Psychological Demands” of the Job Content Questionnaire (JCQ) were used to identify cut-off values for differentiating between low, moderate and psychological health risks. The WHO-5 is a valid screening instrument for detecting depression. A score of 25-13 is an indicator of good well-being, a score of <13 indicates poor well-being and is an indicator for testing depression under ICD-10. The JCQ serves to assess stress and workload factors at the workplace (sum score 12-48). In this study, a Pearson’s product-moment correlation was run to assess the relationship between well-being and psychological demands. In addition, a regression analysis was carried out to identify cut-off values. Results The correlation exposes a weak negative correlation between the two variables (r = -0.229; p<0.01). The following regression line was determined: \( y = 22.3 - 0.19\times x \). Based on the results of the linear regression, we suggest three JCQ-cut-off values indicating low, moderate and high psychological health risks (38, 43, 48). Conclusion The identified cut-off values will help safety units in healthcare organizations to decide when to take preventive actions to reduce workload to a non-risky level. Future research should concentrate on identifying cut-off values based on different mixed-method approaches to identifying workload risk levels in healthcare.

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multidimensional scaling analysis and hierarchical cluster analysis on the obtained result, and determined concept mapping about positive impact perceived by the mothers. Lastly, in interpreting results stage, we deduced the positive impact of rearing children with disabilities on their mothers from concept map that we developed. Stress values in this study was found to be .307, and as a result of using multidimensional scaling analysis and hierarchical cluster analysis, 4 cluster themes emerged as positive impact perceived by the mothers. We expect that the obtained results will contribute to strengthening the positivity of mothers rearing children with disabilities, and to build positive environment for psychological rehabilitation of children with disabilities.

