



Training of service providers staff based on the United Nations Convention on the Rights of Persons with Disabilities principles



Exploratory study on training of service providers staff based on the United Nations Convention on the Rights of Persons with Disabilities principles



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Executive summary

The United Nations Convention on the Rights of Persons with Disabilities (hereafter named CRPD or the Convention) changed attitudes and approaches to persons with disabilities, reaffirming that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms, including making decisions for their lives based on their free and informed consent as well as being active members of society.

However there remains a major gap between the standards set by CRPD and the reality on the ground. Despite the existence of the Convention, persons with disabilities still face considerable barriers in access to healthcare, education, employment, recreation activities, as well as in participation in political life. There is a need to move from policy to implementation. Principles enshrined in the Convention must be made real in the “small places” where people live their lives.

Support services such as those represented by European Association of Service providers for Persons with Disability (EASPD) must engage actively in this profound systematic shift that addresses major challenges such as operationalizing a person-centred, and human rights-based approach, developing services within inclusive contexts and based in the community, promoting autonomy, auto-determination, empowerment, participation, rethinking the place and participation of persons with disabilities

Training professionals is a precondition for promoting implementation of CRPD. Article 4 of the Convention underlines the importance of training of staff working with persons with disabilities in relation to the rights outlined in the Convention, to provide better support and services.

Education and training systems are complex, and diverse across Europe, they involve lots of stakeholders. After entering the sector, workforce training is essential for equipping staff with the adequate skills and for developing, enhancing, and valuing the professional experience of the workers. Service providers use training to skill and upskill their workforce.

This report has identified a number of key actions that can be undertaken by service providers for leveraging training enforcement to move forward CRPD implementation. These actions, categorized in 4 areas, encompass:

- identify and use existing resources on CRPD
- design and produce training materials in line with CRPD
- deliver training that meets CRPD requirements
- engage partnerships with training providers and persons with disabilities organisations to promote the design and delivery of CRPD compliant accredited initial and vocational training.

The report showcases diverse and innovative examples of training that could inspire the others and encourage EASPD members to implement training to meet CRPD requirements. The initiatives often emerge from a European project. They can target different audience, mainly their own staff or staff of common services to deal with the mainstreaming goal of the Convention. These initiatives may cut across different types of content such as awareness raising on the whole convention or innovative approaches on specific topics (for example access



to justice and support decision making in the case of intellectual disabilities), or coordination and partnerships with larger communities. Interestingly some projects integrated their training within the conventional academic training system and are accredited. In accordance with CRPD some of the initiatives work in partnerships with persons with disabilities organisations or persons with disabilities to co-produce or deliver their training.

Also the study demonstrates the unique potential of service providers in promoting training that fulfil the CRPD requirements by bridging principles and practice and by filling the implementation gap. Thanks to their considerable expertise service providers are prone to deal with the main barrier to implementation: translating principles into practices. They innovate from the ground and propose practical action and guidance to align practices with CRPD principles.

There is a need to render the initiatives more visible. Structuring and organizing sharing of existing initiatives should help to scale up the initiatives, maximize their impact and contribute to the wide implementation of the Convention. EASPD could play a role in this structuration via its e-learning Knowledge Hub.

These considerations have to be embedded in the larger context of education and training in the disability sector. Education and training systems are highly complex and diverse across Europe, they involve lots of stakeholders. A wide comprehensive and systematic approach for developing, delivering, quality-assuring, certifying, and funding training is required and should take into consideration a number of constraints including lack of human and financial resources and organisational capacity. Service providers should advocate within the different European strategies and instruments launched recently or to be launched soon on this topic for the development of a framework dedicated to the understanding and tracking of training processes within service providers and to the measure of the impact of this powerful and unique training in terms of filling the implementation gap of the Convention.



Foreword

Context

EASPD is the European Association of Service providers for Persons with Disabilities. It is a European not-for-profit organisation and it represents over 17,000 social service provider organisations across both Europe and disability. EASPD delivers the implementation of the United Nations Convention on the Rights of Persons with Disabilities (which will be referred hereafter as either “CRPD” or “the Convention”) supporting its members in the design, development and set up of individualized models of support, responsive to specific needs and wishes. EASPD promotes the sharing and development of information, innovation and works to influence decision making mechanisms at European and international level. The main objective of EASPD is to promote equal opportunities for persons with disabilities through effective and high-quality service systems.

This present study was commissioned by EASPD in July 2021, as part of its “Commit!” Work Programme 2021 in the framework of EASPD’s Lighthouse Network activity led by the Workforce Development & HR Member Forum and the Policy Impact Group. It was subcontracted to Eléonore Ségard: PhD in Life science, consultant and research associate at INSHEA, a French research and training institution dedicated to persons with disabilities and special educational needs.

The Convention changed attitudes and approaches to persons with disabilities, reaffirming that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms, including making decisions for their lives based on their free and informed consent as well as being active members of society. Support services such as those represented by EASPD must engage actively in this shift.

Article 4 of the Convention underlines the importance of training of staff working with persons with disabilities in relation to the rights outlined in the Convention, to provide better assistance and services.

Social services providers across Europe are becoming increasingly aware of the Convention, however, little is known about the concrete training sessions of their staff and the concrete implementation of principles on the ground.

Aim

The study would like to answer the following question: What can service providers do in terms of training, inside their scope of action, to improve implementation of CRPD principles in services?

Especially the aim of the study is to provide insight into the integration of the CRPD principles in training of social care and support staff. Its specific objectives are delimitating the scope of the topic, determining the principal issues at stake, identifying available resources useful for service providers, collecting and analyzing practical examples of actors engaging into this dynamic, and drawing recommendations on possible strategies and actions service providers can undertake.



