

## RI World Congress – full abstract list

### Parallel Session A

Tuesday 25 October 2016, 4.00-5.30 pm

Information communication technology and other adjustments for disabled people

Tinto, Level 0

Presentation	Presenter	Content
Apple and Accessibility: Building technology to support special needs, A051	Sarah Herrlinger, Senior Manager, Global Accessibility Policy and Initiatives, Apple Inc., USA	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.
The ICT capacity building project directed to eradicating poverty, inequalities, and creating quality employment, A096	Myung-hwa Yoo, Secretary General, Korean Society for Rehabilitation of Persons with Disabilities(KSRPD)/ Asia and Pacific Disability Forum(APDF), South Korea	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.
Access to Work providing financial support for disabled people in employment, A144	Stuart Edwards Access to Work Strategy Lead, Department for Work and Pensions, England	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
Disabled Living Foundation providing equipment for employment, A145	Ed Mylles, Interim Director, Disabled Living Foundation, England	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.
Broadening access to	Emma Whitelock, Chief Executive	1 in 5 people in Scotland lack basic digital skills. Disabled people and older people are statistically more disadvantaged, but I want to talk to you about some of the approaches that we have co-designed with disabled people and carers to widen access to the internet and build confidence.

independent living and learning for disabled people through digital participation, A189	Officer, Lead Scotland, Scotland	<p>For example:</p> <ul style="list-style-type: none"> <li>• Informal learning: One to one bespoke support to learn relevant digital skills at home on own or loaned devices.</li> <li>• Mastering assistive technology: There are thousands of ways to make devices, laptops and computers accessible through software, peripherals and apps. We support disabled people to assess their own assistive technology needs and preferences and then provide support to learn what works best.</li> <li>• Non formal learning: We supported groups of older disabled people in the Highlands and North Lanarkshire within supported housing complexes through a basic level <a href="#">Getting Digital</a> course in order that they could communicate with family and access services</li> <li>• Drop in support: Our Perth Carers drop in supporting self directed learning. We loan computers to carers and support to learn.</li> <li>• Formal learning: At SCQF level 6 and with 12 credits our <a href="#">Thinking Digitally</a> course takes digital skills and confidence to the next level, stimulating discussion about access and inclusion when building digital artefacts like blogs, wikis, prezis and so on. We have an accessible eportfolio system and very broad categories for assessment so there are no 'special' arrangements. Everyone is encouraged to generate evidence in a way that suits.</li> </ul> <p>There have never been more global and free online learning opportunities but how accessible are these opportunities for disabled people and do they actually widen access to learning? Let's also talk about how we can work together to bridge that gap.</p>
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World of work  
Moorfoot, Level 0

Presentation	Presenter	Content
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	<p>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.</p> <p>Methods We analyzed routine data of rehabilitation and routine data of early retirement pension claims over a period of 10 year. In addition, we used secondary data collected through the routine survey of rehabilitees.</p> <p>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.</p> <p>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</p>
The AUVA return to work strategy and model, A003	Dominique Dressler, Head, International Relations, Austrian Workers' Compensation Board (AUVA), Austria	<p>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.</p> <p>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.?</p> <p>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.</p>
How thinking differently about accessibility can be good for society and good for business,	Elaine Draper, Director, accessibility and inclusion Barclays UK, England	<p>How Do I? is a simple idea with revolutionary impact. Barclays have an ambition to become the most accessible &amp; 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</p>

A138		<p>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 &amp; support for young people with learning difficulties; fully accessible pan disability digital training; accessibility training for our colleagues</p> <p>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</p>
Development of disabled graduate positive action partnership between GCIL Equality Academy, NHSScotland and Scottish Government, A182	John Speirs, National Development Manager, and Grant Carson, Director, Employment and Housing Services, Glasgow Centre for Inclusive Living Equality Academy, Scotland	<p>Glasgow Centre for Inclusive Living (GCIL) is a user-led organisation of disabled people that has provided a wide range of independent living services for the past twenty years.</p> <p>Over the past fifteen years GCIL has developed a practical application of the theoretical framework of the Social Model of Disability to deliver a range of innovative employment and training programmes specifically for disabled people.</p> <p>GCIL Equality Academy was set up in 2013 by GCIL to address two specific aims:</p> <ul style="list-style-type: none"> <li>- Firstly, to address the under-representation of disabled people in professional positions across all sectors of employment in Scotland; and</li> <li>- Secondly, to support organisations in addressing institutional forms of discrimination (policies, practices and procedures) which reinforce the exclusion of disabled people from employment in general and specifically professional positions across Scotland.</li> </ul> <p>In 2015, GCIL Equality Academy entered into a major initiative in partnership with NHSScotland and the Scottish Government to provide a graduate traineeship for a disabled person within each of the twenty-two NHSScotland Boards across Scotland. This was commissioned as a recognition of the under-representation of disabled people in professional positions within NHSScotland (0.5% of NHSScotland employees identify as disabled people).</p> <p>The graduate traineeship programme offers:</p> <ul style="list-style-type: none"> <li>- a two-year contract of salaried employment; and</li> <li>- a training and development programme that equalises the opportunities for participants to pursue a career in their chosen field.</li> </ul> <p>GCIL Equality Academy have delivered this programme since 2009 and have achieved an 85% success rate of participants progressing in their chosen career path.</p> <p>The presentation will focus on:</p> <ul style="list-style-type: none"> <li>- the development and implementation of this positive action approach to addressing the under-representation of disabled people working within NHSScotland;</li> <li>- the barriers experienced by the participants; and</li> <li>- the impact of the programme on both individual participants and NHSScotland.</li> </ul>

## Education and training Kilsyth, Level 0

Presentation	Presenter	Content
The transition from school to work of young adults with disabilities in occupational rehabilitation, A016	Nancy Reims, Senior Researcher, Institute for Employment Research, Germany	<p>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.</p>
A Study on Applying Intensive Interaction Approach on Adults with Severe Intellectual	LAI Lai-lai, Lily, Service Manager, Fu Hong Society, Hong Kong	<p>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.</p> <p>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</p>

Disabilities and ASD, A095		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.
Bringing Disability Leadership to the Forefront: The Calibre Leadership Programme, A012	Leyla Okhai, Head of the Centre for Diversity and Inclusion, Imperial College London, England	The topic of "Authentic Leadership" 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.

## Disability confident employers Carrick, Level +1

Presentation	Presenter	Content
Ripples in the Water; a Norwegian Project for employing people with a disability, A015	Paal Haavorsen, Project Manager, Ripples in the Water, NHO, Norway	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.
National Grid's inspirational EmployAbility program with an intern telling his life changing story, A037	Becky Easterbrook and Taurai Horton, EmployAbility Programme lead and graduate intern, National Grid, England	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 fulfil their lifetime ambitions. Historically these students are left out of the labour market; UK government data shows that only 6% 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 fulfil 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.
We build disability-smart organisations to improve business performance by increasing confidence, accessibility and profitability, A146	George Selvanera, Strategy & External Affairs Director, Business Disability Forum, England	Our purpose We build disability-smart organisations to improve business performance by increasing confidence, accessibility, productivity and profitability. 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. What we do 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.
The presentation shows research results of the evaluation of the	Felix Welti, Chair for Social and Health Law, Rehabilitation and Disability Law,	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

German BGG Legislation, A039	Universität Kassel, Germany	<p>Jurisprudential analyses in combination with surveys were 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.</p> <p>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 incorporate 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. <u>Action is needed to define specific functions of councils for disabled employees in regard to the BGG and accessibility strategy</u></p>
Lloyds Banking Group approach to Reasonable Adjustments, A194	Nasser Siabi, Microlink	<p>How did Lloyds Banking Group deliver a reasonable adjustment service for their staff that, according to 95% of line managers, produced a 'dramatic improvement' in their performance? How did they halve the average cost of delivering 'workplace adjustments', whilst cutting the time taken to provide them from over three months to just 14 days? Dr Siabi presents the BDF/LBG case study that provides the answers, exploring how Lloyds worked with Microlink to develop a ground breaking new service – offering valuable lessons for anyone interested in significantly reducing an organisation's costs, improving WPA delivery, dramatically reducing disability and condition related absence, improved performance and creating a happier more productive workforce.</p>

## New approaches to rehabilitation Ochil, Level +1

Presentation	Presenter	Content
Return to work in Germany: Disability Management offers possibilities to reach this target, A048	Oliver Fröhlike, Head of unit disability management, German Social Accident Insurance, Germany	<p>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</p>
Voluntary work in organizations and associations - presentation of research results, A098	Jouni Puumalainen, Researcher, Finnish Central Association for Mental Health / Rehabilitation Foundation, Finland	<p>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 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. The program is funded by Finland's Slot Machine Association.</p>
Collaboration of OTs and PRM physicians in support of persons with disability, Czech and	Jiri Votava, MD, Assoc. Prof, National Secretary of RI, Czech National Council of Persons with	<p>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 OT s 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.</p>

European experience, A129	Disability, Czech Republic	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.
The future of disability employment in Australia in the time of the NDIS, A121	Rick Kane, CEO, Disability Employment Australia, Australia	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 it 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.

## Inclusive provision or specialist services?

Harris, Level +1

Presentation	Presenter	Content
Removing barriers in education settings to create an inclusive and accessible society, A100	Alexandra Gazis, Assistant Director of Student Support, for Student Disability Services, The American University in Cairo, Egypt	<p>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:</p> <p>Education system (Schools and universities)</p> <ul style="list-style-type: none"> <li>- Special adaptation to be executed in schools and universities including classrooms in order to be accessible for different types of disabilities.</li> <li>- 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 depending on the diversified population of students in the classroom since a "pedagogy philosophy" is not applicable in schools nor universities.</li> <li>- 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.</li> <li>- Schools and Universities segregate students with disabilities all through their academic years.</li> <li>- Limited use of technology and assistive technology is lacking in the education system.</li> </ul> <p>Community:</p> <ul style="list-style-type: none"> <li>- Acceptance and attitudes towards people with disabilities: the effective participation and full acceptance/inclusion in the society for persons with disabilities is severely hindered.</li> </ul> <p>Lack of accessibility and mobility: Egypt is not accessible in many settings</p> <p>Laws: Enforcement and implementation of laws for inclusion</p> <p>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.</p>
Closing the Gap of Education for Adolescent Disabled, A107	Amiek Chamami, Statistician, BPS Statistics, Indonesia	<p>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.</p> <p>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 disable education.</p> <p>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 logit regression (Logit) analysis probability method. This applied method can provide a specific indicator measurement on inequality between adolescent disable 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</p>

		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.
A Unique Service Model of a Small Group Home for Persons with Intellectual Disabilities in Hong Kong and the Challenges It Faces, A091	Fr. Giosuè Bonzi, Founder and Spiritual Advisor, Fu Hong Society, Hong Kong	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.
Stories about "illness" and stories about life – Approaching a forgotten generation of persons with intellectual disabilities, A133	Prof. Dr. Erik Weber, Professor for Inclusive Education, Ev. Hochschule Darmstadt, University of Applied Sciences, Germany	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.

People with learning disabilities  
Lowther, Level -1

Presentation	Presenter	Content
Becoming a soldier: The process of Inclusion of Individuals with intellectual disabilities in Militia, A045	Shirli Werner, Senior Lecturer, Paul Baerwald School of Social Work and Social Welfare, Hebrew University of Jerusalem, Israel	Background: The centrality of the military within Israeli society makes it a highly important setting for inclusion and for identity development. The "Equal in Uniform" 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 "Equal in Uniform" 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.
Designing barrier-free websites for people with intellectual disabilities: What do the experts say?, A124	Marie Heide, Research Fellow, University of Cologne, Unit of Labour and Vocational Rehabilitation, Cologne, Germany	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-Dabei" 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.

Adopting Gap Model in Supporting Residential Homes for Ageing Individuals with Intellectual Disabilities, A093	CHAN Yuk-chu, Judy and LAU Tze-hei, Vico, Senior Service Manager and Nursing Officer, Fu Hong Society, Hong Kong	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.
Promoting quality of life and independence of people with Intellectual disability by self-advocacy, A058	Shosh Kaminsky, Director of Knowledge Development and Management department and supervisor of the Community and Social Change department, Beit Issie Shapiro, Israel	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 conferenc

## Education and work Menteith, Level -1

Presentation	Presenter	Content
People with complex learning disabilities researching relevant issues of their lives, A050	Dr Dana Roth, Director of Research and Evaluation Department, Beit Issie Shapiro, Israel	Researching with us – not about us: Autonomy, dependency, self-image & 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 "experts by experience" is the shared principle of "emancipatory" "inclusive", "participatory action" and most recently "collaborative" research approaches (Bigby, Frawley & 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 & 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
The Wheelchair Service Provision Basic Test to assess knowledge proficiency in basic wheelchair service delivery, A068	Alexandria Miles, PhD Student, Graduate Student Researcher, International Society of Wheelchair Professionals, University of Pittsburgh School of	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.