Speakers’ Corner

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<th>Presentation</th>
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<td>A partnership approach to developing ‘arts in care’ pack with feedback on outcomes of implementation, A070</td>
<td>Edith Macintosh, Rehabilitation Consultant, Care Inspectorate, Scotland</td>
<td>Creative arts have the potential to improve lives of older people who are cared for and bring communities together. The potential for older people living in care homes to take part in the arts is significant, the positive impact huge in terms of ageing and living well. In care homes for older people many care staff run arts activities. However, they are keen to understand the range of possibilities and be able to offer more opportunities. They need help to do this. Staff must feel confident and able to run participative arts sessions, realise people’s potential and enable people to take part in arts in the local community. The opportunity for care staff to share good practice is vitally important which will enable them to make improvements to the way they work. The Care Inspectorate (Scotland’s scrutiny and improvement body) and Luminate (Scotland’s creative ageing festival) have worked together to develop a resource to motivate care staff to enable older people to engage in creative arts. The pack is made up of: 1. A film focusing mainly on the story of 3 care homes and their residents sharing their experience of participating in the arts and the difference it has made to living life. It shows artists and care home staff running arts sessions. 2. Recipe cards for five different arts forms created by artists for care staff. These are: creative dance, writing poetry, facilitating a singing session, abstract print making and salt dough decorations. These recipe cards will enable care staff to run a variety of creative arts sessions. 3. A card with guidance on working with artists - hints and tips</td>
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<td>Transforming a Sheltered Workshop into a Community’s Hub for Sustainable and Meaningful Income Generating Work, A092</td>
<td>Ching Chi-lam, Joshua, Senior Service Manager, Fu Hong Society, Hong Kong</td>
<td>Sheltered workshops in HK are subsidized by the Government to engage individuals with disabilities to take part in meaningful work, and prepare them for potential open employment. Due to limited resources, most sheltered workshops engage in out-of-date production facilities; and commercial organizations provide them with work orders as a form of charity. As a result, sheltered workshops normally handle simple table-top assembling tasks with very low monetary return to workers. In 2003, HK suffered from the SARS epidemic, which resulted in an increased demand for high hygiene standard in product packaging. Fu Hong Society seized this niche market opportunity and transformed and positioned one of its workshops, namely Kwai Hing Vocational Development Centre (KHWDC), as a product packaging work centre catering for high hygiene standard products. 4Ps (Product, Price, Promotion, Place) of marketing mix are applied. Transformation at the workshop include the following: achieved “Excellent Class” in “Indoor Air Quality Certification Scheme (IAQ)” awarded by the Environmental Protection Department for 5 consecutive years since 2010, renovated for efficient production, and introduced IT-based management system. The outcome is encouraging. As of today, the workshop has become Kwai Tsing district’s hub of hygiene/quality product packaging. It brings benefits to all stakeholders: disabled people are engaged with enhanced self-esteem and confidence in social inclusion; families of disabled people are pleased to receive the necessary support; staff of FHS attain job satisfaction as a helping profession. KHWDC is successfully transformed into a sustainable sheltered workshop alongside with the pulse of HK</td>
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<td>Art Inclusion in Enhancing Self-image of Individuals with Intellectual Challenges and Promoting Social Inclusion, A094</td>
<td>Karen CHEUNG and Tammy CHIU, Project Officer and Service Manager, Fu Hong Society, Hong Kong</td>
<td>Believing everyone is born with creativity and aesthete, Fu Hong Society (FHS) has started incorporating art activities in its training programs for service users with intellectual disabilities since 1997. The experiences reconfirm the observation that art is a unique mode of communication and a natural form of expression that everyone possesses. FHS launched a special social inclusion project, “Let’s Art Together” in 2015. The purposes of the project are to promote social inclusion and enhance the self-esteem and confidence of individuals with disabilities. A series of art activities and workshops have been organized to further unlock participants’ artistic potentials. The Project recruits non-disabled volunteers as art facilitators to provide support to individuals with disabilities in exploring choices, opportunities, and freedom, rather than giving direct instructions. This approach echoes with the values of social inclusion, such as respect, choice, and opportunity to learn new skills and bonding with non-disabled persons. This paper will discuss how art as a medium has been applied in social inclusion programs. Program evaluation finds that, 1. The non-disabled participants have positive change in their perception and attitude towards disabled persons; 2. The non-disabled participants have increased their understanding on the artistic talents of disabled persons; and 3. Individuals with disabilities have enhanced their self-image. This paper recommends that the rehabilitation field should provide more opportunities, choices, and freedom to individuals with disabilities in art creation, and help disabled persons build up long term partnership with volunteers to establish socially inclusive relationship</td>
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<td>Differed Child Marriage Towards Education Access Rights of Boys-Girls with Disability, A104</td>
<td>Sri Hartini Rachmad, Researcher, BPS Statistics, Indonesia</td>
<td>This policy research paper pursues to examine the inclusion of children by gender in the reproductive health education for both implemented in terms of formal (schooling) and or informal (training, workshop, seminar). The unit observation of analysis is segregated by sex, aged group, residential and linking to parents’ demographic characteristics of children in order to tracking the correlation measurement of relationship between education and knowledge level of parents-children on reproductive health. Child marriage definitely breaking the law and mostly caused by low level education and knowledge on reproductive health and socio-economic condition of children’s parent. Recent Susenas report in 2015 estimated 23 per cent of women aged 20-24 years were married under the age of 16 years, and the women with disability have a higher number. The progress of reducing prevalence of child marriage has been significantly recorded since 1993 up to 2008 and next the unrestrained and the children marriage</td>
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<td>Introduction to a brochure that promotes the transition from medical rehabilitation to VR.</td>
<td>Meijiro Law Centre, South Korea</td>
<td>This brochure aimed to promote the transition of clients with Cognitive Disorders (CDs) to employment on the open labour market. This paper then goes on to assess what is planned for those workers still based in sheltered workshops and to ascertain whether their transition plans, as set out in a recent national employment strategy, are in compliance with Article 27 and the spirit of the CRPD generally.</td>
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<td>A Study on the Development of Service Quality Indicators for Sheltered Workshops</td>
<td>Sejin Park, Post-doctoral Researcher, Daegu University, South Korea</td>
<td>The purpose of this study is to develop service quality indicators and to identify priority of the indicators for sheltered workshops. In order to meet the this purposes, this study utilized Delphi survey and Analytical hierarchy process (AHP) survey as expert decision-making methods. The results of this study can be outlined as follows: First, the indicators to measure service quality of the sheltered workshops consisted of 4 superordinate indicators, including Tangibles, Empathy, Rights, Inclusion, and 44 subordinate indicators. Second, according to comparison on relative priority and weight of the indicators using AHP, it was found that Empathy was the highest priority among four superordinate indicators, with a score of 0.418 and ‘disability professionalism by the service provider’ was highest priority among all subordinate indicators. Especially, the distribution characteristics of indicators place in the very top 10 of a total of 44 indicators, indicators that included in the Empathy showed a relatively higher weighting. This fact gives a theme that consideration or regard to service users is an important point to improve service quality of sheltered workshops. And also, for this, ‘disability professionalism by the service provider’ has to be a prerequisite. Finally, results of this study provide service quality assessment indicators for sheltered workshops by putting the indicators in order according to their relative importance and scores. Also, applying this result to field situation can be helpful to improve behavior pattern and a way of the decision making for the effective service delivery.</td>
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<td>To make a decent living with a culture of goodwill &amp; understanding for People with a Disability</td>
<td>Gautam Chaudhury, CEO, A1 HR consultancy, India</td>
<td>Need assessment for disabled Peoples skill based training Employment avenues Social Security Medical facilities</td>
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<td>Irish ratification of the CRPD, A002</td>
<td>Charlotte May-Simera, Doctoral Researcher, Centre for Disability Law and Policy, National University of Ireland, Galway, Ireland</td>
<td>Ireland was one of the first signatories to the UN Convention on the Rights of Persons with Disabilities in early 2007. This demonstrated an initial strong support for this foundational instrument for disability policy reform. However, eight years later, Irish ratification is still pending. A recent architectural plan lays out the design of domestic law and points to outstanding barriers to Ireland’s ratification. This plan, in the form of a roadmap, specifies briefly that it will put in place reservations to Article 27 on work and employment. This poster will then present research into the meaning of this reservation in connection with sheltered workshops in Ireland. This poster presentation surveys Ireland’s controversial history of warehousing people with particular intellectual disabilities in sheltered employment. There are 1500 people that remain in such settings in Ireland today. The poster will also address how the introduction of the CRPD might create leverage for changing this situation. This poster will prompt a theoretical discussion utilizing a human rights based approach. It will be targeted at policy design and provide a methodological analysis of the parameters and implications of Article 27 of the CRPD on work and employment. The Convention comprises an international standard setting framework and provides the scaffolding required to reform domestic law to ensure that people with disabilities are included in society and enjoy rights on an equal basis with others. This includes access to employment on the open labour market. This paper then goes on to assess what is planned for those workers still based in sheltered settings and to ascertain whether their transition plans, as set out in a recent national employment strategy, are in compliance with Article 27 and the spirit of the CRPD generally.</td>
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<td>Tamami Aida, Professor, Mejiro University, Japan</td>
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Questionnaires
Survey Methods Development for Children with Disability, A106
Nona Iriana, The Head Division of Households Statistics, BPS Statistics, Indonesia