Methodology

The topic has been explored, understood, and analyzed through three primary sources : an Internet search, an exploratory scientific or grey literature review, and stakeholders interviews.

Moreover, EASPD is convinced that some organisations produce very suitable responses from which there is a lot to learn and that may inform other actors. Thus, the study also relies on the collection and analysis of local training initiatives.

The local initiatives presented in the study were identified through a call sent by EASPD to its members asking for initiatives of staff training on the principles of the CRPD and on their concrete implementation on the ground. This collection was also completed by an internet search and through recommendations of stakeholders.

The list of resources and examples presented in the report is by no means exhaustive.

Targeted audience and perspective of the study

The study will give the opportunity to the EASPD thematic forum Workforce Development and Human Resources to improve understanding of implementation of CRPD principles in the staff training with a view to informing debate and discussion on critical issues.

It is stressed that given the limitation of the time allocated to the study, the present proposal should be seen as a preliminary study. It will help to connect EASPD members to initiate discussions, sharing and exchanges in order to:

- stimulate and inspire some members to implement CRPD in staff training. The diversity of initiatives is valuable in the sense that it convincingly demonstrates that making a step forward is possible.
 - build new and relevant knowledge. Sharing experiences in an organized way is expected to facilitate exchanges and feedback on what works/doesn't work, strengthen collaboration and peer learning amongst members.
 - Based on the initial picture of the issues emerging on the topic built from this study, the group may decide to underpin future studies or research. It could eventually help to advocate for new staff training modalities.
- Engaging service providers through such a thematic community, within a process-based oriented approach (versus fixed-goal-oriented), is a compelling strategy to drive change.

Service providers have a major role to play in addressing the implementation gap of the Convention

A Brief overview of the Convention

The United Nations Convention on the Rights of Persons with Disabilities (which will be named hereafter either "CRPD" or "the Convention") is the first binding international human rights instrument to specifically address



disability. Its aim is to "promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity".

Existing human rights conventions already had a considerable potential to promote and protect the rights of persons with disabilities but, unfortunately, did not have the expected impact. The CRPD does not create new rights but sets out the legal obligations on states to promote and protect the rights of persons with disabilities. It reaffirms that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms, including making decisions. There are eight guiding principles of the CRPD: 1) Respect for inherent dignity, individual autonomy, and independence of persons; 2) Non-discrimination; 3) Full and effective participation and inclusion in society; 4) Respect for differences and acceptance of persons with disabilities as part of human diversity and humanity; 5) Equality of opportunity; 6) Accessibility; 7) Equality between men and women; 8) Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

The treaty was drafted in 2006 and opened for signatures in March 2007. For the European Union, the Convention entered into force on 22 January 2011. All European Union member states have signed and ratified the convention. 22 European Union countries have also signed and ratified its optional protocol in January 2019.

The Convention: a horizon

The Convention stimulates a paradigm shift in attitudes and approaches, such that these persons "from objects of charity, medical treatment and social protection" (the so-called medical model) and finally are "subjects with rights, capable of claiming those rights and making decisions for their lives based on their free and informed consent as well as being active members of society" (the so-called social model) (Kayess & French, 2008).

Persons are not seen any more as rational subject but more as subject with desires and aspirations.

The treaty is drenched in hopefulness. The President of the European Disability Forum, speaking for the International Disability Caucus, used the metaphor of light emerging from darkness at the CRPD's signature opening ceremony, quoting Bertolt Brecht (Kayess & French, 2008): "Some there are who live in darkness While the others live in light We see those who live in daylight. Those in the darkness out of sight. This is a convention to bring those in darkness into light".

The Convention paves the way for a new horizon which may seem quite impossible to reach nowadays. But having this perspective is of utmost importance as it marks the place we are not yet but we want to be. It helps to go forward and to galvanize collective efforts to advance the rights of persons with disabilities across the world.



The implementation gap

Gap between principles and reality

It is apparent that there remains a major gap between the standards set by the CRPD and the reality on the ground.

Despite the existence of the Convention, persons with disabilities still face considerable barriers in access to healthcare, education, employment, recreation activities, as well as in participation in political life. They have a higher risk of poverty or social exclusion (28.4%) compared to persons without disabilities (18.4%). Over half of persons with disabilities say they personally felt discriminated against in 2019 (European Commission, 2021).

There is a stark disconnect between the vision laid forth in the CRPD and the reality experienced by the majority of persons with disabilities in the world. It is time to scale up European action.

Need for implementation

It is acknowledged that legal rights do not alone create movement or progress (International Council on Human Rights Policy, 2006). The convention is not self-executing and will not automatically diffuse at ground level where the day-to-day interaction of people takes place.

If the implementation of human rights is to be effective, such rights need to be proposed, accepted, implemented, and then monitored and evaluated closely and with due rigour.

Quinn calls for a domestic institutional architecture for change involving implementation, monitoring and consultation. Animating this matrix will provide crucial to ensuring that the Convention can come alive and meaningfully shape law reform agenda for years to come (Quinn, 2008).

At the European level, the Strategy for the Rights of Persons with Disabilities has been renewed for the period 2021-2030 and covers all areas of the Convention to support both member states and European institutions in their endeavour to implement the Convention (European Commission, 2021).

Bringing law and policies in accordance with the Convention

Wide-ranging and systematic processes of legislative changes are taking place across the European Union to bring law and policies in accordance with the CRPD (FRA, 2015).

As an illustration, DOTCOM, an online tool from the European Commission, gathers and describes national key policy instruments in Europe (more than 1500 records) relevant to implementation of the Convention (*DOTCOM*, s. d.).