	Health and Rehabilitation Sciences, USA	
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	<p>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.</p> <ul style="list-style-type: none"> <li>• From a business perspective, what are the factors that favour or inhibit a company training young disabled people in Germany?</li> <li>• Which steps lead to the employment of people with disabilities?</li> <li>• What prompts companies to employ or train these employees?</li> <li>• What are the positive and negative factors?</li> </ul> <p>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.</p> <p>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.</p> <p>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.</p> <p>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 needs of the businesses concerned are taken into consideration.</p>
Overcoming barriers to Work: Nothing is Impossible, the word itself says I'm Possible, A176	Claire Chue Hong, SDS Options Adviser/Disabled Person, Disabled Person's Housing Service (Fife)	<p>Living with many health conditions and disabilities no-one thought I would ever manage to work more than a few hours a week or sustain employment long term. My aspergers alone was a major barrier to work as I struggled to form relationships and work with other people. After several jobs which didn't work out and feeling very downheartened by it I finally spotted a job that I had the knowledge and experience for. My presentation is about how I overcame the barriers into work and only a few years on from when it was thought impossible have managed to sustain a 21hr a week job for over a year. I will talk about the support I receive to do so, the adjustments made in work and the things my work have done to make my employment work which led to me winning the Fife Voluntary Action Awards Volunteering Into Work award and Disabled Person's Housing Service (Fife) who I work for being shortlisted for the Equalities and Diversity Award.</p>

## Parallel Session B

Wednesday 26 October 2016, 11.00am-12.30 pm

### Models of disability

Tinto, Level 0

Presentation	Presenter	Content
An outline of the key elements of accessibility and inclusion from an Australian perspective, A044	Michael Fox, Chair, Rights & Inclusion Australia, Australia	<p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>The 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.</p>
All inclusive in legal online discussions: A model for participation in	Larissa Beck, Managing Director, Deutsche Vereinigung für Rehabilitation	<p>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.</p> <p>The platform offers three portal areas for</p>

Germany, A060	(DVfR), Germany	<ul style="list-style-type: none"> <li>• scientific articles,</li> <li>• discussions,</li> <li>• information around issues in rehabilitation and participation laws.</li> </ul> <p>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.</p>
The presentation highlights the political strides persons with disabilities have taken in Kenya as a result of affirmative action being institutionalized in the Constitution, A160	Wilson Keter, Member of County Assembly, Bomet County Assembly, Kenya	<p>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 member of a county legislative assembly, something he could not have contemplated a few years back. The presentation therefore strongly recommends the institutionalization of affirmative action for persons with disability through legislative schemes to ensure that persons living with disabilities access positions of leadership not only in the political context but also to the corporate world context.</p>
Leonard Cheshire Disability and Inclusive Development Centre (LCDIDC) and some of our current projects, A166	Nora Groce, Chair, Leonard Cheshire Disability, England	<p>This presentation provides an overview of the Leonard Cheshire Disability and Inclusive Development Centre (LCDIDC) and some of our current projects. The LCDIDC 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.</p>
Who Do We Think We Are? Disability, Diversity and Cultural Co-Production, A175	Sasha Saben Callaghan, Bella Freak, Scotland	<p>This presentation will look at the role of disabled people as producers of culture. Traditionally discourse around impairment, disability and difference has been framed from the perspective of non-disabled professionals. The authentic lived experiences of disabled people and the existence of disability culture have been seen as secondary to this dominant narrative.</p> <p>Bella Freak is challenging the status quo by presenting disabled peoples' culture at a national and international level, with disabled people taking the lead.</p> <p>Bella Freak Festival will run in central Edinburgh from 28th - 30th July 2017 and is the first multi-platform disability arts event to be held in Scotland. The fully inclusive programme, co-produced by people who are traditionally marginalized, will be a showcase for new and grassroots talent with the focus on disabled artists, performers and practitioners.</p> <p>Underpinning this will be a programme of community development, citizen engagement and outreach to encourage disabled people from all cultures and backgrounds to be part of the story. A story where we have an identity of worth and value, rather than that of passive consumer, commodity or 'scrounger'.</p> <p>Notions of impairment and difference have become entangled with a deficit model of disability and media sensationalism. The portrayal of disabled people as either 'vulnerable victims' or 'useless eaters' is being confronted by BellaFreak from the outset. Ours is not a single narrative but many narratives which reflect a culture proudly outwith the mainstream.</p>
Epistemic displacement: a superior speaks on behalf of an inferior believing	Dr James Elder-Woodward, OBE, Independent Chair, Scottish Independent Living	<p>Epistemic Displacement – a particular wrong</p> <p>The feminist philosopher, Miranda Fricker (2007) argues that “there is a distinctively epistemic kind of injustice” which is a wrong done to someone in their capacity as a knower. She is concerned with women's relationship with men, both within personal relationships and the community at large. Fricker identifies two such wrongs: <b>testimonial injustice</b> which occurs when prejudice causes a hearer to assign a deflated level of credibility to a speaker's testimony; and <b>hermeneutical injustice</b> which occurs when there is a general lack of societal awareness towards such injustice, but which results in some disadvantage only to the speaker.</p> <p>This presentation will discuss Fricker's concepts within two contexts. The first is within the intimate relationship between '<b>professionals allied to medicine</b>'</p>

they have authoritative knowledge, A178	Coalition, Scotland	<p>(PAM) (Finklestein, 1999) and their 'client/patient'. The second is within civic society, where there is a struggle around who represents 'the voice(s)' of disabled people. Here, quite often, not only is the speaker's testimony discredited, but others, including those 'PAMs', take it upon themselves to speak on behalf of the speaker. I term this epistemic wrong – 'epistemic displacement'.</p> <p>This presentation will then turn to the role of '<b>professionals allied to the community</b>' (PAC) (Finklestein, 1999). This role is primarily taken up by disabled people from within the independent living movement. They run services and community development programmes to resource other disabled people, through information provision, interpretation, counselling and advocacy (thereby addressing their hermeneutical injustice). This then enables disabled people to take control of their lives, both individually and collectively, by speaking out authoritatively (thereby creating credence to their testimony). By having a directly accountable connection to disabled people, the movement significantly reduces the wrong of epistemic displacement.</p> <p>References:  Finklestein, V (1999) "Professionals allied to medicine" <a href="http://pf7d7vi404s1dxh27mla5569.wpengine.netdna-cdn.com/files/library/finkelstein-pacall.pdf">http://pf7d7vi404s1dxh27mla5569.wpengine.netdna-cdn.com/files/library/finkelstein-pacall.pdf</a>  Fricker M (2007) Epistemic Injustice: power and ethics of knowing, Oxford University Press, Oxford</p>
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## Ageing with a disability Moorfoot, Level 0

Presentation	Presenter	Content
A prototype Tele-Rehabilitation platform that is easy to use, low cost, robust, and mobile, A043	Tom Gerards, PhD Student, University of Strathclyde, Scotland	<p>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.</p> <p>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.</p> <p>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.</p> <p>Future work includes developing training, performing large scale studies and eventually implementation into practice, where it is expected to help patient's regain their ability to perform Activities of Daily Living, allowing them to live happy fulfilling lives in their own home.</p>
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	<p>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 tailor-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.</p> <p>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.</p>
The presentation is based on a developing process and the results of rehabilitation service model, A116	Anne Rahikka, Research manager, Miina Sillanpaa Foundation, Finland	<p>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 Wilhelmiina 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 practice research. The target group consisted of senior citizens using home care services. Short Physical Performance Battery (SPPB), WHO Quality of Life-BREF and Visual Analog Scale (VAS) assessments were done at the beginning and at the end of the 12-week rehabilitation period. Semi-structured interviews and structured questionnaires were used to collect the research data. The user experience was collected from the customer panels.</p> <p>Findings: It is possible to improve the physical ability of the elderly with the help of individual rehabilitation plan and with the guidance of professionals. The best results were obtained during the 12-week rehabilitation period in group-rehabilitation. Those who had individual rehabilitation plan and attended the groups got better results in SPPB, WHOQOL-BREF and VAS assessment compared to those who did the rehabilitation at home with the help of home care services. The technology offers new possibilities for rehabilitation but there is need of further development in order to better meet the needs of the elderly. The customer panels proved to be a useful method to involve customers in the development process. The results provide useful findings for those interested in home rehabilitation and implementation of new initiatives in developing the services.</p>
A Danish RCT shows that client-	Tove Lise Nielsen, Ph.d. student and	<p>Client-centred in-home occupational therapy improves older adults' occupational performance. Results from a randomized controlled trial.</p> <p>Tove Lise Nielsen<sup>1</sup>, Kirsten Petersen<sup>2</sup>, Helene Polatajko<sup>3</sup>, Claus Vinther Nielsen<sup>4</sup>  <sup>1</sup>DEFACTUM Central Denmark Region, Denmark</p>

<p>centered in-home occupational therapy improves older adults' occupational performance, A127</p>	<p>senior lecturer, DEFACTUM Central Denmark Region, Denmark</p>	<p>2Department of health science and technology, Aalborg University, Denmark  3Department of Occupational Science and Occupational Therapy, University of Toronto, Canada  4Department of Public Health, Aarhus University, Denmark</p> <p>Background  To improve home-dwelling older adults' functioning, Danish municipalities offer in-home rehabilitation, including occupational therapy. By law, rehabilitation goals should be decided through shared decision-making. At local policy-level, however, some restorative home-care programmes provide limited, non-client-centred therapy targeting standardised problems within self-care and domestic chores; this may erode clients' choices and access to meaningful occupations. As the first of its kind, this trial aims to evaluate the effect of intensive, client-centred in-home occupational therapy (ICC-OT) on older adults' occupational performance and satisfaction.</p> <p>Method  A randomised, assessor-blinded controlled trial among 119 older adults (60+) referred to municipal home-care. All participants could receive home-care, physiotherapy and assistive devices when meeting certain eligibility criteria. The experimental group also received 11 weeks of ICC-OT addressing client-chosen occupational goals. The usual-care group received no additional services or three weeks of restorative home-care focused on self-care and domestic chores. Occupational performance and satisfaction were primarily measured on the Canadian Occupational Performance Measure (COPM) at baseline and at 3 and 6 months.</p> <p>Results  Preliminary results show that the experimental group improved significantly more on occupational performance on the COPM after 3 months than the usual-care group: difference 1.26 points, p 0.001. Further analyses will be performed in summer 2016.</p> <p>Conclusion and application to practice  ICC-OT effectively outperforms usual care in improving older adults' occupational performance. This may benefit individual older adults and support a change in local policies towards offering them a broader range of activity choices in home rehabilitation.</p>
<p>Deafness and Aging, A155</p>	<p>Thomas Kaul, Professor, University of Cologne, Germany</p>	<p>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.</p> <p>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:</p> <ul style="list-style-type: none"> <li>• Information, consulting</li> <li>• Health care</li> <li>• Living and housing in old age</li> <li>• Educational and leisure opportunities</li> <li>• Health care with dementia</li> </ul> <p>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 competence centers for the elderly Deaf, their families and institutions, where they can get information and consulting. Other goals of the competence center are to set up networks and develop and support specific offers.</p>

Independent living  
Kilsyth, Level 0

Presentation	Presenter	Content
<p>Independent living within social policies in the Arab States, A010</p>	<p>Ola Abu Alghaib, PhD Researcher, University of East Anglia, England</p>	<p>The concepts of autonomy, self-determination, and inclusion are at the heart of the UN CPRD'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.</p> <p>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.</p> <p>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.</p>

		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 to own their homes, A032	Rachel Waddington, General Manager, Project Independence, Australia	Persons 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 care givers are no longer in a 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 scaled cluster 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 as individuals 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 practise as support gives us the starting points.
The relationship based approach to paid support, A052	Leanne K Peipman & 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: <ul style="list-style-type: none"> <li>• between all participants are of the highest priority</li> <li>• are not a consequence of paid support but a fundamental foundation of paid support</li> <li>• create pathways to empowerment, citizenship and inclusion</li> <li>• provide modeling for the development of natural relationships</li> <li>• are organic (birth, life and death)</li> </ul> The RBA approach to relationships includes: <ul style="list-style-type: none"> <li>• Development</li> <li>• Monitoring</li> <li>• Termination/ transition</li> </ul> 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: <ul style="list-style-type: none"> <li>• Prevention</li> <li>• Intervention</li> <li>• Professional Boundaries</li> </ul> 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