Developing the disability survey questionnaire purposes with unit object as children aimed to capture accurately the type of disability been adopted by children as a household’s member. These data collection of children disability methods are not common and difficult to be understood well by informant as the household member during the survey. In further, to obtain respondents’ view accurately and in terms of minimizing the error in determining the type of children disability during the interview for data collection process, method’s development should be conducted and design appropriately; ultimately high accuracy of information on children disability can be achieved.

Disability faced by a person is usually concealed by that person or any other household members because of embarrassed to acknowledge it, especially mental disabilities. This has led to a survey that includes questions disabilities produces very small figure of indicators of disability. Other causes are the terms and descriptions of some types of disabilities are not understood by the sample households (respondents). Finally, determining the techniques and interview methods most appropriate to obtain information on disability can be achieved.

Identifying the possibility differences of youth with disable towards education by sex, age group and type-level education. Measuring the tendency of boys-girls disable children having better education access rather than their mates. Observing the availability of inclusion infrastructure for youth with disability.

Developed SERBITH can be used in companies as part of its occupational health promotion plan, A137
Dr. Mehrert, Katrin; Presl, Angelika, Project manager, director, KGA (Healthy work), Germany

The project “GASH” focused on maintaining employability and health of employees in the sector of trade. The project team developed the tool “Screening zur Erfassung arbeitsbezogener Ressourcen und Belastungen bei interaktiven Tätigkeiten im Handel (SERBITH)” and a corresponding assistance manual. In the development of the tool, 195 respondents were incorporated. Women (n = 112, p = 57.4 %) are in the sample more than men (n = 81, p = 41.5 %). The age group 30-39 years is the most busy (n = 86, p = 44.1 %) followed by the age group of people up to 29 years (n = 57, p = 29.2 %) and the age group 40-49 years (n = 28, p = 14.4 %). Only 9.2 % (n = 18) of participants are between 50 and 59 years old and 1 % (n = 2) is 60 and older.