Translating policy into practices

Lang and al. identify a risk contingent with the international scale to the Convention (Lang et al., 2011). They argue that international human rights treaties, backed up by international law, place demands for state compliance with international standards, rather than providing robust mechanisms by which individuals can hold their respective governments to account. Over-emphasis upon receiving rights in terms of legal frameworks



(rights-in-theory) may result in less attention to actual implementation (rights-in-practice). There is a need to move from policy to implementation, to bring about local solutions so that the Convention can come alive where it matters the most.

In conclusion, the Convention stipulates that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms, including making decisions for their lives based on their free and informed consent as well as being active members of society. However there remains a major gap between the standards set by CRPD and the reality on the ground. There is a need to move from policy to implementation. Principles enshrined in the Convention must be made real in the “small places” where people live their lives.

Changes are required in support services to embrace and implement the Convention

Persons with disability frequently need support in their everyday life and across the spectrum of life. This professional support¹ is provided by social services, such as institutions, services, and home services dedicated to persons with disabilities.

The Convention marks a huge paradigm shift from the way that services have historically worked and from the way support services are conceptualized and delivered. The Convention advocates for major changes in the provision of services. It is critical that services widen their focus beyond the biomedical model to also include a more holistic approach that considers all aspects of a person’s life. This profound systematic change addresses major challenges such as operationalizing a person-centred, and human rights-based approach, developing services within inclusive contexts and based in the community, promoting autonomy, auto-determination, empowerment, participation, rethinking the place and participation of persons with disabilities (EASPD, 2018). The implications of this transformation are only slowly being addressed. No country has completed this transition. To achieve this is no small undertaking. A recent research commissioned by the Commission for the Rights for Persons with Disability in Malta shows that services in the disability sector have made great improvement in recent years. Nevertheless, the barriers to service delivery still persist and there is a lot more to be done so that the needs of persons with disability are adequately met (University of Malta, 2021). Moreover positive steps may be unstable and depend on context. There is evidence that the Covid-19 sanitary crisis has weakened some progress made by service providers towards CRPD and leads to a reduction of human rights enjoyment (EASPD, 2020). The emphasis on “protecting persons with disabilities” is in fact leading to less choice and control over their lives.

In conclusion, service providers face more than ever demands for conceptual and organisational changes in their routines. They have a crucial role to play in implementing the Convention as they find themselves operating in support of persons with disabilities. They need to focus on building capabilities to deal with this shift to propose high quality services in line with the Convention.

¹ Informal support is not in the scope of this study.



Training: A crucial response for the service providers to fill the implementation gap

Training: a precondition to the expected changes towards CRPD fulfilment

The social care and support workers are at the heart of the daily support of persons with disabilities and are the single most important facet of disability service provision. The above-mentioned expected changes to fulfill CRPD requirements will require significant shifts in the knowledge, competencies, attitudes of the social services workforce from all levels of management.

Training professionals is considered one of the key principles for promoting implementation of CRPD. The Convention underlines the need for training for staff in different services. **Article 4 stipulates that states parties undertake “To promote the training of professionals and staff working with persons with disabilities in the rights recognized in the present Convention so as to better provide the assistance and services guaranteed by those rights.”** Implementation of CRPD relies on the sector to recruit, retain, and train the growing pool of workers with the required skills.

Training systems: a complex and highly diverse picture

Preparing professionals with the knowledge and practical skills required is a complex endeavour that relies on education and training systems that encompass initial training and continuing professional training. The systems are organized very differently in European countries.

Training is a shared responsibility among different stakeholders. Missions and responsibilities of actors vary to a large extent by country and by training provision. Higher education institutions, and public/private dedicated educational institutions are usually providing initial and vocational training. In the conventional and accredited system, education and training qualify students.

Service providers in skilling and upskilling the actual workforce

Service providers play also a key role in training. After entering the sector, workforce training is essential for equipping staff with the adequate skills and developing, enhancing and valuing the professional experience of the workers. Continuing professional development is a necessity for providing quality care. It is often used by employers to help address skills shortages in the workforce. A recent survey shows that almost a quarter of the workforce feels that they need further training to cope well with their duties (Social Employers, 2021).

Service providers offer opportunities by proposing training in the formal scope of continuing professional development or on an informal way. Provisions of training by employers vary by countries as shown in the survey conducted by Social Employers (Social Employers, 2021). Employers are not required to organize a minimum number of training actions or to finance a minimum number of training hours per year but in some countries, employees legally enjoy an individual right to several days of training per year. Employees in the social sector are



more often involved in training paid by the employers than employees in the whole economy. Employers are generally not required to contribute to the financing of vocational training by devoting a certain proportion of the pay-roll. When employer arranges training designed to meet their legal requirements, it can be part of a certificated learning embedded in a conventional recognized program or not.

A common orientation is that the link between dedicated institutions delivering education and training and service providers is crucial particularly regarding the need to align education and training with changes in practice.

A difficult and evolving landscape

The challenge of training professionals to fulfill the goals of CRPD is embedded in a difficult context since the sector is affected by major workforce issues concerning funding restrictions, significant shortages in particular for qualified staff, recruitment, workloads, hard working conditions, retention, ...(Social Employers, 2021).

The Covid -19 pandemic exacerbates these issues. Additional problems such as increased absenteeism, sick leave, mental health issues and staff departures re-enforce the existing shortages (EASPD, 2020).

Moreover the sector is undertaking deep transformation in particular to promote non structured long life learning and qualification. For example European micro-credential approaches have been developed. This system is a proof of the learning outcomes that a learner has acquired following a short, transparently-assessed learning experience awarded upon the completion of short stand-alone courses (or modules) done on-site or online. This is a highly flexible, inclusive form of learning allowing the targeted acquisition of skills and competences. This approach may contribute to better bridge the conventional academic system with the non-conventional one.