Presentation	Presenter	Content
The User's	Eanna Durham,	This talk will cover the challenges in terms of transitions from pre-amputated self, to amputee self, through rehabilitation to outcome, from the unusual perspective of a prosthetist who has had an amputation due to a congenital limb deficiency. The speaker will also describe current methods of computer aided design and manufacturing

Perspective, A168	Prosthetist, Opcare	(CAD/CAM) for prosthetic socket design, and how this may improve user-centred limb fitting and acceptance.
The application of clinical engineering, A169	Dr Peter Worsley, University of Southampton	The speaker will describe the latest technologies for making prosthetic limbs safer for individuals with amputation. This will include the use of imaging for prosthesis design, sensors to measure conditions at the residual limb-socket interface and user reported outcome measures to improve evidence-based practice. The talk will discuss the link between research and practice and how novel technology can be translated to improve prosthetic services around the world.
Incorporating a biopsychosocial approach, A170	Dr M Donovan-Hall, Associate Professor in Active Living and Rehabilitation, University of Southampton	Gaining an in-depth understanding of the patients views and experience is fundamental in delivering holistic healthcare that takes into account both physical and psychological aspects of care and rehabilitation. This presentation will consider how we can form an understanding of patients' experiences and users' views regarding the use of health technologies in rehabilitation. This includes the development and promotion of adherence to exercise and rehabilitation in long term conditions, in children and adults with upper and lower limb loss.
Engaging the public and service users in design, A180	Prof Jo Adams, University of Southampton	Researching the most effective ways to support people to self-manage their joint pain in arthritis can contribute substantially to improving their quality of life. The programme of research into the effectiveness of orthotics has been developed alongside service users so that we are sure our research is focused on the people it purports to serve. Our team engage service users as research partners throughout the process of designing and developing our clinical trials. Our public and patient focus groups are part of our research team and help identify which outcomes matter to people with arthritis and ideally what types of interventions they would like to see included in the NHS. We work with service users as co-applicants and co-authors on our funded research and try hard to disseminate the findings of our research through accessible lay routes as well as academic arenas.
FortisNet creating a hub of expertise in research and development, A171	Dr A Dickinson, University of Southampton	Musculoskeletal technology and enterprise is a key asset in the central South of England, fed by HEI research bases including University of Southampton, Bournemouth University, University of Portsmouth, University of Chichester, Royal Holloway, University of Surrey, Surrey Veterinary School and The Pirbright Institute. We have established FortisNet, a musculoskeletal research network including regenerative medicine, prosthetics and augmentation, rehabilitation and assistive technologies. This includes regional, national and international universities, hospitals, enterprise and service users. Through pilot projects, we have shown that investment in Southampton creates impact in Glasgow and Salford. To build our national and international impact, FortisNet members have won feasibility funds from the UK Government's Global Challenge Research Fund to implement UK engineering expertise in Lower and Middle Income countries, to use technology to improve access to prosthetics clinical services.

## Disability management in employment Ochil, Level +1

Presentation	Presenter	Content
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	<p>Implementation of the NIDMAR disability management curriculum in Belgium: from public call to a multidisciplinary consortium of DM-experts .</p> <p>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.</p> <p>Methods:</p> <p>The NIHDI followed a 2-step procedure.</p> <p>In a first step (2014), experts screened the curriculum and showed that the education material needs modification to meet the Belgian social security context.</p> <p>The second step was to launch a public call (2015) to search DM-experts who can a) 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).</p> <p>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».</p> <p>Full list of authors:</p> <p>Decuman Saskia (1,*), Perl François (1), Falez Freddy (2), Mairiaux Philippe (3), Mortelmans Katrien (4,5), Vandeweerd Marc (6,7), Lambrechts Marie-Claire (6), Godderis Lode (6,8).</p> <p>*Presenting author; (1) National Institute for Health and Disability Insurance, Brussels, Belgium; (2) Université Libre de Bruxelles, Brussels, Belgium ; (3) University of Liège, Liège, Belgium; (4) Mensura Occupational Health Services, Brussels, Belgium; (5) KaMoCo, Antwerp, Belgium; (6) Katholieke Universiteit Leuven, Centre for Environment and Health, Leuven, Belgium; (7) Fund of Occupational Diseases, Brussels, Belgium; (8) Group IDEWE, Occupational Health Services, Heverlee, Belgium</p>
The need for, and the delivery of, a consistent	Graham Halsey, Chairman, International	<p>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.</p> <p>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</p>

Disability Management Programme within the United Kingdom, A156	Disability Management Standards Council - UK/Ireland, England	<p>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)</p> <p>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 global Centre of Excellence in Return to Work Planning agreed with the International Social Security Association (ISSA), a UN body, developing best practice guidelines.</p> <p>The underpinning CDMP, 24-module, education programme is continually subject to delivery and outcome evaluation upgrading and scrutiny. It is formed on a consensus-based model, identifies competencies required on the job and allows for international transferability. As a result, the earned CDMP designation gives holders current standards and ethical procedures to adhere to, thus improving the confidence in the quality of the service received.</p> <p>CDMP credentials are overseen in the UK by the International Disability Management Standards Council - UK &amp; Ireland (IDMSC – UK &amp; Ireland). The Council's aims are, broadly speaking, to provide leadership and innovation in reducing the socio-economic cost of disability to workers, employers and society. More specifically, it's mission is to develop leading edge policies, programmes and quality standards designed to support effective disability management / return to work.</p>
Competencies Needed for Return to Work (RTW) Professionals for Successful Employment Outcomes for People with Disabilities, A165	Dr Madan Kundu, Associate Professor, Southern University, USA, on behalf of Dr Alo Dutta	<p>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.</p> <p>RTW professionals are composed of RTW Coordinators, Supervisors, Case Managers, Rehabilitation Counselors, Job Placement Specialists, Job Coaches, and others. In collaboration with a PWD and the family, these professionals play a key role in developing and implementing plans for career development and job placement.</p> <p>It has been widely reported that a professional with a post-graduate or master's degree from an accredited program and a national certification generates more favorable VR closures than a practitioner without these credentials. However, large parts of the world continue to be somewhat underprepared to serve its citizens with disabilities. Therefore, it is imperative that areas of training need be identified with active feedback from RTW professionals.</p> <p>This presentation will provide a bird's eye view of two RTW professionals' training needs assessment studies conducted by utilizing A Systems Approach to Placement: Self-Assessment for Students and Counselors (SAP-SASC). The instrument is designed to identify critical areas of knowledge, skills, and competencies possessed by rehabilitation counselors in state VR agencies. The findings will be linked to the commonalities in knowledge domains identified in the U.S. as necessary for inclusion in RTW professional training programs accredited by CORE, CACREP, or NIDMAR. Using these empirically determined knowledge domains, effective curricula can be developed in the different parts of the world in need of quality RTW services leading to long-term employment and community integration of PWD.</p>
Vocational Rehabilitation Professionals' Competencies in Taiwan, A110	Ming Hung Wang, Professor, Graduate Institute of Rehabilitation Counselling, National Changhua University of Education, Taiwan	<p>Provision of psychosocial intervention, vocational training, and job placement services to help people with disabilities to obtain and maintain employment is the cornerstone of vocational rehabilitation (VR) programs. However, the quality of such services often depends on the level of academic and professional preparation of VR practitioners. Therefore, it is important to identify required competence levels and assess training needs of professionals.</p> <p>Since 2003, three master's programs in rehabilitation counselling have been established in Taiwan. Currently, there is no established accrediting standard for these programs that follow the standard established by the Council on Rehabilitation Education, USA and tailor the curriculum to meet local needs. However, the Ministry of Education evaluates the quality of the programs including performances of graduates every five years. Performances of graduates are evaluated mainly based on feedbacks from employers of government and non-profit private organization.</p> <p>Zhuang (2011) investigated 201 VR professionals and concluded that occupational information, research outcome application, resource negotiation, advocacy for rights and supervision for new personnel were areas of training need. Lin (2012) studied 151 supported employment specialists' perspectives on their job, function and competency level. The respondents indicated that they were under-prepared in improving employers' motivation to hire persons with disabilities. Wang et al. (2015) investigated VR case managers' competency level and support needs. The results indicated low competency levels in counselling, evaluation, career counselling, ethics, and advocacy for resources.</p> <p>The purpose of this study was to validate the Taiwanese version of the Systems Approach to Placement: Self-Assessment for Students and Counselors (SAP-SASC), designed to identify critical areas of knowledge, skills, and competencies possessed by 116 VR professionals (Dutta et al., 2015).</p>

## Supported self-help Harris, Level +1

Presentation	Presenter	Content
The Heart Manual Service NHS Lothian, embraces the future, not forgetting the past, A112	Jennifer Elliott, Specialist Education Nurse , Heart Manual Department, NHS Lothian, Scotland	<p>"The Heart Manual programme: development, delivery and success."</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>

		<a href="http://www.theheartmanual.com">www.theheartmanual.com</a>
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, re-education in order to obtain a new profession does not allure. 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. Hitherto, 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.
A survey revealed the need for 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.

## Young people Menteith, Level -1

Presentation	Presenter	Content
Rehabilitative Daycare from a dream to reality,	Dr Hadar Yardeni, Head of the Department of Child	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

A001	Development & Rehabilitation, Ministry of Health Office, Jerusalem, Israel	<p>legal requirement for the employment of several nurses in the same rehabilitation Daycare, without professional justification.</p> <p>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.</p> <p>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.</p> <p>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.</p>
Self-Determination, Vocational Rehabilitation Engagement, and Recovery from Consumers' Perspective: A Qualitative Study, A046	Jessica Brooks, Assistant Professor, University of North Texas, USA	<p>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.</p>
Parents' Partnership with a Service Provider in Enhancing Service Quality and Advocating Policy Changes, A089	Becky Luk and Illya Ng, Executive Director and user's sister, Fu Hong Society, Hong Kong	<p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>
Handling autism children -> accurate diagnosis, appropriate education, treatment & strong support, A061	Asviretty Nurgusmy Yerly. Asir, National Secretary, Rehabilitation International for Indonesia and YPAC/Society for the Care of Children with Disabilities, Indonesia	<p>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.</p> <p>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.</p> <p>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</p> <p>We aspire that MA will be to contribute to the government in formulating policies that are specific to the education and care of children with autism, to provide an opportunity for researchers to do important research. No matter how excellent the facilities of the institution, an individual with autism will not show a positive development, if their family does not support an appropriate education for their special family member. This statement is proved by the case study of Zaky and Abi, where the whole family support all education effort, what do parents and siblings do for them?? will be presented by his mother and sibling</p>
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	<p>Background</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>My presentation addresses the abovementioned gap through empirical examples.</p> <p>Methods:</p>

The presentation is based on a series of field studies of home based rehabilitation, using qualitative methods (interviews with professionals, people undergoing rehabilitation and their relatives, observation and participant observation). During fieldwork, the act of goal setting became a special area of interest to me.

Results  
 Goal setting in rehabilitation is difficult. It is a contested arena with different views between professionals on how to set goals, different expectations from all involved in the rehabilitation process and with an ethical debate about the ownership of the goals. To follow the new rehabilitation law in Denmark, there is a need to address the act of goal setting in the daily practice of rehabilitation programmes, and to incorporate a more hands-on education on goal setting in the educational system.

