Commitments submitted at the Global Disability Summit 2022

“HI is committed to working alongside persons with disabilities since 1982”.

Capacity Strengthening of Organisations of Persons with Disabilities (OPDs)

1. HI commits to meaningful engagement and sustained partnerships with OPDs that span beyond projects in our countries of intervention, where OPDs are operating. Throughout livelihood and education initiatives, HI will guarantee inclusive program cycles and implement organizational and technical capacity building around advocacy and inclusive policies in line with international frameworks, such as the CRPD and SDGs in five countries of intervention by the end of 2026.

2. Recognizing the diversity of the disability community, HI will implement an intersectional approach through implementing its Disability, Gender and Age policy framework and ensure that further marginalized groups such as persons with psychosocial and intellectual disabilities receive equal opportunities and representation in all initiatives.

Inclusive education

3. Understanding the importance of reaching children and young people with all types of disabilities (including more severe and complex needs), HI commits to working with local education actors to build capacity of teachers with specific knowledge on the inclusion of learners with disabilities and develop mechanisms for making them available to assist educators throughout the system (e.g. itinerant teacher models, use of resource centres with trained staff etc). HI will ensure that teacher training and capacity building will include a focus on supporting children and young people with a range of diverse needs including intellectual disabilities, communication impairments and psychosocial disabilities. HI commits to developing specific guidance to support children and young people with intellectual disabilities and complex needs within the next 3 years, to developing research on the itinerant teacher/support mechanism model, and to developing these innovations in at least 5 new flagship projects over the next 4 years.
4. Via development, disability and education networks and platforms, of which HI is a member, HI commits to advocating for sustained and long-term (domestic and international) financing efforts for inclusive education systems with a clear intersectionality lens, and specific attention to the resources needed to adequately support children with disabilities (including children with more complex needs). The focus should be to strengthen inclusive education systems and increase targeted investments to address specific requirements of children and youth with disabilities (twin-track approach) by influencing at least 5 strategic planning and budgeting processes in the UK, USA, EU, Belgium and France foreseen in 2022 and 2023.

**Inclusive health**

5. In the effort of promoting disability inclusion in the health sector, and particularly the Sexual and Reproductive Health and Rights (SRHR) of persons with disabilities, HI has been actively implementing inclusive SRHR programs through partnership with SRHR global actors and organisations of persons with disabilities. HI commits to continue this work by designing and implementing at least 4 new inclusive SRHR projects over the next 4 years, through meaningful partnerships with organizations of person with disabilities, including women and youth with disabilities-led organizations, as well as SRHR global actors to support access to quality sexual and reproductive health information and services, including sexuality education, and through training and capacity building of health care and other relevant professionals. HI also commits to developing innovative guidelines on disability inclusion and SRHR to support the work of SRHR and disability actors in promoting the SRHR of persons with disabilities.

6. Via networks, platform, and key projects dedicated to disability inclusion, inclusive health as well as global health, HI commits to continue promoting the implementation of article 25 of the UNCRPD and the World Health Assembly Resolution on the “highest attainable standards of health for persons with disabilities” with specific attention to the meaningful participation of person with disabilities and representative organization, the collection and analysis of disability, gender and age disaggregated data, capacity building of health care professionals on inclusive health, inclusive health literacy, and inclusive prevention during health emergencies and access to vaccines and care. Through continued and renewed advocacy with key partners, HI commits to influence at least 4 policies, strategic planning and/or budgeting processes in in the USA, Canada, UK and EU in the next 4 years.

**Assistive technology and Rehabilitation (update 2018)**

7. By 2024, at least 70% of HI rehabilitation projects will include a component of facilitating access to assistive devices. The modalities will be different according to the context of intervention for a better service to the users and a response adapted to the needs of the persons with disabilities.
HI commitments at the Global Disability Summit 2022

- In a crisis context, the priority will be to ensure the provision of adequate assistive devices, while associating the provision of necessary services to ensure optimal quality provision (namely the 8 steps to ensure quality provision of technical aids developed by the WHO for the provision of mobility aids).

- In a context of chronic crisis or development, the priority will be to reinforce in a sustainable way the offer of services or the mechanisms of financial access to services and to assistive devices using a user-centered approach. HI bases its approach on the 5P model developed by the WHO (“People, Products, Personnel, Provision, Policy”).

8. In order to reach people in precarious and difficult contexts (geographical isolation, survivors of conflicts, ...), HI commits to pursuing the promotion of tele-rehabilitation and digital transformation of the care pathway for people with physical rehabilitation and assistive devices’ needs, especially orthopedic devices.

HI will continue to conduct action research, studies and pilot projects to improve access to rehabilitation services through an innovative service delivery model that combines the existing tools with the use of digital technologies and also 3D printing. By 2025, at least 10 HI intervention countries will have invested in the digital rehabilitation - 3D transformation. And, by 2025, at least 10 Rehabilitation Centers (ortho-prosthetists) supported by HI are trained in 3D management.

Inclusive Humanitarian Assistance

9. HI will continue being committed to the promotion, advocacy, capacity development and operationalization of the IASC guidelines on the inclusion of persons with disabilities in humanitarian action, including the empowerment of persons with disabilities and their representative organizations.

10. HI is committed to empowerment activities to strengthen those affected to meaningfully participate in the humanitarian response. By the end of 2025, HI will develop, pilot and share 2 sets of tools for field practitioners and 3 lessons learnt from case studies to strengthen quality disability data in link with inclusive humanitarian programming and accountability.

Disaster Risk Reduction and Climate Change Action

11. HI commits to the meaningful participation of persons with disabilities and their representative organizations across all disaster risk reduction and climate change initiatives, including training OPDs on disaster preparedness. HI acknowledges the urgency of climate change and the substantial impact it is already having on everyday life and migrations, raising the issue of mainstreaming inclusive climate and inclusion across Civil Society Organizations and advocacy work, building meaningful partnerships between mainstream Civil Society Organizations and OPDs. By the end
of 2024, HI will support via its projects 20 national OPDs in relation with increased risks of disasters and migration.

**Gender (as crosscutting issue)**

12. By the end of 2023, HI commits to implementing its Disability Gender & Age (DGA) policy within all its projects to address these critical factors of exclusion for populations affected by sudden onset or long-term crisis or poverty, as part of a broader intersectional factors to consider within all of HI’s programming. Through its specific DGA maker, HI will monitor the progress and quality.