In conclusion, achieving the full positive potential of the CRPD, and ensuring that persons with disabilities receive the high-quality individualized services that the Convention was intended to provide, require a thorough commitment to training of the workforce delivered by service providers.

Key training actions service providers can undertake to improve implementation of the Convention

What can a service provider do in terms of training, inside its scope of action, to improve implementation of CRPD?

The following section will investigate key actions service providers can undertake:

1. in the context of life-long learning by:
 - being aware and using existing resources on the Convention
 - designing trainings in line with the Convention and adapted to their everyday work
 - training their workforce



2. in the context of the academic conventional training system by contributing to the initial and professional development training through partnerships with institutions dedicated to trainings.

Identify and use existing resources on CRPD

The first question to address is about the available resources on the CRPD that service providers could use to gain knowledge on the Convention, understand the core principles and integrate it into training. A lot of stakeholders were implicated through the long process of negotiation of the Convention, and still take part in implementation and monitoring of the Convention through focal points, coordination mechanisms, monitoring mechanisms from the member states and the European Union: civil society and notably persons with disabilities organisations, relevant European and international bodies, states.

It is acknowledged that having rights-based legislation and international treaties will achieve very little, unless these are closely aligned with strong advocacy initiatives, (Lang et al., 2011). Accordingly stakeholders continue to promote the rights articulated in the CRPD by providing information, carrying out surveys and advocacy activities. Some organisations have built alliances or collaborative projects addressing the implementation of the Convention. Many have consequently developed Convention guides and toolkits.

Figure 1 depicts the 3 steps in making the Convention alive. Specific pedagogical material developed by stakeholders can be categorized within those 3 steps.

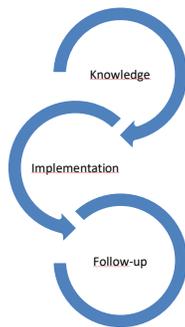


Figure 1

1. Knowledge : This first step consists in being aware of and understanding the Convention. The pedagogical material available is about mentioning the existence of the Convention and explaining the underlying principles to raise awareness among large communities: policy makers, persons with disabilities, health professionals....
2. Implementation: The second step consists in implementing the Convention. The material goes further and deeper into how to implement the Convention. It may be addressed to specific public. It also may concern a specific topic/article of the Convention. For example, the Convention raises many specific challenges in the particular case of persons with intellectual disabilities. Articles 12 and 13 include the right of persons with disabilities to enjoy full legal capacity in society and access to justice system on an equal basis with others. Specific material has been developed to ensure compliance with those statements.
3. Monitoring: The third step consists in monitoring and assessing the implementation of the Convention and specific tools have been developed.

Here are but a few examples of available resources.

Step 1. Knowledge

- The Office of the High Commissioner for Human Rights has developed a training package on the Convention and its optional protocol (*Training material on the Convention and its Optional Protocol*, s. d.). The package consists of a training guide and eight training modules. They are a resource for anyone involved in strengthening the rights of persons with disabilities and can be used to develop training courses on the Convention. They also serve as helpful resources to better understand the instruments and how they can be used to promote and protect the rights of persons with disabilities.
- Handicap International developed a Handbook on the Human Rights of Persons with Disabilities (Schulze, 2010). This manual is a useful tool for explaining the content of the Convention. It provides comprehensive information about the negotiation and drafting process, a detailed overview of the CRPD presenting information about each article, and the positions taken by the different stakeholders involved. It highlights the key documents adopted by United Nations bodies following the adoption of the Convention and the importance of the obligation to involve persons with disabilities organisations.
- Lots of national coordinating or monitoring mechanisms have developed material on the Convention in the language of the country.
- Many organisations representing persons with disabilities, or alliances of such organisations, have information related to the background of the Convention as well as related to capacity-building of those organisations.
 - The European Disability Forum (EDF) is the European umbrella organisation for European disability organisations and national persons with disabilities organisations (*European Disability Forum*, s. d.).
 - The International Disability Alliance (IDA) is the network of international persons with disabilities organisations promoting the effective implementation of the Convention (*International Disability Alliance*, s. d.).
 - The International Disability and Development Consortium (IDDC) is a grouping of civil society organisations coming together around a common objective: promoting inclusive international development and humanitarian action with a special focus on the full and effective enjoyment of human rights by all persons with disabilities (*International Disability and Development Consortium*, s. d.).

IDCC and IDA developed together a training programme called “bridge CRPD-SDGs” that aims to support organisations of persons with disabilities to develop an inclusive (all persons with disabilities) and comprehensive (all human rights) CRPD perspective on development (*Bridge CRPD-SDGs Training Initiative*, s. d.).

The platform ParticipaTIC proposes 4 training modules whose aim is to develop accessible on-line training materials to strengthen competencies of persons with disabilities organisation as a porte-parole to defend the rights of members of persons with disabilities organisation (*ParticipaTIC*, s. d.). The material was realized through a participatory process which included the target groups (disabled persons and persons with disabilities organisation leaders).