## Parallel Session C

Wednesday 26 October 2016, 1.30-3.00 pm

WHO GATE project  
 Tinto, Level 0

Presentation	Presenter	Content
<p>Presentation from GATE Research Team at Trinity University, A172</p>	<p>Professor Malcolm MacLachlan,          Professor of Global Health, Director, Centre for Global Health, School of Psychology, Trinity College Dublin, Ireland</p>	<p>What is GATE? What has it done so far? What does it hope to do? What do you think it should do?</p> <p><b><u>World Health Organisation - GATE Project</u></b></p> <p>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.</p> <p>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.</p> <p><b><u>What is the GATE initiative?</u></b></p> <p><u>The vision of the GATE initiative:</u>  <i>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.</i></p> <p>The GATE initiative has only one goal: to improve access to high-quality affordable assistive products globally.</p> <p>To achieve this, the GATE initiative focuses on four interlinked activities:</p> <ol style="list-style-type: none"> <li>1. <b>Policy:</b> National assistive technology policy framework (ATPF)</li> <li>2. <b>Products:</b> Priority Assistive Products List (APL)</li> <li>3. <b>Personnel:</b> Comprehensive assistive technology training programme (ATTP)</li> <li>4. <b>Provision:</b> Single-window service provision model (ATSP)</li> </ol>
<p>My presentation looks at my invention <a href="http://www.assist-mi.com">www.assist-mi.com</a> to remove barriers to disabled people every day goods and services. my invention assist-Mi a platform now employing disabled people</p>	<p>Gary McFarlane,          CEO, <a href="http://www.assist-mi.com">assist-mi.com</a>,          England</p>	<p>assist-Mi app address hat the un asked for technology that breakdown barrier to society <a href="http://www.un.org/en/development/desa/news/social/promise-of-technology-for-persons-with-disabilities.html">http://www.un.org/en/development/desa/news/social/promise-of-technology-for-persons-with-disabilities.html</a> here hows assist-Mi works United nation branded <a href="https://www.youtube.com/watch?v=FWoXNxme0b8">https://www.youtube.com/watch?v=FWoXNxme0b8</a></p>

like myself, A164		
The importance of social media, especially if you're disabled, A007	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.
The American approach to reasonable accommodations, A181	Chet Cooper, Ability Magazine	Detail to be confirmed

## Delivery practical community-based solutions Moorfoot, Level 0

Presentation	Presenter	Content
The development of Ten Good Practice Principles in Vision Rehabilitation services in England, A084	Joshua Feehan, Project Manager, Royal National Institute of Blind People (RNIB), England	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.
Demographical challenges..? Solution: Presentation of practice-based interdisciplinary rehabilitation with welfare technologies at Vikaergaarden, Aarhus, Denmark, A114	Inger Oddershede, Lotte Lucia Jernes 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: <ul style="list-style-type: none"> <li>Monitoring of the sleep quality,</li> <li>Implementating new virtual physical training programs.</li> <li>Testing an evaluation device for a more general evaluation of the technologies.</li> </ul> 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 City 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.

The project "CBResearch" – developing a modularized academic curriculum based on the CBR matrix, A059	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	Jong Hwa JEONG, Professor, Sahmyook University, South Korea	The purpose of this case study is to conduct an analysis of livelihood and welfare service needs of disabled residents in rural areas and to present the future challenges that would promote welfare services for disabled residents in rural areas. The survey was conducted with the participation of the 248 disabled residents in Yangpyeong Country to analyzed livelihood and needs and used focused group interviews disabled persons. As a result of the analysis 20.4% of Yangpyeong Country residents are age over 65, thus already became a super-aged society and persons with disabilities among age over 60 is 56.7%, which is 5.0% higher than the national average of 51.7%. Health and Medical situation amongst residents show 50.3% suffers chronic illness, consist of diabetes (21.1%), hypertension (19.4%), and arthritis (9.7%), low continuing education participation rate, and leisure and social participation were limited to activities such as watching TV. Group interview with 88 people with disabilities revealed a need for geriatrics hospital and rehabilitation services such as home visiting physiotherapy. Based on these findings, this case study suggests comprehensive policies taking into account the aging of population and aging of people with disabilities in rural areas; Prevention of secondary disabilities through visiting nursing service, operating remote access centers of Rehabilitation Center for the Disabled to ease accessibility.
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.

## Creative rehabilitation projects Kilsyth, Level 0

Presentation	Presenter	Content
Old Persons with Disability : The Development an Ageing Resilience, A130	Dr. Lilis Heri Mis Cich and Sri Rachmad, Lecturer and Researcher, University of Indonesia, Indonesia	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 and/ or disability is more important than vulnerability. 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 elderly'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 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 to encourage and replicate these findings is needed so as to be able to recognize ageing resilience and implement in each country level.
Describing the	Carmit-Noa	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

<p>experiences and needs of disabled persons in a time of terror or war, A028</p>	<p>Shpigelman, Assistant Professor, University of Haifa, Israel</p>	<p>exposure to political violence have not included individuals with lifelong disabilities who may be at higher risk than the general population.  <b>Methods:</b> 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).  <b>Results:</b> 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).  <b>Conclusions:</b> 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.</p>
<p>Mobility through Participation for manual wheelchair user, A143</p>	<p>Patrick Heydenreich, Research Institute for Inclusion Through Physical Activity and Sport, Germany</p>	<p><b>Background</b>  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).  <b>Methodology</b>  The target group is individuals insured by employers' liability insurance associations and accident insurances with acquired SCI using manual wheelchair. Standardized data 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.  <b>Results</b>  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.  <b>Conclusion</b>  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.</p>
<p>Towards a biopsychosocial approach of the disability: improvement of wheelchair and disability sectors in Romania, A174</p>	<p>Erika Andreia Garnier, Peer Group Training Coordinator, Motivation Romania Foundation, Romania</p>	<p>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.</p> <p>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.</p> <p>The activities planned to take place focus on wheelchair service and ability trainings.</p> <p><u>Wheelchair services</u>  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.</p> <p><u>Ability Trainings</u>  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.</p> <p>We also aim to provide training to family members, students and teachers.</p>

Presentation	Presenter	Content
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 & 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, & Fleming, 2011; and Kundu, Dutta, & Chan, 2010; Kundu, Schiro-Geist, & 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 ( $r = 0.30, p < 0.01$ ). 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. "Kacang Koro" 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).
DeafSkills - new system of professional Championship for Deaf people, A086	Stanislav Ivanov, President, DeafSkills International Federation, Russia	The idea of creating an international DeafSkills association originated in Russia, a country well known for its advanced deaf community. DeafSkills International Association is registered and based in the Netherlands. Since 1946, in the world have been developed effective systems of international competitions in professional skills, which is WorldSkills for young people and Abilympics for people with disabilities. These competitions allow children to take conscious practical career guidance and see multitude of jobs gathered in one place. For the teachers it helps to choose the best practices of vocational education. For the employers it assists to select the best employees and the best international production technology. There are more than 80 countries involved in the movements, in its international championships take part about 1000 the best professionals in 50 occupations. Unfortunately, the deaf are not involved in the WorldSkills movement and in the minority (about 5-7%) of all the participants in Abilympics. Creating a separate system of world championships for the deaf will be a very important step in the realization of tasks on their integration into modern society. The main goal of the DeafSkills championship is to assist young people with hearing disabilities to obtain high-quality vocational education and employment.
DeafSkills - new project of professional championship for deaf people, A087	Lidia Frolova, Vice-president, DeafSkills International Federation, Russia	The idea of creating an international DeafSkills association originated in Russia, a country well known for its advanced deaf community. DeafSkills International Association is registered and based in the Netherlands. Since 1946, in the world have been developed effective systems of international competitions in professional skills, which is WorldSkills for young people and Abilympics for people with disabilities. These competitions allow children to take conscious practical career guidance and see multitude of jobs gathered in one place. For the teachers it helps to choose the best practices of vocational education. For the employers it assists to select the best employees and the best international production technology. There are more than 80 countries involved in the movements, in its international championships take part about 1000 the best professionals in 50 occupations.

Unfortunately, the deaf are not involved in the WorldSkills movement and in the minority (about 5-7%) of all the participants in Abilympics. Creating a separate system of world championships for the deaf will be a very important step in the realization of tasks on their integration into modern society. The main goal of the DeafSkills championship is to assist young people with hearing disabilities to obtain high-quality vocational education and employment.

## The future of rehabilitation: recent advances

### Ochil, Level +1

Presentation	Presenter	Content
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	<p>Title</p> <p>Multidisciplinary post-discharge rehabilitation of community-dwelling older adults after hip fracture</p> <p>Purpose</p> <p>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.</p> <p>Method and methodology</p> <p>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 health-care 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.</p> <p>Findings</p> <p>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.</p> <p>Implications of findings</p> <p>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.</p>
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	<p>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.</p> <p>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.</p> <p>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.</p>
A critical discourse analysis of current rehabilitation policies' effect on rehabilitation conceptualisations and practices, A134	Anne-Stine Bergquist Røberg, Head Nurse, Ph.-d. fellow, Sunnaas Rehabilitation Hospital, Norway	<p>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.</p> <p>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.</p> <p>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.</p> <p>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).</p>
Assessing	Dr Madan Kundu,	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; Coulter, 2012; Kang, Magura, Blankertz, Madison, & Spinelli, 2006; O'Brien,

<p>Vocational Rehabilitation Engagement of People With Disabilities: A Factor-Analytic Approach, A140</p>	<p>Professor and Chair, Southern University, Department of Rehabilitation and Disability Studies, Baton Rouge, Louisiana, USA</p>	<p>White, Fahmy, &amp; Singh, 2009; Ozelie et al., 2012; Tait, Birchwood, &amp; Trower, 2002). A growing body of literature links patient engagement to health outcomes, health care costs, and patient satisfaction (Hibbard &amp; Greene, 2013; Hibbard, Stockard, Mahoney, &amp; Tusler, 2004; Wild, Cunningham, &amp; 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 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 <math>\alpha</math>) 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.</p>
<p>Standardized toolkit providing education and training tools for professionals working with individuals with Intellectual disabilities, A161</p>	<p>Chrisann Schiro-Geist, Ph.d., CRC-Full professor; Director of Institute on Disability, The University of Memphis, USA</p>	<p>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 ID 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 be able to specifically relate this information to working with individuals with IDD in global context.</p>

**Inclusive societies**  
Harris, Level +1

Presentation	Presenter	Content
<p>The Effects of stigma in the workplace - mental health, A049</p>	<p>Jeanette Irwin, Customer service representative, Ecomaster, England</p>	<p>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. (I)ndependent (n)ecessary (d)eliver (e)xecute (p)romote (e)xist (n)urture (t)each It is up to all industries to achieve this.</p>
<p>The lived experience during transition from adolescence to adulthood for young people with cerebral palsy, A076</p>	<p>Paul Boyle, Senior Lecturer, University of Brighton, England</p>	<p>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</p>

		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.
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.
The plight of disabled prisoners, A195	Julie Pitts, England	In the past year the plight of disabled people incarcerated in prison has come to my attention. My presentation will speak to/touch on the issues that impact on them due to inadequate care and support in health and all areas of their welfare including rehabilitation and education. In addition it will deal with the challenges faced by disabled relatives, friends, volunteers and visitors attempting to access prisons. The presentation will come from direct experience as a service user (visiting prison) and from input from incarcerated disabled people. It will reflect upon the level of awareness of such issues within the disabled community and the wider community at large, touching on the double stigma involved, the outright discrimination often experienced and the concept that once one person is denigrated to being not human, ultimately we all are. It will invite people to open their minds, consider possible ways to move forward and ultimately take action.

## Independence Lowther, Level -1

Presentation	Presenter	Content
How Neatebox utilises existing technology to create innovative & inclusive solutions, A057	Gavin Neate, CEO and Founder, Neatebox, Scotland	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. Our first product is an app that enables the user to automatically 'press the button' at a pedestrian crossing with their smart phone circumnavigating the need to make physical contact with the crossing pole prior to crossing the road. This has long been a challenge faced by those with a visual impairment, mobility impairments and a host of other challenges. Our second product is a fully inclusive solution for tourism attractions or destinations. Using BLE and Beacons, visitors can use their own smartphone to conduct a self-guided and engaging audio and visual tour where information is 'released' at a timely point within an app when in close proximity to our pre-installed beacons. Our Customer Service solution recognises and counters the challenges experienced everyday by those with a whole host of disabilities in activities such as shopping, at leisure or when attending events. By creating a customer service application which benefits both the customer and the business, it creates a communication system for users and customer service teams which results in a positive and engaging shopping experience for both parties. Gavin will speak about his background, his motivation and the Neatebox goals, which he will describe in detail. He will also reference how these solutions will benefit the Rehabilitation community and will highlight the need for the understanding of smart technology to form future solutions in this field.
This presentation focus on the well-being at home of people with disabilities and their families, A109	Delphine Labbé, Postdoctoral fellow, and Sylvie Jutras University of British Columbia, Canada	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. 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 a convenient house to conduct all the meaningful activities for them, ranging from work, leisure but also social contact. For the family members, disability modifies the use of spaces, influencing how family members perceive that the home reflects who they are. The feeling of security, especially protection from theft and intrusion and psychological refuge, was perceived as favourable for family members' well-being. Conclusion. This study shows the importance of considering home and disability in a way that goes beyond physical adaptations to include the various needs of all household members for optimal well-being and to support social participation.
Immigrated children with disabilities and their families	Mirkka Vuorento, Researcher, M.Soc.Sc., Rehabilitation	The Finnish disability service system will increasingly host also children with disabilities and their families, who have immigrated to Finland. Both disability services and immigrated 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. Our 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

within the Finnish welfare services, A115	Foundation, Finland	<p>information about support and advice she had provided to the families and other professionals.</p> <p>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.</p> <p>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 for.</p>
Children with disabilities in the global south: Barriers to survival, participation, and education, A162	Dana Corfield, Founder and Executive Director, Equip KIDS International, Peru	<p>When addressing issues relating to children with disabilities, the focus is typically on concerns such as education, recreation and/or parental stress. These are clearly important matters that deserve considerable attention and resources, but it should not be assumed that they are indeed the areas of greatest need and/or of greatest priority for the majority of children with disabilities around the world. In fact, the focus on these matters often obscures more basic concerns and barriers that frequently prevent children in the global south from realizing their human rights. For example, most children with disabilities in the global south still go without basic supports such as mobility devices, communication supports and community-support services, and without these many children cannot access education, healthcare or recreational activities (for example), despite increasing efforts to provide such opportunities. In fact, without such supports, many children do not survive. Yet, despite this grim reality, these critical issues are rarely addressed, and the voices of such children with disabilities and their families remain largely unheard, further marginalizing this important group.</p> <p>This presentation will briefly discuss the complicated issues that have led to and perpetuate such discrepancies in prioritization and planning, and it will seek to begin to remedy the situation by presenting data collected from Peru concerning the lived experiences and priorities of children with disabilities and their families. More specifically, this presentation will examine the primary barriers that children and their families face and the strategies they currently use in order to increase participation within the family, the community and within systems such as education and healthcare. These findings will then be positioned within the broader context of the existing data regarding childhood disability in the global south, and will be used to pose important questions about our future projects and priorities.</p>