For checking the reliability of the SERBITH internal consistency (Cronbach's alpha) of the total scale of SERBITH is α=.82, the subscales have an internal consistency of α=.73 -.88. The reliability scores of the SERBITH can be considered as good and an interpretation of the total value can be made. The screening tool is meant for executive managers, qualified employees, and responsible for the health in companies in the trading sector. The tool can be used in companies as part of its occupational health promotion plan corresponding to the German Occupational Safety and Health Act. It helps to assess psychical job requirements of employees with customer contact. The results indicate improvements in terms of employee resources within the field of occupational health promotion. The screening is an orienting method which can be used in a situation-based and preventive context.

The UK model of Inclusive Skills competitions, focusing on ability, A148
Louise Keevil, Director of Charity and Corporate Services, Derwen College, England

UK Inclusive Skills competitions are a competition offer available to people aged 16 years + who are not at the skills level required for mainstream competitions. The competitions are categorised by the skill level required for the task. Whilst there has been pockets of activity in the UK for several years Inclusive Skills Competitions debuted at The Skills Show, National Exhibition Centre (NEC), in November 2015. The finals were integrated alongside national finals for the WorldSkills UK competitions programme. 15 young people took part in 3 separate competitions: Catering, Cabinet Making and Data Processing.

UK Inclusive Skills Competitions are being developed through a partnership approach with the view to ensuring a robust, exciting and sustainable programme. Partners include WorldSkills UK (WSUK); Natspec (the National Association of Specialist Colleges); AoC (the Association of Colleges in England); Inspiring Skills Excellence in Wales and several employers.

There is a three year implementation plan with the following outcomes in 2018:
- Fully branded suite of WSUK Inclusive Competitions to take place.
- All finals to take place at The Skills Show.
- Competition fully aligned to the WSUK national cycle timelines.
- Use of CMS and ORS.
- Unique aligned brand identity.
- Full provision of information on the WSUK website.
- Consultative relationship with National Competition Organising Partners.
- Use of WSUK quality assurance practices and design guidance.
- An Inclusive Skills National Focus Group, with representation from each of the 9 English regions and 3 devolved nations, is taking forward the 3 Year plan.

This presentation will expand on the UK experience, with a focus on ability. Evidence makes it clear that the benefits are the same whatever the skill level e.g. aspirations are raised, skills are showcased, teaching challenges. It is hoped that there will be the opportunity for international discussion.

Impact of a practical workshop on the knowledge and skills of caregivers on usage of mobility devices, A150
T.M.U. Sanjeewa Tunpattu, Senior Physiotherapist, National Hospital of Sri Lanka, Sri Lanka

Impact of a practical workshop on the knowledge and skills of caregivers on usage of mobility devices

Background: Mobility devices are essential for many senior citizens living in Senior citizen centers for their mobility. In the process of using mobility devices they are assisted by the care givers. But majority of the care givers are untrained or under trained of handling the mobility devices.

Objectives: To describe the impact of a workshop on knowledge and skills of caregivers on usage and handling of mobility devices.

Methodology: The workshop was a part of a series of training programs for caregivers. 30 caregivers serving in the elder care homes participated to the study. The training was one day workshop consisted with lectures, group discussions, demonstrations and practical sessions about using sticks, crutches, walking frames and wheel chairs.

The knowledge and skills of the participants were measured pre and post workshop by written and practical assessment.

Findings: Only 3 (10%) of the participants had received a training on mobility devices before. Among the participants 21 (70%) had worked less than 2 years, 6 (20%) had worked 2-4 years and 3 (10%) had worked more than 4 years as a caregiver. During the assessment for skills only 1 participant obtained pass mark in pre-training while 28 participants obtained pass mark in post training. In assessment for knowledge, no participant obtained pass mark pre-training and 27 participants obtained pass mark in post training.

Conclusions: Structured workshop of caregivers on usage and handling of mobility devices. Similar training is recommended for all the care givers.