Step 2. Implementation

- The World Health Organisation is highly implicated in issues related to disability inclusion fulfilling the Convention in the health sector in many ways. Two tools are mentioned here:



- the World Report on Disability (WHO, 2011). It has been jointly produced by the World Health Organisation and the World Bank Group to provide the evidence for innovative policies and programs that can improve the lives of persons with disabilities, and facilitate implementation of the Convention.
 - QualityRights Initiative: World Health Organisation has developed a comprehensive package of training and guidance materials (14 modules) dedicated to mental health (*WHO QualityRights*, s. d.). The materials can be used to build capacity among mental health practitioners, persons with psychosocial, intellectual and cognitive disabilities, persons using mental health services, families, care partners and other supporters, nongovernmental organisations, organisations of persons with disabilities and others on how to implement a human rights and recovery approach in the area of mental health in line with the Convention.
- Making it Work is a collaborative initiative managed by Humanity & Inclusion (*Making it Work*, s. d.). Through a participatory and empowering approach, it builds concrete hands-on evidence on inclusive practices, which can be used to advance the rights of persons with disabilities in line with the CRPD principles.
 - The Zero Project was initiated by the Essl Foundation in 2008, with its mission centered around the implementation of the Convention and its commitment to a world with zero barriers (*Zero Project*, s. d.). The approach of the Zero Project is research-driven and aims to identify, curate, and share innovative practices and policies as intended and encouraged by Article 32 of the Convention.

Step 3. Monitoring

- Monitoring the CRPD: Guidance for Human Rights Monitors (OHCHR, 2010). This publication was developed by the United Nations Office of the High Commissioner. Human rights monitoring can play a key role in supporting states to effectively implement the Convention at national level and in empowering persons with disabilities. It proposes a methodology for monitoring the rights of persons with disabilities and provides useful advice on issues to consider when working with persons with disabilities.
- The SDG-CRPD resource package developed by the UN Human Rights Office of the High Commissioner proposes human rights indicators for the Convention (*SDG-CRPD Resource Package*, s. d.). They serve to give guidance on actions and measures to be taken in implementing the CRPD and facilitating assessment of progress.
- Zero project developed social indicators that measure the implementation of the CRPD and the current situation in all countries of the world (*Zero Project*, s. d.).
- The gold indicators (Gaare Larsen, 2015), developed by the Danish Institute for Human Rights are a set of 10 statistical outcome indicators that compares the situation for persons with and without disabilities in relation to 10 thematic areas of the Convention. The main purpose of the indicators is to generate change, stimulate action in inspiring concrete policy-making.



In conclusion, the resources developed by stakeholders implied in the Convention are rich and constitute a primary source of information for service providers. However this material is dispersed and not well listed. One could wonder to what extent this material is known and used by service providers. A classification in terms of the public targeted, the content, and the type of material could help to use it.

Moreover some of those materials may have some limitation and probably do not entirely respond to the needs of service providers. Indeed most of those materials are not specifically dedicated to training, nor adapted to service providers nor to a specific country.

For example, taking into account recommendations that member state received from the monitoring mechanisms, to compare to the current strategy and include some new focus area seems crucial. More adapted practical material may be required for service providers.

Design and produce training materials in line with CRPD

Service providers have a key role in developing training material, as they have strong expertise in support. The study draws on examples identified amongst EASPD members and completed by an internet search and recommendations from stakeholders interviews. 11 initiatives/projects in the scope of the study have been collected.

Even if the picture that emerged is incomplete, the study elaborates from those examples on some characteristics, common orientations and challenges in designing training. The section below presents the results of the analysis and specifically refers to the initiative when this is appropriate to illustrate a point. When available the link to the internet site of the initiative is given.

Funding opportunities

Developing a training requires funds. In most of the cases, trainings were developed under projects funded by the European Commission. Since the ambition of the European Commission is that funded projects benefit to the largest number, dissemination, communication, training activities are fostered. This promotes the development of training materials to share.

I-DECIDE is a European project funded under the Erasmus + framework that offers an innovative approach to the way in which professionals working in services aimed at persons with disabilities offer support to this group so that they can make their own decisions. I-DECIDE starts from the premise that supported decision making can help all people to exercise as much control as possible over their lives regardless of the legal framework or legal context and the restrictions these may place on individuals. Supported decision making is a general principle or approach that can be applied at different levels or spheres of a person's life, from high-level decisions such as getting married, having a child or living independently, to lower-level decisions such as choosing what to spend their money on or whether to change their doctor. The project developed training material.



TOPHOUSE (Towards Person Centred Housing Services in Europe) is a European funded project that aims to define, refine and formally establish the competences of professionals in the processes of assessment, housing and support/care provision in compliance with the Convention. Effectively assessing someone's need for housing and support, allocating appropriate housing and ensuring appropriate support from a range of agencies has never been more difficult. TOPHOUSE provides updated, dedicated staff training to do this job better, along with the means to promote improved inter-agency working to deliver related non-housing support on a person-centred basis.

The AJuPID project (Access to Justice for Persons with Intellectual Disabilities) examines how legal capacity and access to justice is guaranteed for persons with intellectual disabilities in the European context and promotes good practices of supported decision-making. The project developed training material.

The CISCOS project (Connecting inclusive social planning, community development and service provision for persons with disabilities) addresses challenges for innovation faced by relevant actors of the disability service provision sector (*CISCOS – Connecting Inclusive Social Planning, Community Development and Service Provision for Persons with Disabilities, s. d.*). Uncertainty on implementation strategies of the Convention under conditions of economic restrictions is rising in local governments, but even more in disability service providers. Both fields now face changing social environments strongly requiring new forms of inter-sectoral local cooperation, inclusive conceptual answers for service provision and corresponding organisational transformation processes. In this context the CISCOS project has developed a multinational training course for personnel in disability service organisations, local governments and university students.

The Just4All project, aims to promote access to justice for persons with disabilities by raising awareness among legal practitioners on the needs of persons with disabilities and develop a training for legal practitioners on that topic (*Just4All - Promoting Justice for People with Disabilities in the EU, s. d.*).

European projects allow co-creation among different partners. The consortium may be composed of service providers, persons with disabilities organisations, training entities, local actors...

Some other projects are locally funded. The Disability Federation of Ireland (Ireland) applied to a local grant to receive funding to train local authorities to the Convention. Plena Inclusion (Spain) established local partnerships with different legal operators.