## Rehabilitation Menteith, Level -1

Presentation	Presenter	Content
Development of a hospital-based gait analysis system for use in gait rehabilitation programmes, A029	Gwenllian Tawy, PhD student, University of Strathclyde, Scotland	<p>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.</p> <p>Although GA has been found to be beneficial in improving mobility in disabled people, it is rarely used clinically for economic and practicality reasons. This poses an accessibility problem to health professionals and patients who could benefit from using such facilities.</p> <p>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 complement this system.</p> <p>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 is also moveable; a function which is paramount for a hospital environment, where rooms are often multi-functional.</p> <p>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 strapped over clothing and 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.</p> <p>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.</p>
To support Independent Living of adults with developmental disabilities through lifelong education after graduation, A036	Yeonsoo Jeong, Assistant Professor, Dankook University and Pro. Kyungsoon Park and Pro. Jiyeon Han, Daegucyber University, South Korea	<p>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 welfare 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 "home again" 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.</p>
Practical application in leveraging web-	Justin M. Brockie, Chief Operating Officer, Therap	<p>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.</p>

based software in provision of inclusive supports worldwide, A042	Services, USA	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 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.
Hacking wheelchairs with open design, digital fabrication and the maker movement, A152	Molly Gavriel, Head of Operations, #HackOnWheels, England	According to the World Health Organisation over 65 million people worldwide need a wheelchair to be part of society and live an independent life. <sup>1</sup> 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.

## Parallel Session D

Thursday 27 October 2016, 1.30-3.00 pm

The WHO global disability action plan

Tinto, Level 0

MODERATORS : JAN A MONSBAKKEN – DR. ASISH MUKHERJEE		
Presentation	Presenter	Content
Presentation of the Action Plan	Dr Alarcos Cieza Moreno	www.who.int
Common understanding of rehabilitation based on functioning and ICF	Professor Jerome Bickenbach	
Description and Classification of	Professor Christopher	

rehabilitation services	Gutenbrunner	
ICF, Rehabilitation, Health System, Health Policy and Outcome Measurement, A185	Gerold Stucki, Director, Swiss Paraplegic Research, Notwill, ISPRM, Switzerland	Rehabilitation aims, among other things, to support persons with disability to live as independently as possible. To reach this endeavour optimizing a person's functioning is of utmost importance, with the International Classification of Functioning, Disability and Health (ICF) playing an integral role. Recognizing this, the international rehabilitation community has been pro-active in implementing the ICF in rehabilitation practice, research and policy development; national rehabilitation societies have subsequently taken on a leadership role in these efforts. A key step toward ICF implementation in rehabilitation has been the development of ICF-based clinical data collection tools – the ICF Generic and Rehabilitation Sets and corresponding simple, intuitive descriptions. The application of these ICF-based data collection tools are in progress, ranging from implementation in routine clinical assessments to serving as a tool in monitoring quality of care all over the world.
WHO, Global Disability Action Plan, SCI , A186	Alessandro Giustini, Scientific Director at San Pancrazio Hospital, Arco, Santo Stefano Rehabilitation Group, ISPRM, Italy	The Learning Health System for Spinal Cord Injury (LHS-SCI) is an initiative embedded in the World Health Organization's (WHO) Global Disability Action Plan 2014-2021 'Better health for all people with disability' with the overall aim to continuously improve the lives of persons with SCI in the community by means of an international evidence- and rights-informed research and policy effort. Within LHS-SCI researchers and stakeholders of participating countries learn from each other's successes to jointly develop research and policy capacity towards better future policies, services and care. The LHS-SCI Initiative aims to achieve the three objectives of the Global Disability Action Plan: 1. Removal of barriers and improved access to health services and programs, 2. Strengthening of rehabilitation, habilitation, assistive technology, assistance and support services, and community-based rehabilitation, 3. Strengthening of relevant and internationally comparable data on disability and support of research), and to implement the recommendations made by the International Perspectives on Spinal Cord Injury (IPSCI) report. To achieve these aims the LHS-SCI is divided into three phases: 1) Generating evidence through the International SCI Survey and Description of the Cross-cultural Societal Response; 2) implementing National Stakeholder Dialogues; and 3) building capacity through Policy and Research Capacity Efforts. Currently, over 20 nations from all six WHO regions participate in the initiative.
Strengthening Rehabilitation in the Health System Worldwide , A187	Boya Nugraha, Researcher (Principal Investigator), Department of Rehabilitation Medicine, Hannover Medical School, ISPRM, Germany	Strengthening Rehabilitation in the Health System Worldwide Christoph Gutenbrunner, Gerold Stucki, Boya Nugraha, on behalf of ISPRM An Activity under ISPRM-WHO's Collaboration Plan  One of the objectives of The Global Disability Action Plan 2014-2021 "Better Health for all People with Disabilities" (GDAP) is "to strengthen and extend rehabilitation, habilitation, assistive technology, assistance and support services, and community-based rehabilitation". For the implementation the GDAP at national level, National Disability, Health and Rehabilitation Plans (NDHRP) can be an important tool and thus, it is needed to be developed. To facilitate such developments, the Collaboration Plan of the WHO and the International Society of Physical Medicine and Rehabilitation (ISPRM) includes "support for countries in the development of policies, strategies and plans to strengthen the provision of rehabilitation and related services". NDHRP is developed based on collection of relevant data and consultation processes with different stakeholders. In the end, the list of recommendations that need to be implemented is presented to the ministry of health of the country. To develop NDHRP, some steps need to be done: A. Request process (country request to WHO headquarters) 1. Request of Ministry of Health together with WHO country officer to WHO headquarters to have consultation/develop NDHRP 2. WHO headquarters will contact person/NGO for having consultation process to the country B. Consultation process (Rehabilitation advisory team with stakeholders in the country) 1. Establish Rehabilitation Advisory Team 2. Collect relevant data from available sources 3. Visit the country I (Collect additional data/information (via stakeholders dialogue)) 4. Analysing the gaps and drafting recommendation 5. Visit the country II (Consensus of recommendation (via stakeholders dialogue)) 6. Final version of recommendations of NDHRP to be given to the Ministry of Health 7. Transpose the recommendation according to the Health Systems Building Blocks with certain timeline This model has been applied in Egypt and Ukraine and led to comprehensive document of analyses and recommendations.

## Disaster management Moorfoot, Level 0

Presentation	Presenter	Content
Satisfaction level of Rana Plaza building collapse survivors after being reintegrated in community,	Mohammad Monjurul Karim, Rehabilitation Manager, Centre for the Rehabilitation of the Paralyzed	Introduction: On April 24, 2013 an eight storied building called "Rana Plaza" collapsed and over 1200 people died and more than 2500 rescued alive with different injuries. To Re-integrate Rana Plaza Survivors in the community, CRP provided them range of services like medical care (medication, surgery, nursing and counseling), therapeutic care (Regain their functional activities), supplying wheeled mobility aids, assistive devices and artificial limbs, vocational training, job placement, support to family members etc and at stable stage, they are sent back to their community with a self-employment option. This study aims to explore experience of Rana plaza Survivors following community reintegration with a new job. Methodology: This is a Qualitative study, where researcher explores the experience of Rana Plaza Survivors following engagement in a new occupation. Purposive sampling 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

A077	(CRP), Bangladesh	support provides them a solid foundation to come out the 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 consequent, 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 disastrous 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, tornados, 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. Findings show of the nine type of disasters, flood is the most frequent occurrence, which is 32 times or 48 percent in the period 2000 – 2012. The number of people that died as the result of the earthquake in the year 2000-2012 amounted to 774, while 79,016 units of house were severely damaged. Many people who evacuated with private vehicle that raises the 'high traffic' in several points and is very dangerous when a tsunami occurs. Another point to be noted is the lack of an early warning system coordinated by relevant agencies. In sum up, understanding of the hazard, exposure and vulnerability to disasters will be useful for the community in identifying the main risk factor, to help develop appropriate strategies for risk reduction.
Implementing the Sendai Framework for Disaster Risk Reduction: disability inclusion as a continuum within Disaster 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 medical 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 Dont's Guide for Rehabilitation Professionals".
Technical and structural measures to manage disasters in road tunnels with disabilities, A030	Dr.-Ing. Dirk Boenke, Head of Transport & Environment, STUVA e. V. (Research Association for Underground	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 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.

Facilities), Germany	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

Presentation	Presenter	Content
Brief overview of the project's outcomes, regarding the participation of persons with disabilities, A035	Eva Nachtschatt, 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.
Vocational Education and Training in Germany and the Convention of the United Nations on the Rights of Persons with Disabilities, 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 Medicine (ISPRM), USA	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.
Individual Supported Living Project exploring choice and control over where you live and with whom. A191	Professor Errol Cocks, Research Professor, School of Occupational Therapy and Social Work, Curtin University, Australia	Following Article 18 of the UNCRPD, the Individual Supported Living Project aims to promote the evidence base for supporting choice and control to enable adults with intellectual/developmental disability to live a good life in their own home. A related principle is "one person at a time" and avoiding congregation of people with a disability. The Project began in 2007 and has engaged a wide range of interested people including families, people with disability, advocates, and NGOs of which some 17 are partners in the current third stage of the Project. Using evaluation and training, the ISL Project (funded by Australian Research Council) has developed a measure of quality in ISL arrangements for adults with intellectual/developmental disability and a process for reviewing arrangements. Curtin University is partnered with Melbourne and Sydney Universities. To date, over 100 ISL arrangements have been reviewed in WA, Victoria, and NSW. The presentation will share how the Project began in 2007, the measure that was developed, and how that is used for training and evaluation of quality in individual living arrangements. It will also provide some of the preliminary findings of the Project which is due for completion early in 2017. If time permits, a related small project exploring small business enterprise models of employment for adults with intellectual disability and high support needs will be briefly described.

Presentation	Presenter	Content
National Tourist Board strategy to deliver accessible tourism, A008	Chris McCoy MBE, Head of Accessible Tourism Programme, VisitScotland, Scotland	<p>Strategy to Deliver Accessible Tourism</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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 Consultation and Training Services, Inc., USA	<p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>
Accessibility and Universal Design in a Zoological Setting, A132	Mark Trieglaff, President, Accessibility Consultation and Training Services, Inc., USA	<p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>
How live experience; which celebrates diversity at scale can be a catalyst for positive change, A153	Andrew Douglass, Founder, Parallel London, England	<p>Real-life experiences shape our preferences and memories much more profoundly than what we read or see via any media.</p> <p>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.</p> <p>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.</p> <p>Using our experience and insight, we have created Parallel London (<a href="http://www.parallellondon.com">www.parallellondon.com</a>). This is a major live experience that has been designed and curated through the lens of accessibility and inclusivity; which in turn will seek to attract people of all ages and abilities.</p> <p>By using the power of live events at a large-scale, we believe we can act as a dynamic catalyst to engage a wide cross-section of society (communities, businesses, brands, government, schools, specialist organisations, charities and families); bring to life the positive benefits of inclusivity, whilst at the same time emotionally connecting our audiences to a wholly new and exciting experience of disability.</p> <p>Our event format combines mass participation; enabling beneficiaries to become benefactors and a series of themed environments, which brings to life and celebrates the very best of diversity. These environments include technology, culture, family, community, food and drink, active lifestyle and wellbeing.</p> <p>Each environment is also sponsored by a major brand. We take the view that brands need to stand up and align themselves with the positive attributes of disability because</p>

part of the cultural power for change is in this alignment.  
Our aim is then to roll out this format globally.