UK survey regarding disability, A107
Rose Edwards, Research Analyst

My Voice 2015 was the largest comprehensive survey of blind and partially sighted people in the UK. It has enabled us to hear the varied voices of people living with sight loss and the challenges they face across broad areas of their lives. This intelligence is informing campaigning, lobbying and service delivery at national and local level. The survey enables international audiences to compare levels of inclusion in their own countries and to consider replication.
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<th>Creating a more inclusive university and scientific world – the PROMI project for doctoral students with disabilities, A157</th>
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<td><strong>Royal National Institute of Blind People (RNIB), England</strong></td>
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<td>Over 1200 people, aged 18 to 97 and registered as blind and partially sighted, participated in a 45 minute interview. There was considerable variation in the severity, duration and age of onset of their sight loss, and whether they had other health conditions in combination. People with sight loss were involved in developing questions, interpreting and communicating findings. My Voice highlights the significant challenges accessing information around health, banking and food packaging faced by people with sight loss. Employment levels are low, and lower than ten years earlier. Travel and transport remain the biggest barriers. Many find it difficult to make the journeys they want to. Obstacles on the street, often causing injury, are also an issue. Many people feel they have limited opportunities to participate in leisure and physical activity. Young people report that technology enables them to be more independent, however, just one third of people feel able to make the most of new technology. Four in ten participants feel cut off from people and things around them. My Voice is informing national campaigning, political lobbying and feeding into service developments. A key priority is sharing learning with those providing services at local level across the UK and directly with blind and partially sighted people, empowering them to bring about improvements in inclusion and accessibility.</td>
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<td><strong>Jana Felicitas Bauer, Teaching and research assistant, Chair of Labour and Vocational Rehabilitation, University of Cologne, Germany</strong></td>
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<td>Research from different countries around the world suggests that various barriers hinder people with disabilities from participating equally in the labour market (WHO, 2011). A pilot study from Germany (Niehaus &amp; Bauer, 2013) indicates that this is also true for university graduates with disabilities who – due to their high educational level – have rarely been the focus of research so far. One career option for graduates with disabilities is to obtain a doctoral degree. Doctoral degrees promote career opportunities in most fields and are a formal precondition for scientific careers in Germany. Hence, it should be beyond question that admission to doctoral studies should be accessible for graduates with disabilities. But there is no systematic data on the actual accessibility of doctoral studies. Besides universities haven’t paid attention to their doctoral students and researches with disabilities so far nor have they engaged in the analysis and reduction of barriers or the promotion of equal opportunities. Thus the PROMI project for doctoral students with disabilities – which is funded by the federal ministry of labour and social affairs – serves as a combination of research and practice project. It provides 45 additional part-time jobs for severely disabled doctoral students, who prior to this have been unemployed, at 21 cooperating universities nationwide. It is essential to the project that these positions incorporate a legal entitlement to reasonable accommodations structures and new access opportunities. By involving graduates with disabilities in the everyday academic life and activities, awareness is being raised and prejudices are being challenged. Furthermore, the formative and participatory evaluation of the project that focuses on the experiences of the doctoral students with disabilities, helps to identify structural and interpersonal barriers and to develop individual, institutional and political solutions.</td>
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<th>Managing transitions - Female Academics with Disabilities from University to Company (Mentoring Project), A158</th>
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<td><strong>Susanne Groth, Research Associate, University of Cologne, Germany</strong></td>
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<td>Purpose: The world report on disability shows that in the field of work and employment women are not participating on equal terms (WHO, 2011). In Germany the employment rate of women with disabilities is, independently of age or qualification, lower than those of men with disabilities or women without disabilities (BMAS, 2013). They are discriminated against in the labour market either because of their sex or because of their disability (Libuda-Köster et al., 2009). So far female academics with disabilities have not been considered in the discussion about the shortage of skilled workers and are not perceived as such by companies, yet. The two main reasons for this being: Firstly, business managements still have prejudices and reservations in their minds associated with people with disabilities (Niehaus &amp; Bauer, 2013), and secondly, universities offer less educational opportunities for graduates focusing on the transition to the labour market (Bauer et al., 2016). Methods: The City of Cologne initiated a mentoring project focusing on female academics with disabilities/health impairments at the transition from the university to working life being mentored by executive employees from small and medium-sized enterprises. The project runs for one year (2016-2017). While the mentees are getting support concerning their personal and vocational orientation, the mentors experience more about the graduates concerned and how to become an appealing employer for them. Implications: The mentoring project aims at initiating learning processes on both sides: While the mentor obtains an insight into the motivation and needs of the mentee, the mentee generates an idea about the functioning of a company and requirements for executive employees. Both parties should benefit from the possibility to develop a realistic picture of the tandem partner and overcome prejudices.</td>
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