Targeted audience

Training produced by service providers are mainly dedicated to their workers. It is outlined that training middle and top management, and even board members, is key.

As disability is a “cross-cutting issue”, intersecting with many areas including education, employment, health, social services, ..., and since mainstreaming is of the challenge of CRPD, training dedicated to other groups in the community is of utmost interest. Service providers have to share their expertise with other professionals that interact with disabled persons. Bringing expertise outside service providers, cooperating and interfacing with other sectors is key. This approach requires active engagement and coordination with diverse services and community actors. To permit such collaborations, significant strategy, policy and system changes are required.



Here are some examples of trainings dedicated to:

- Local authority:

As the aim of the CISCOS project is the systematic implementation of the Convention in a municipality or district, targeted audience encompass service personnel in disability service organisations and local governments.

The Disability Federation of Ireland (Ireland) focused on training local authority staff in the implementation of the Convention.

- Legal professions:

Projects addressing access to justice and legal capacity (articles 12 and 13 of the Convention) usually expand training to legal professions.

The Just4All and Ajupid projects develop a training for legal practitioners to promote access to justice for persons with disabilities.

Plena inclusion (Spain) develops training programmes on the right of access to justice for persons with disabilities for judges, lawyers, prosecutors, police, legal aid centres, other judicial and administrative bodies intervening in judicial or quasi-judicial instances

This is also the case of A LA PAR foundation (Spain) in the context of their Assistance Unit for Victims with Intellectual Disabilities. They offer specialized training to judicial and police professionals. It aims at improving the quality of their intervention when persons with disabilities are involved in their investigations.

In the case of projects dedicated to intellectual disabilities, most trainings are also dedicated to relatives, families, and concerned persons.

To note: Trainings specifically dedicated to persons with disabilities were not in the scope of the study. They usually are developed by persons with disabilities organisations.

Content

Some of the trainings addressed the whole convention, whereas others focused on a particular topic. Also, some of the training concerned all types of disability and some concentrated on a specific type of persons with disability.

Since intellectual disabilities raise many challenges with regard to the Convention, lots of work and research projects specifically address issues such as legal capacity and access to justice (Ajupid, I DECIDE, Just4 all, Plena Inclusion initiative (Spain), A LA PAR foundation initiative (Spain)).

Since the Convention outlines principles, some work needs to be done to translate principles into practical guidance on the ground and to break it down into more precise dimensions. The day-to-day expertise of service providers is very valuable in this “translation” work. For example Support Girona (Spain) has developed a considerable expertise in the area of support decision making and has innovated through the I-DECIDE project a methodology of this approach.

Another example of a significant change in support practice required by the Convention that implies innovation is the empowerment of persons with disabilities. This entails to find a new balance between empowering persons



and protecting those at greatest risk of harm. Risk assessment is needed to identify risks and to mitigate these as appropriate.

Some trainings were aimed at raising awareness on a broad scale:

- A LA PAR foundation (Spain) delivers short training on intellectual disabilities of 1 or 2 hours to a large public
- The Eudajmonia Foundation (Poland) promotes active participation of persons with disabilities in social and working life through experiential learning via trainings and simulations conducted at events, schools, kindergartens and parks.

Some trainings focus on a specific principle of the convention and provide knowledge and competences on the right professional attitude to adopt to promote this principle. For example KVPS (Finland) has developed a process for strengthening the self-determination of persons with intellectual disabilities or special support needs, which has been implemented in group homes.

As already discussed, implementing the Convention requires a multi-level approach and system changes. CISCOS for example addresses this complexity and provides training materials for systematic implementation of the Convention in a municipality or district.

TOPHOUSE addresses cooperation with housing sector to connect support and housing needs.

Some trainings also provide tools.

I-DECIDE provides the professional with tools to facilitate the person's expression of interests, wishes or preferences. The TOPHOUSE project provides 2 assessment tools: THINA and THSUNA.

Types of training materials and modalities of training

The types of training materials depend on the project, the audience, the objectives. It can be an online resource or classroom sessions. It usually includes video resources and interactive tools organized as learning activities. Some courses are open access (CISCOS, I-DECIDE), some are not any longer (Ajupid).

Duration of the course and the number of sessions is highly dependent of the project. Some are very short sessions (1 or 2 hours, usually when it is about raising awareness), whereas the workload of the CISCOS course is 180 h.

The pedagogical approaches are diverse: theoretical/practical, interactive, involving discussion, group work, reading case studies, personal reflection...

Trainers may be dedicated trainers (experts, professionals, researchers ...) from the structure producing the course or it may be professionals from the organisation willing to deliver the training and specifically trained.

Training material may be dedicated directly to trainees (ex: TOPHOUSE training course) or to trainers (Ex : Ajupid) or both (CISCOS).



Funding by European project facilitate multi-stakeholder cooperation. In some projects partnerships have been made with actors dedicated to education and training: In the CISCOS project, 2 universities are implicated: Warsaw School of Economics (Poland) and the University of Seville (Spain).

Interestingly some projects integrated their training within the conventional academic training system and are accredited.

-the CISCOS study course is conceptualized with a workload of 180 hours, corresponding to 6 European Credits Transfer System. It can be integrated into the current curricula at both undergraduate and postgraduate levels and into existing or new adult and in-service training programs of professional training organisations.

- Plena Inclusion (Spain) develops partnerships with education partners to integrate trainings on the right of the access to justice for persons with disabilities into education programs.

Participation of person with disabilities

In line with the Convention's participatory principle of persons with disabilities, some initiatives fulfil this requirement and cooperate with persons with disabilities organisations or disabled persons as a way to build capacities and to build trainings through a participatory process. This is the case of the Just4all project who partnered with European Disability Forum (EDF), a European umbrella organisation of persons with disabilities.