Sport  
Ochil, Level +1

Pamela Relph, Aaron Phipps, Heinrich Popow, Qingyao Lei.  
Gold medals in London and Rio. Climbing the highest mountain the world. Rowing through the pain barrier. Competing on the water and below the water.

Multiple disadvantage  
Harris, Level +1

Presentation	Presenter	Content
Mainstream and targeted measures to reduce violence against women with disabilities, A069	Sue Salthouse, Director, RI Australia, Australia	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 is its Disability Inclusive Development strategy.
Structural selection processes during allocation into labour market measures of disabled people, A064	Angela Rauch, Senior Researcher, Institute for Employment Research, Germany	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.
Building the capacity of the Aboriginal and Torres Strait Islander people with disability, to enable them a good life, A192	Leila Rankine, Chairperson, First Peoples Disability Network (Australia), Australia	“Proper Way” of doing business: Aboriginal and Torres Strait Islander people with Disability and their carers, are the most disadvantaged group of people by any accounts in Australian society today. This has been for many historical reasons but largely due to the Westminster system being imposed on them, hence destroying their land and culture. We now have the opportunity to improve health and engagement outcomes with the introduction of the new National Disability Insurance Scheme. This scheme allows for people with disability to have a lifetime support package that will enable them to have choice and control in their life and improved engagement outcomes to have a good life.  We believe that with the right early intervention Aboriginal people with disability can have enhanced life expectancy ( currently the life expectancy rate for Australian's first Peoples is 17 years below the current mainstream population.) We can cut the rate of high incarceration rates in our justice systems by 1 in5, for those with a disability, which currently has the highest proportion of Australia's First Peoples of any developing country in the world, by identifying those with a disability early before they enter our justice systems and supporting their transition to service supports.  Our journey as First Peoples Disability Network (Australia) is to give a voice for those most disadvantaged in society today, being our First Peoples with disability. We have developed culturally appropriate resources that enable them to build their personal capacity to have a say in how they want to be supported but we also know that the social impacts of supporting appropriately one person in community, can have far reaching empowerment for that whole community.  Through our work as the only Aboriginal peak systemic advocacy network in Australia, we have been able not only to build individual capacity for those with a disability, but

ensured that government policies are inclusive and adaptive for Aboriginal people with disability, particularly for our communities in our rural and remote regions.

## Inclusion Lowther, Level -1

Presentation	Presenter	Content
Exploring the potential of Street Audits to make streets more inclusive, A125	David Hunter, Associate Research Fellow, Transport Research Institute, Edinburgh Napier University, Scotland	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 identify 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	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: <ul style="list-style-type: none"> <li>• the role of technology</li> <li>• mobility training and independent living skills</li> <li>• making the most of residual vision</li> <li>• support to develop confidence to communicate sight-specific needs and reasonable adjustments to employers</li> <li>• pre-employment training and support</li> <li>• effective peer support.</li> </ul> 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.
The impact of good social care support on independent living – a service user's perspective, A183	Omar Haq, Independent Living Officer, Lothian Centre for Inclusive Living, Scotland	I will outline the difference between the medical and social models of disability. I will then use my own lived experience to illustrate how support which follows the principles of the social model of disability has allowed me to live an independent life throughout my life to date. I will describe: <ul style="list-style-type: none"> <li>• Inclusion in mainstream secondary education</li> <li>• Support from personal assistants during higher education</li> <li>• The use of a social care self-directed support budget to employ personal assistants</li> </ul> I will explain the positive impact of all of the above, which has allowed me to gain a degree, volunteer, move into paid work and buy my own home.  I will then discuss the changes needed in society to make this the norm for all disabled people: <ul style="list-style-type: none"> <li>• Inclusion: the need to see disabled people as having the same aspirations and value to society as non-disabled people. The need to change the rhetoric about disabled people so that they are seen as ordinary members of society rather than heroes or scroungers.</li> <li>• Policy at local and national levels: the need to ensure that social care support is recognised as a human right, is properly invested in and seen as an integral part of life that everyone will engage with at some time in their life.</li> </ul> I will conclude my presentation by explaining how embedding the social model of disability in policy and practice at all levels would make these changes happen.
Findings from a scoping study in to effective allocations of adapted social housing, A184	Dianne Theakstone, Research Assistant and PhD Candidate, Horizon Housing, Scotland	Accessible housing forms one of the '12 pillars of independent living'. This presentation outlines findings from a scoping study into the effective allocations of adapted social housing in Scotland. The aim was to assess barriers to the effectiveness of matching wheelchair designed and adapted social housing lettings to households in need of such housing and to identify measures to overcome barriers in order to more efficiently match people and properties. The fieldwork was conducted by a self-identified disabled Research Assistant, a peer researcher and the project was overseen by a peer review panel comprising of disabled people or individuals with lived experiences of disablement. The study adopted a co-production approach between Horizon Housing and the University of Stirling. The presentation will also reflect upon this novel co-production methodology. The research methods involved a rapid systematic literature review, and a case study of the North Lanarkshire local authority area. The latter involved a comparative review of the local Housing Contribution Statement (local and national policy landscape), analysis of qualitative data from 12 organisational staff representatives (included 5 social housing providers) and 5 disabled social housing applicants, and feedback from a stakeholder forum. The scoping project report puts forward 15 recommendations. These aim to ensure that the perspectives and needs of disabled social housing applicants shape follow-on research in this area, improve allocation practices and policies, as well as highlighting the practical considerations and overall benefits of a co-production approach to enhance disabled peoples' access to

		independent living. One of the main findings was that disabled applicants reported that social housing providers, who aimed to house disabled people, exhibited a higher level of understanding of the independent living ethos, disability issues and held a person-centred approach towards allocations in comparison with social housing providers who focussed on housing the mainstream public.
How people and organisations can ensure inclusive communication for deafened and hard of hearing people, A177	Bertha A Walker, Nominated Representative, Scottish Council on Deafness, Scotland	<p>1. SCoD works to the social model of disability and supports a “spectrum” definition of deafness that has four key pillars: Deaf/Deaf BSL Users, Deafened, Deafblind and Hard of Hearing. People may self-define across the pillars including other definitions they are comfortable with and use a variety of language and communication supports. SCoD recognizes that people can experience the same clinical hearing loss and that functional impact can greatly differ.</p> <p>Topics</p> <p>2. Statistics of deafness, including deafened and hard of hearing people in the UK underlining it is one of the largest disabilities – and growing.</p> <p>3. Workshop in groups to simulate people being deafened or hard of hearing using ear defenders, a topic of conversation, and how they felt. (Use this only for second choice presentation).</p> <p>4. Consequences of deafness and how it affects us in various situations, e.g. in work, in social situations and as we get older. All this often leads to a lack of self-esteem and depression.</p> <p>5. Outlining the communication tactics to be used when speaking to a deaf person. They are all very simple to implement but so helpful to those of us with a hearing difficulty so that we are not excluded.</p> <p>6. Facts about lipreading and other tactics used.</p> <p>7. Benefits of lipreading classes with quotes from current students.</p> <p>8. Language (BSL/English) and communication aids such as loop systems, speech to text notetakers, personal equipment and their importance in inclusive communication.</p>

## Sport Menteith, Level -1

Presentation	Presenter	Content
Communicating Inclusion through Paralympic Sports, A123	Gregor Doepke, Director of Corporate Communications and Chief Press Officer, German Social Accident Insurance (DGUV), Germany	<p>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.</p> <p>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.</p> <p>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.</p>
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	<p>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.</p> <p>Also anthropometric data, extremity length, joint movement and personal interests and experiences in different sports were measured.</p> <p>The patients underwent the tests in their current treatment even if for example patients with prosthetics were still in treatment and not final equipped.</p> <p>The performance testing protocol focused on six different criteria:</p> <ul style="list-style-type: none"> <li>• Movement and Strength of the upper spine, neck and shoulder girdle</li> <li>• Movement and Strength of the upper extremities</li> <li>• Movement and stability of the core</li> <li>• Movement and Strength of the lower extremities</li> <li>• Endurance</li> <li>• Coordination</li> <li>• Cognitive capacity</li> </ul> <p>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.</p> <p>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).</p> <p>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.</p>
The importance of	Susan Riedel,	The VBG is the Accident Insurance Institution responsible for all professional sportsmen in Germany. For a top sportsman the slightest traumatic injury can have a major impact: the interference upsets perfected sequences of motion; muscle substance starts to decline after a few days without training. Against this background an immediately

sport in rehabilitation after traumatic injuries - the concept of the VBG, A082	Rehabilitation Strategy Specialist, German Social Accident Insurance VBG, Germany	starting and complex course of a whole-body treatment with elements of physiotherapy, remedial gymnastics, medical training therapy and fitness exercises from sport is essential in order to speed up the return to full strength, endurance and range of motion and to maintain the proper functioning of the uninjured parts of the body. It also focuses on correcting risk factors of sports injuries such as imbalances, muscle tightness or decreased proprioception, so that any weaknesses and imbalances which contributed to the injury are avoided. Thus, prevention is an important part of rehabilitation. These aspects, which are so obvious in professional sports, demand our attention with rehabilitation in general. That's why this complex course of treatment is also applied to all other insured persons who have to cope with temporary restrictions after traumatic injuries. But this concept is most important for accident victims with permanent physical impairments, who often suffer from restricted mobility, muscular atrophy and impeded coordination, because sport helps to improve strength, muscular and cardiovascular endurance, balance, coordination and posture, promotes social-emotional development and also facilitates self-help and participation into community life. The presentation describes how elements of sport are systematically provided as part of acute treatment and medical rehabilitation as well as part of social rehabilitation and which effects are expected in each phase. The presentation also shows how the VBG actively encourages and supports on a life-long basis accident victims especially with permanent disabilities to participate in mainstream and disability-specific sport for fostering sustainable well-being and inclusion.
Veterans' Rehabilitation - A Case Study, A190	Speaker name TBC, Royal British Legion Industries/Poppy Scotland, Scotland	Details TBC
Enabling children and young people with spinal cord injury to be fully included in education, A196	Kevin Hartie, Back Up Trust, England	<p>At Back Up we inspire people affected by spinal cord injury to get the most out of life. We are the only charity in the UK with dedicated services for children and young people affected by spinal cord injury. We want to share what we are doing around the world of education and inclusion and learn from others in the field, to grow knowledge and collaborations.</p> <p>Our presentation will explain how one of our leading services, the schools inclusion service, ensures that any child with a spinal cord injury is fully included in school life, just like their peers. Our approach is working with and supporting the child, the family and the school to understand everyone's needs, while keeping the child's voice and inclusion central. Our service is person centred and tailored to every individual need. We train dedicated school advocate volunteers to visit nurseries/schools/colleges across the UK to provide face to face support. All our school advocates have a spinal cord injury. So they draw on their own experiences to support the child's full inclusion at school. We know advocates gain a sense of self worth and confidence themselves by supporting others.</p> <p>Building on our own experience and research, we launched <a href="#">#ThisSchoolIncludes</a> campaign to promote better training and support about inclusion for teachers, so disabled students are fully included in UK schools. In collaboration with other disability and inclusion organisations we have designed a 'Skills for inclusion' module which we aim to deliver on teacher training courses. Trainee teachers will be given the opportunity to think and talk about real situations of how to include a child with any disability in their class, with a disabled person delivering the training they can share their own experience and encourage open discussions. It is based on key principles that underpin inclusion work with children with any disability, rather than condition specific information. We will be delivering it at one university in February and are in discussions with other providers across the UK.</p>