Some initiatives require the participation of a disabled person as a trainer. In the initiative of the Eudajmonia Foundation (Poland) training is also carried out by persons with various disabilities. Trainers with disabilities are supported by facilitators. In the Ajupid project trainers work in pair: a professional and a person with disabilities. In the TOPHOUSE project, the training has also been designed to be co-delivered by a lead trainer and a client facilitator called an "expert by experience".

Plena Inclusion (Spain) training relies on a group of trainers made up of persons with intellectual disabilities, Plena Inclusion staff and collaborators from the environment (law students, police officers, lawyers ...).

ASPA (Finland) included disabled persons in the process of training. Each trainee had to interview a user on issues in terms of support. The trainee had to find and implement solutions in response to those issues on the basis of the course. An assessment was made by the user after 3 months.

Main challenges: Sustainability and transferability

The examples presented here emanate from 2-5 years projects built by a few partners. This raises the challenge to transform those initiatives limited in space and time in sustainable actions with wide impact.

It is crucial that the initiative has a degree of permanence. This question is usually linked with the end of funding that must be anticipated. For example the Ajupid project finished in 2016 and the website is not accessible anymore.

Another issue concerns their capacity to be transferred in order to be widely delivered. The fact that most projects emerge from European projects has some advantages:



- it assures that motivation to share exists and the training material is made available
- since partners come from different countries, contextualization questions are taken into consideration from the very beginning of the project. In the case of the Ajupid project the training material is based on the results of a research comparing the legal systems of five countries (Bulgaria, Finland, France, Hungary, Ireland) in access to justice for persons with disability. The CISCOS training package is available in German, Greek, Hungarian, Polish, Slovenian, Spanish, and Swedish language.

Still some barriers to transfer remain:

- What about the “easiness” of setting up the training: Is the training based on normal means and structures (e.g. local professionals)? What is the “cost” for a structure to appropriate itself the training?
- Is the material updated and by whom? Notably lots of training materials include links to videos that are very rapidly outdated. This was experienced by the Apei Centre Alsace (France) in using the Ajupid material.
- Language barrier: even in the context of European project the material may not be available in the needed language or translation of specific concepts and terms may not be completely adequate.

In conclusion this section sheds light on initiatives of service providers to design specific trainings aiming at implementing the Convention. The initiatives often emerge from a European project. They can target different audience, mainly their own staff or staff of common services. These initiatives may cut across different types of content such as awareness raising on the whole convention or innovative approaches on specific topics (for example access to justice and support decision making in the case of intellectual disabilities), or coordination and partnerships with larger communities. Interestingly some projects integrated their training within the conventional academic training system and are accredited. In accordance with CRPD some of the initiatives work in partnerships with persons with disabilities organisations or persons with disabilities to co-produce or deliver their training.

Deliver training that meets CRPD requirements

A major response to the need of staff training on which service providers can act is the training of their own staff. They can provide dedicated time, resources, opportunities and support for workers to develop their professional skills and knowledge throughout their careers through an entitlement to formal and informal continuing professional development.

Different configurations, notably in terms of scale, are encountered in the examples collected:

- The organisation strategically decides to engage in a large training process to better meet CRPD expectations. ASPA (Finland) for example, dedicated to promote opportunities for persons with disabilities and persons recovering from mental health problems to live an independent and autonomous life, introduced training of person-centred way to work for all staff in the housing services, leaders and staff working in the administration in the organisation. 350 participants were trained.
- On another scale, the organisation decides to engage in training of a few staff based on motivation. One of the professionals may become a trainer. Apei Centre Alsace (France) trained 2 people to deliver internal training. They trained 35 people within the organisation.



A main challenge for service providers willing to engage in a process of CRPD training is to identify a training adapted to the context and relevant to their needs.

Another challenge is the budget allocated to this mission in terms of trainer remuneration and costs for organisations. Cost may be reduced by training a staff delivering training internally himself. But the most important cost comes from giving time to staff to be trained. Giving the actual constraints in terms of staff shortages and the need to spare time this may prove very difficult. It is outlined that legal requirements in terms of training that apply to service providers highly differ from country to country.

As already illustrated in the previous section, to meet CRPD requirements in terms of mainstreaming service providers may also train other stakeholders of others communities.

Service providers are key actors in skilling or upskilling their workforce in delivering CRPD compliant training. Identifying the adequate CRPD training may prove difficult. Economic considerations may limit the action of service providers.

Engage partnerships to promote the design and delivery of CRPD compliant accredited initial and vocational training

Participate to redesign undergraduate and graduate course curricula as well as vocational training

Since it is not in the scope of the study no extensive research has been done on the content of existing initial and vocational training but it appeared from a limited internet search and from interviews with stakeholders that at least in some European countries the Convention is not at the heart of social training.

Researchers, teachers and students need to develop a better knowledge and understanding of the Convention through their specific academic field. **Undergraduate and graduate course curricula need to be redesigned to completely incorporate the standards set in the Convention.** This has to happen in the social sector but education programs under the umbrella of others disciplines such as public administration, education, legal sector have to be sensitized as well. It should be required that professional accreditation includes training on CPRD.

Service providers may actively contribute to the conception of training materials dedicated to initial or vocational training. European programs such as the European Social Fund or the Erasmus + program facilitate such commitments through funding of collaborative projects. Those projects give opportunities to implement formal partnership arrangements with education and training providers, service providers, persons with disabilities organisations and to include relevant skills development activity in academic training.

One such good example is the European Care Certificate (ECC) developed by EASPD in partnership with organisations active in the social sector from 17 European countries (ECC, s. d.). It is a Europe-wide qualification



that has been developed to cover the basic knowledge that is required for an individual to work in a health and social care setting. It follows the principles of the Convention.