## Posters

Presentation	Presenter	Content
Accessibility Analysis of Android-based Smart Phones Targeted at People with Upper Limb Dysfunctions, A021	Kim Kyung Sik, Doctoral Student, Daegu University, South Korea	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 in 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.
Depression and maintenance of smoking cessation after myocardial infarction with focus on	Kathrine Hald, PhD student, Aarhus University & Central Region, Denmark	<p>Introduction</p> <p>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.</p> <p>Material and methods</p> <p>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 information concerning smoking status at 1-year follow-up. 98 patients were ultimately included.</p>

education, A053		<p>Results A quarter of the patients were screened positive for depression. There was no significant difference in the participation at the smoking cessation part of the rehabilitation for patients screened positive or negative for depression, whether the results were adjusted for gender and educational level or not. There was a significant association between a positive depression screening and failing to maintain a smoking cessation in men at 1-year follow-up. When adjusted for educational level a significant association was still seen.</p> <p>Conclusion There was a significant association between a positive depression screening and failing to maintain a smoking cessation in men at 1-year follow-up. The result was consistent after adjusting for educational level.</p>
Group Art Therapy, Cognitive Skills, Elderly with Dementia, Activities of Daily Living, A017	Hye Jung Park, Researcher, Daegu University, South Korea	<p>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 U 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 screening tool for the quantity analysis for the study, MMSE-K, the dementia diagnosis test, and the activities of daily living(ADL) test were carried out before, right after and two weeks after the application of the program. In this study, the Mann-Whitney U-test which is a non-parametric statistical analysis was conducted with SPSS 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.</p> <p>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.</p> <p>The result of the study as such 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.</p>
Group Art Therapy, Korean Painting Material, Depression, Activities of Daily Living, Elderly, Dementia, A018	Yeo-Jin Jueng, Researcher, Daegu University, South Korea	<p>This study was carried out to investigate the effect group art therapy program with Korean painting material on depression and activities of daily living for elderly with dementia. Subjects for the study were the elderly over the age of 65 diagnosed with dementia level 3 in the hospital using a welfare center for the elderly. A total of 14 elderly had confirmed the intention of participating in group art therapy program using Korean painting media, but two of them were excluded because of their level of dementia were too severe for conducting any cognitive activities or physical activities. CSDD (Cornell Scale for Depression in Dementia) was conducted to inquire changes in depression and BDAL (Bathel Activities of Daily Living) was conducted to inquire activities of daily living of the subjects. The results of the study are summarized as follows. First, group art therapy program using Korean painting material 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 program using Korean painting media brought positive changes in depression and activities of daily living of the elderly with dementia.</p>
Art-Lang Program, Communication Abilities, Cognitive Skill, Depression, Elderly with Dementia, A019	Joonsoo Kim, Researcher, Daegu University, South Korea	<p>This study was carried out to investigate the effect of Art-Lang program on communication abilities, cognitive skills and depression for the elderly with mild dementia apposite 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 'definitive dementia' among ones who are over the age of 65 and attending a senior welfare service center located in D city. The subjects were randomly assigned 15 with 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. A speech language pathologist cooperated for the professional application of the program. The study applied Holden Communication Rating Scale to inquire changes in communication abilities, MMSE-K to inquire cognitive skills, and SGDS (Short Version of the Geriatric Depression Scale) which is included in SNSB-II to inquire changes in depression. The results of the study are summarized as follows: First, Art-Lang Program had a positive effect on improving communication abilities of the elderly with dementia. Second, Art-Lang Program had a positive effect on improving cognitive skills 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 not only communication and cognitive skills, but also on emotional stability of the elderly of dementia.</p>
Research on Studying English for hearing impairment though development of smart application, A022	Dae-young Na, Masters Student, Daegu University, South Korea	<p>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 efficient than others in teaching English. Developing visual materials is important to provide better learning environment for the hearing-impaired regardless of time and place. Since the hearing-impaired students already learned the Korean pronunciation before learning English, the Korean phonetic notation for the English should be presented when teaching English. Thus, as an assistive English learning device, the smart learning for the hearing-impaired with smart phones that are easy to use and are portable is necessary to develop. In this study, the focus group that consists of the people with hearing impairment is made, and their English pronunciation patterns are analyzed. Based on the analysis the English vocalization characteristics pattern of the people with hearing impairment, the application for the correct pronunciation drill is designed.</p>
Our results exhibit the unique hand strength and endurance characteristics in individuals with Downs Syndrome, A111	Wang Hui-Yi, Professor, Department of Physical Therapy, Kaohsiung Medical University, Taiwan	<p>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 (DS group, 17.5 ± 4.0 years) and 62 age- and gender-matched peers (typical group, 17.8 ± 3.7 years). A computerized system 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-seconds 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 results 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 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</p>

		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.
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 a 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 extendedly 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 feed-back, thus making it possible to apply the content and level of ongoing support services in a flexible way. ③ Personal assistance services and workplace personal assistance 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 Labor Market Entry of Women with Disability, A026	So-Yun Oh, Doctoral Student, Daegu University, South Korea	The purpose of this study is to examine the affecting factors on labour 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 dependent variable, and demographical factors, disability and health-related factors, human resource factors and social factors were used as independent variables. The data were analyzed using statistical techniques such as logistic regression. The major findings of this study were as follows : First, factors such as age, marriage status, basic livelihood security benefit, family members with disability, nurturing status, degree of disability, chronic disease status, current health status, and help in daily living life of women with disability showed significant effect on labor market entry. Second, final education level and possession of license showed significant effect on labor market entry. Third, discrimination in job seeking and daily living life showed significant effect on labor market entry. Based on these results, it could be concluded that various educational approaches and employment support services which considered characteristics of women with disabilities is needed. Furthermore, it is necessary to establish the institutional support of country for improving hindrance factors of labor market entry such as duplex discrimination and nurturing responsibility of women with disability.
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 current age management 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 <a href="http://www.pina-projekt.de">http://www.pina-projekt.de</a> .
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 studying in college programs has increased significantly in Taiwan. 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 to 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,	Hanna Rinne, Researcher, Rehabilitation	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, variation in seafarers' mortality between different occupational groups is analyzed.

A119	Foundation, Finland	<p>We used longitudinal individual level register based data 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.</p> <p>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 tankers. Among females mortality was highest among galley crew (SMR 171).</p> <p>The highest SMRs were found in diseases of respiratory system (SMR 239) among men and lung cancer (SMR 346) among females. Lung cancer mortality was also high among male seafarers (SMR 148). The alcohol-related mortality was 1.6 times higher among male and even 2.7 times higher among female seafarers than among other employees.</p> <p>Despite improvements in occupational safety standards on board and health behavior campaigns seafaring is still a high risk occupation. Alcohol and smoking related early prevention is important.</p>
Study assesses the association between attaining secondary education and finding employment for rehabilitation allowance recipients, A122	Jaakko Harkko, Researcher, Rehabilitation Foundation, Finland	<p>Working Life Transitions after Young Peoples' Rehabilitation Allowance: a Finnish Register Linkage Study</p> <p>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.</p> <p>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.</p> <p>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 4.68 (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.</p> <p>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.</p>
Social construction of sexuality in women with and without physical disability in Israel, A088	Ilana Duvdevany, Prof. in the school of social work, School of Social Work, University of Haifa, Israel	<p>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 disability. The main assumption is that women with disabilities and without disabilities have the same experience .</p> <p>The present study examine the process of social construction of the sexuality of adult women with different physical and sensorial disability, acquired or developmental disability , through the relationship with self esteem, body image, sexual esteem, social barriers and attitudes towards sexuality and disability, women in particular. The study population is 160 women with and without disabilities, aged 18-45 from Israel. The study is a qualitative study, with seven different measurements of self-image, body image, and sexual first experiences, social barriers, attitudes towards sex, and demographics data.</p> <p>The results of the study will have an important contribution to professionals in the field of sex therapy and rehabilitation to understand some of the "puzzles" arising from the combination of sexuality, disability and gender.</p> <p>Theoretical and practical implication will be presented.</p>
Post-Acute Neurorehabilitation enables persons with acquired brain damage to participate in an inclusive society, A136	Karl Bald, PhD, Stephan Bamborschke, MD, PhD, FAAN and Sean Busenius, Psychologist, Head physician at the P.A.N. Center and PR-Manager, Donnersmarck Foundation (Fürst Donnersmarck-Stiftung), Germany	<p>Back to everyday life – Supporting people with acquired brain damage to relearn living their lives in an inclusive society by means of Post-Acute Neurorehabilitation</p> <p>In an inclusive society, every person can actively participate according to his or her needs and abilities. However, tasks of daily living require 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 colleague.</p> <p>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 an environment where the challenges of a daily routine set the benchmark.</p> <p>Our presentation will indicate how for persons with brain damage a wholistic rehabilitation is a prerequisite for staying active members of an inclusive society.</p> <p>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.</p> <p>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.</p>
How Do I? links step-by-step lifeskill learning guides to the environment using NFC, A139	Taryl Law, Co-founder, How Do I?, England	<p>How Do I? is a simple idea with revolutionary impact.</p> <p>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?</p> <p>Boldly 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.</p> <p>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</p>

		<p>in 2017, leading us to a formal launch in the US at their August 2017 conference.</p> <p>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.</p> <p>Our aim is not exclusively to produce an exceptional resource, but to change cultural views and expectations for vulnerable people.</p>
How much workload can an employee endure before well-being declines below a psychologically critical threshold?, A141	Sabrina Zeike, Research Associate, University of Cologne, Institute for Medical Sociology, Health Services Research, and Rehabilitation Science (IMVR), Germany	<p>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 high 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 &lt;13 indicates poor well-being and is an indication for testing for 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 (<math>r = -.229</math>; <math>p &lt; 0.01</math>). The following regression line was determined: <math>y = 22.3 - 0.19 \cdot x</math>. 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.</p>
Disaster preparedness research on people with disabilities in the world today, A142	Mercy Namuganza, Technical Manager, Swatt Security and Disabled Activist, Uganda	<p>awareness of rights for people with disabilities,  manufacturing of more accessories for people with disability  equal opportunities for people with disability among others</p>
Study on the positive impact of rearing children with disabilities on their mothers, A023	Choi Eunyeong, Professor, Daegu University, South Korea	<p>The purpose of this study is to investigate the awareness about positive impact of rearing children with disabilities on their mothers. Recently, the studies about positive impact of rearing children with disabilities became primary issues. In this context, we propose to investigate the positive impact on mothers using concept mapping methodology by participating mothers who rearing children with disabilities.</p> <p>Concept mapping is a structured study method composed of the organized stages of data collection, analysis, and interpretation. The method is designed to understand the thinking process of a distinct population, and to develop an interpretation method. In our study, concept mapping has been done in five stages: preparing the study, generating ideas, sorting/rating/developing maps, and interpreting results.</p> <p>First, for idea and sentence generation stage, we interviewed mothers (N=8) about their positive experience in raising children of disabilities. And we developed 52 core sentences on the positive factors based on the interview.</p> <p>Second, in sorting/rating/developing a concept map stage, we printed 52 core sentences in cards and let the mothers sort them in clusters of similarity. Then we conducted multidimensional scaling analysis and hierarchical cluster analysis on the obtained result, and determined concept mapping about positive impact perceived by the mothers.</p> <p>Lastly, in interpreting results stage, we deduced the positive impact of rearing children with disabilities on their mothers from concept map that we developed.</p> <p>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.</p> <p>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.</p>
A Comprehensive Support Programme for Older People with Intellectual Disabilities, their Parents and Carers A193	Daniel Wai-shing Lai, Service Development Officer, Caritas – Hong Kong, Hong Kong	<p>In the Hong Kong SAR, ageing of peoples with intellectual disabilities (PWIDs) had been the prime concern of rehabilitation practitioners, their carers and even policy makers during the past decade. The early signs of ageing that occurred among persons with Down Syndrome or those with multiple disabilities have also imposed great caring burden on their parents/ carers. The scenario of having 'Dual Ageing Families', i.e. having old aged parents/ family members taking up the caring responsibility of a person with intellectual disability in advanced age living in the community is not uncommon in the Hong Kong society. The increasing risk of older parents/ families in taking up the caring burden and the stress being shouldered by them should be properly addressed.</p> <p>Caritas Rehabilitation Service (The Service) under Caritas – Hong Kong, a Catholic social services organization providing a full spectrum of training and caring services for people with varying disabilities, has been well aware of the emerging needs of its older service users as well as their aged carers. Through the funding support of a local renowned Foundation in Hong Kong, the Service had piloted a special project named as 'Project 3Hs - Happy Healthy Hub for Carers of Persons with Intellectual Disabilities'. They included a series of workshops and groups as well as home-based support programmes for the 'Dual Ageing Families' with the aims to build up caring capacities, to improve the lifestyles of "PWIDs" and to prepare them better for more quality and healthy aging life. The pilot Project that had lasted throughout year 2014 to 2016 had been well received by our strategic partners including specialists, parents associations, special schools, non-governmental organizations, etc. The total numbers of beneficiaries who had attended the programmes under this Project had reached 1,040 persons with disabilities and their parents/carers.</p> <p>It is our intention to share with rehabilitation practitioners serving people with intellectual disabilities and their carers on our programme strategies and the different service modes being administered to suit the diversified needs of aged people with intellectual disabilities and their aged carers. They included structured educational and training programmes on health management, healthy diets, oral-motor and physical functioning of the frail elderly, fall management, drugs and pain management, physical maintainence and exercise activities. The social psychological aspect of ageing are also illustrated and shared including positive psychology, relaxation exercises, mindfulness exercises, music therapy, hypnotherapy, horticulture therapy, green living, dementia screening and caring, traditional Chinese medication and traditional</p>

		<p>Chinese exercises -Ba Duan Jin etc. As in the Hong Kong case, the parents and carers have major concerns on the guardianship issues. Hence, topics on guardianship and legal procedures to be involved such as the appointment of guardian, decision making in medical treatments, determination and choices on end-of-life care, the succession of care, etc were also explored with the carers and parents. The Project had been well received by different stakeholders in its intensity and extensiveness.</p> <p>A research study had been built-in the above pilot Project to evaluate its outcomes and impacts on the service participants. The poster presentation will try to demonstrate the qualitative study and the statistical findings on the stress encountered by older carers and parents in the caring process of their ageing families members with intellectual disabilities. With the application of the widely recognized assessments tools to find out the level of stress encountered by the parents/ carers, more evidence-based practice is advocated in rehabilitation service settings for better programme planning and enhanced service management.</p>
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## Speakers' Corner

Thursday 27 October, 9.00 am – 12.00 pm

Presentation	Presenter	Content
A partnership approach to developing 'arts in care' pack with feedback on outcomes of implementation, A070	Edith Macintosh, Rehabilitation Consultant, Care Inspectorate, Scotland	<p>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.</p> <p>In care homes for older people many care staff run arts activities. However, they are keen to understand about 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 Luminare (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.</p> <p>The pack is made up of:</p> <ol style="list-style-type: none"> <li>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.</li> <li>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.</li> <li>3. A card with guidance on working with artists - hints and tips</li> </ol> <p>The 'arts in care' resource will be issued to care homes for older people in Scotland in June 2016 and be available online.</p>
Transforming a Sheltered Workshop into a Community's Hub for Sustainable and Meaningful Income Generating Work, A092	Ching Chi-lam, Joshua, Senior Service Manager, Fu Hong Society, Hong Kong	<p>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.</p> <p>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 (KHVDC), 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.</p> <p>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. KHVDC is successfully transformed into a sustainable sheltered workshop alongside with the pulse of HK.</p>
Art Inclusion in Enhancing Self-image of Individuals with Intellectual Challenges and Promoting Social Inclusion, A094	Karen CHEUNG and Tammy CHIU, Project Officer and Service Manager, Fu Hong Society, Hong Kong	<p>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.</p> <p>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.</p> <p>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.</p>
Differed Child Marriage Towards Education Access	Sri Hartini Rachmad, Researcher, BPS	<p>This policy research paper purposes 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</p>

Rights of Boys-Girls with Disability, A104	Statistics, Indonesia	<p>parent.</p> <p>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 prevalence no longer a significantly decline. The declining (1993-2008) was nearly halved, from 53.21 per cent (1993) to 27.55 per cent (2008) and in periods 2008-2015 the decrease only about 4 per cent, from 27.55 per cent to 23.57 per cent. However, the girls with disability, particularly deaf and mute disabled girls tends to have higher risk to be victims of sexual abused in her neighbourhood (Women disability community monitoring-report during some years, HWDI 2012/ 2015).</p> <p>The progress and stagnation declining of child marriage prevalence is due to the changing role of government agencies dealing with marriage as the National Family Planning Coordinating Board (BKKBN), the small number of centre sexual reproductive health for counselling and advocating , the rare provision of centre communication-education and advocating for boys and girls as the non formal sources for information education. When there is access for centre counselling, the disability boys tend to do more than girls with disability, whilst at the teenager it happened in the opposite rate between boys and girls.</p> <p>The high prevalence of child marriage that been categorised into breaking the law of the rights of child education where child rights for schooling and having better future is deprived. Those all practical on child marriage mostly affected by knowledge level of reproductive health of parents, law, culture and education curricula in schooling where they do not access in the formal education started from young age.</p>
Sheltered work in Ireland: International and National responses, A002	Charlotte May-Simera, Doctoral Researcher, Centre for Disability Law and Policy, National University of Ireland, Galway, Ireland	<p>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.</p> <p>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.</p> <p>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.</p>
A Study on the Development of Service Quality Indicators for Sheltered Workshops, A027	Sejin Park, Post-doctoral Researcher, Daegu University, South Korea	<p>The purpose of this study is to develop service quality indicators and to identify priority of the indicators for sheltered workshop. In order to meet the this purposes, this study utilized Delphi survey and Analytical hierarchy process the (AHP) survey as expert decision-making methods.</p> <p>The results of this study can be outlined as follows;</p> <p>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.</p> <p>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 us 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.</p> <p>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.</p>
To make a decent living with a culture of goodwill & understanding for People with a Disability, A038	Gautam Chaudhury, CEO, A1 HR consultancy, India	<p>Need assessment for disabled Peoples skill based training</p> <p>Employment avenues</p> <p>Social Security</p> <p>Medical facilities</p>
Introduction to a brochure that promotes the transition between Vocational Rehabilitation specialists for Acquired Brain Injury, A062	Tamami Aida, Professor, Mejiro University, Japan	<p>Theme</p> <p>Introduction of a brochure that promotes Vocational Rehabilitation for Cognitive Disorders after acquired brain injury</p> <p>Purposes and background</p> <p>This brochure aimed to promote the transition between vocational rehabilitation (VR) specialists for clients with cognitive disorders (CDs) after acquired brain injury (ABI). In Japan, rehabilitation services and social supports in daily living activities and social activities for clients with CDs after ABI were started in 2011. The numbers of institutions which provide VR services and social supports are currently increasing. However, specialists have a low understanding about CDs and VR, and the cooperation between VR specialists does not go well. When reinstatement and reemployment does not go well, many clients persist in medical rehabilitation. Also VR services were not effectively used by clients with CDs.</p> <p>Methods</p> <p>Individual semi-structured interviews were administered for 12 professionals. Each of whom had over ten years of experience as professionals in VR for clients with CDs in public institutions in the Tokyo area. We printed an 8-page brochure in b5 size about the processes for clients and professionals which we found by a qualitative analysis.</p> <p>Results</p> <p>We found 6 processes for clients and 11 processes for professionals by a qualitative analysis. We prepared a brochure about CDs, what VR is, how to return to work and get a job, clients' strength, and effective VR processes for clients and professionals.</p> <p>Conclusions</p> <p>The brochure is unique because it explains dysfunctions and VR, is focused on clients' strengths, and doesn't focus on improving dysfunctions. Also, it was based on an</p>

		analysis of opinions of VR specialists of CDs. We will ask professionals at some hospitals in Tokyo, to use this brochure to explain VR to the client. Then we will check the effectiveness of the brochure in promoting the transition from medical rehabilitation to VR.
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. Mehnert, 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 screening a total of 195 records 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 $C\alpha = .82$ , the subscales have an internal consistency of $C\alpha = .73 - .86$ . 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 for occupational health and safety, stakeholders of employees as well as authorized persons for 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: <ul style="list-style-type: none"> <li>- Fully branded suite of WSUK Inclusive Competitions to take place.</li> <li>- All finals to take place at The Skills Show.</li> <li>- Competition fully aligned to the WSUK national cycle timelines.</li> <li>- Full use of CMS and ORS</li> <li>- Unique aligned brand identity</li> <li>- Full provision of information on the WSUK website</li> <li>- Consultative relationship with National Competition Organising Partners</li> <li>- Use of WSUK quality assurance practices and design guidance.</li> </ul> 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.
UK survey regarding experiences of accessibility and inclusion among blind and partially sighted people, A154	John Slade, Royal National Institute of Blind People (RNIB), England	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. 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.
Creating a more	Jana Felicitas	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 & Bauer, 2013) indicates that this is also true for university graduates with disabilities who – due to their high educational level – have

<p>inclusive university and scientific world – the PROMI project for doctoral students with disabilities, A157</p>	<p>Bauer, Teaching and research assistant, Chair of Labour and Vocational Rehabilitation, University of Cologne, Germany</p>	<p>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 by the social funding agencies. On the university level the project aims at establishing sustainable inclusive 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.</p>
<p>Managing transitions - Female Academics with Disabilities from University to Company (Mentoring Project), A158</p>	<p>Susanne Groth, Research Associate, University of Cologne, Germany</p>	<p><b>Purpose</b> 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).</p> <p><b>Methods</b> 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.</p> <p><b>Implications</b> 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.</p>
<p>Improving quality of life for children with disability in Pakistan, A013</p>	<p>Yvonne Frizzell, Therapy Clinical Lead and Service Developer, Akbar Kare Institute, Peshawar, Pakistan</p>	<p>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 'chariots' 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. Unattended 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.</p>
<p>Macau Local Experience: Paid Work for moderate or severe intellectual disabilities and Autism, A188</p>	<p>Chin Ieng U (Charlie), Manager, Fuhong Society of Macau Pou Choi Centre</p>	<p>Work is a fundamental human right that provides dignity, respect and a feeling of self-worth; but people with moderate or severe intellectual disabilities or Autism are often stigmatised as having a very limited contribution in work settings. Fuhong Society of Macau provides accommodated work settings, vocational training and job opportunities for people with intellectual disabilities and Autism.</p> <p>Fuhong Society of Macau would like to share their experience on methods they use to help people with moderate or severe intellectual disabilities or Autism to create and master paid work:</p> <ol style="list-style-type: none"> <li>1) to discover and develop every individual's unique talent to build self confidence;</li> <li>2) to work along with government policy of rehabilitation and tourism development to create paid work and job opportunities; where individuals can show off their talents to the public through different types of products and services, to achieve social integration and acceptance.</li> </ol>
<p>Fighting for the rights of education for children with special needs in Indonesia, A066</p>	<p>Atikah Bagawan, Consultant, YPAC Indonesia, Indonesia</p>	<p>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 has 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 to 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 need, their families, and the community when I was in high</p>

		school. That's what I wanted to be, and I knew that it was my purpose of living.
Developing special education for children in Indonesia, A067	Rovanita Rama, Consultant, YPAC Indonesia, Indonesia	<p>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.</p> <p>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 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.</p>
Rehabilitation needs and plans among patients with cancer, assessed at hospitals and when rehabilitation begins, A033	Charlotte Handberg, PhD, Postdoctoral Fellow, Defactum and Aarhus University, Denmark	<p><i>Background</i> National policies entitle Danish cancer patients to an assessment of rehabilitation needs at the hospital treatment and in the rehabilitation in the municipalities. Systematic assessment of rehabilitation needs seem prerequisite for sufficient rehabilitation, but little is known about patients needs. The aim of this study was to describe specific stated rehabilitation needs and plans among patients with cancer at hospitals when diagnosed and when rehabilitation starts out of hospitals.</p> <p><i>Methods &amp; Materials</i> Rehabilitation needs-assessment-forms from 188 cancer patients from two hospitals and two municipal cancer rehabilitation programs from April to December 2015 were analysed. The forms consisted of 1) <i>stated needs</i>: 58 fixed areas categorised in six domains and 2) an area to document the <i>rehabilitation plan</i>. All data were categorized within the International Classification of Functioning, Disability and Health (ICF) and descriptive statistics were used to describe them.</p> <p><i>Results</i> A total of 933 patients were submitted to the four departments during the study period and out of those 188 patients stated their needs and out of these 97(52%) completed a rehabilitation plan. The needs stated were primarily within the ICF component body functions and structure. Analyses are ongoing and further results will be presented at the conference.</p> <p><i>Conclusion</i> The results shows how the most stated needs especially were evolving fatigue, reduced muscle strength and being worried and how only 52% of the patients got a rehabilitation plan. The results underpin the need for a systematic procedure on assessment of needs in clinical practice as it is prerequisite for identifying needs, warranting a rehabilitation plan, ensuring a referral to rehabilitation and important for adjusting the present rehabilitation programming.</p>
Addressing assessment of rehabilitation needs in patients with cancer across health service sectors, A034	Charlotte Handberg, PhD, Postdoctoral Fellow, Defactum and Aarhus University, Denmark	<p><i>Title</i> "It's like pushing an elephant up the stairs": Addressing assessment of rehabilitation needs in patients with haematological cancers across health service sectors</p> <p><i>Purpose</i> To analyze and describe patients with haematological cancers and healthcare professionals' experiences and perspectives on the process of assessment of needs for cancer rehabilitation.</p> <p><i>Method and methodology</i> 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.</p> <p>The participants were 36 patients and 41 healthcare professionals.</p> <p>Data consisted of participant observations and semi-structured individual and focus group interviews.</p> <p><i>Findings</i> 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.</p> <p><i>Implications of findings</i> 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</p>