It is stressed that redesigning initial and vocational trainings in compliance with CRPD should be a priority of the European countries, since it is widely acknowledged that education is a prerequisite for cultural changes and the building of inclusive societies. One of the major issues is the funding of such a shift.

As already stated above, some trainings designed by service providers described in the previous examples have been built to be used both in academic and in-service training settings.

Provide internships and learning placements in services that promote CRPD

Some educational programs require on-site experience through a social work internship. The aim is to earn and practice key skills under the close supervision of a qualified worker and within an entity. It is acknowledged that placement period enhances integration of theory with practice.

Offering internships in services that promote CRPD principles and in which structures, values, roles and resources are channeled towards enabling implementation of the Convention would be very valuable.

Practicing in environments that incorporate the philosophy and values of CRPD is probably the most compelling strategy to fully understand and apply the principles of the Convention in the everyday interactions and work. All employers should provide high quality placements and support for social work students on those placements.

Co-produce and co-deliver education, training materials and training courses with persons with lived experience

A unique aspect of the negotiation process of the CRPD was the active involvement of persons with disabilities organisations. As set in the Convention, development of a human rights agenda cannot be attained without the active participation of individuals with disabilities. Persons with lived experience are experts and necessary partners to advocate for the respect of their rights, but also for the development of services and opportunities that are most responsive to their actual needs.

Patient-led education of health professionals begins to be well known in the health sector. In France the think-tank "Partners in knowledge" including representatives of users of the social and health system, training managers, professionals, institutional health and social support, co-authored "Partners in knowledge", extends this approach to the social sector and pleads for the integration of users and carers in the initial training and continuing professional development of health and social care professionals (*Associations Nos Savoirs*, s. d.).

Collaboration between persons with disabilities organisations and education actors in training is the aim of the PowerUs project (*Powerus*, s. d.). This is an international network of teachers and researchers from schools of social work and representatives from different service user organisations. PowerUs develops methods of mutual learning in order to change social work practice to be more effective in supporting the empowerment of marginalized and discriminated groups in society. Acknowledging direct experience as a valuable source of



knowledge and involving service-users in education and research, provides social work-students with an understanding of the social issues that goes beyond the purely theoretical. It also empowers the service users to see that their experience-based knowledge is valued.

As shown above, persons with disabilities organisations are highly implicated in producing material and tools on the Convention. There also are many examples of persons with disabilities organisations providing training. Here is an example of an effective partnership between a persons with disabilities organisation and an educational organisation. European Disability Forum (an umbrella organisation of persons with disabilities) cooperates with the Academy of European Law (ERA) in the organisation of trainings on legal and policy practitioners on the Convention (« CRPD Trainings in Partnership with the Academy of European Law », 2020). This project is funded by the European Union.

In conclusion, engaging strong partnerships with stakeholders involved in the accredited conventional training system and with persons with disabilities either through the co-production of training or by offering internships is a powerful way to contribute to the modeling of initial and vocational training in compliance with the Convention.

Conclusions and perspectives

Key message to service providers: it can be done!

The study explored the wide range of ways service providers can contribute to implement CRPD through training. The diverse and innovative initiatives showcased in this report show concretely what can be achieved in very different contexts across Europe. It should encourage every organisation to move forward in trying something out and make effective and positive (even if small) steps towards filling the implementation gap of the Convention.

Service providers have a unique role to play in training in translating principles into practical guidance

We think that two main interconnected challenges are required to address the implementation gap:

- The CRPD has to reach and connect with the ground. Many local actors are unaware of CRPD and their associated obligations. The implementation of complex policies such as the CRPD needs a multi-level approach with a strong focus on local levels. Moreover, as mainstreaming is emphasized in the Convention, it requests a multi-pronged approach addressing various sectors at the local level: education, health, employment, leisure, accommodation Mindsets have to be changed and attitudinal barriers faced by persons with disabilities removed, in the day-to-day life. Principles enshrined in the Convention must be made real in the “small places” where persons live their lives.
- The Convention must be “translated” in more operational concepts. Principles outlined in the convention may be vague in the day-to-day life and difficult to operationalize. There is a need for meaningful information on how to develop initiatives and practices that can have a meaningful impact on the lives of disabled individuals. Actors need practical guidance to operationalize the Convention on the ground.



Service providers have real assets to address those challenges.

- They act at local level, at the “small places”. They can make the difference. They are the transmission belt of the Convention through their staff. Expected changes will go through the attitudes of the staff in their everyday life, and interactions with persons with disabilities.
- Thanks to their expertise gained in the everyday life, service providers have skills on how to make changes on local practice. Staff may help to break down principles into smaller, practical and meaningful dimensions. Many diverse support services have been put in place over the years to meet the needs related to the spectrum of life of persons with disabilities, and considerable expertise has been developed around those. Accordingly service providers are able to provide knowledge and innovation, directly tested from the ground and to develop training programs that include practical advice in developing high-quality services that promote the principles enshrined in the Convention.

Challenges: sustainability and transferability

This report sheds light on existing training initiatives. However to maximize impact of innovative initiatives it should be replicated and used widely. A main challenge for trainings to travel fast and being scaled up is to render it visible.

Providing information on existing training materials on CRPD is key.

A scan of existing training materials for the service providers workforce should be done so that service providers access more targeted information on skills development relevant to CRPD implementation.

The EASPD e-learning Knowledge Hub developed by EASPD could host this mapping.

To note: Training evaluation is a major issue that is not covered by this study but that should be also taken into consideration in designing a more comprehensive offer in trainings in compliance with CRPD.

Develop a comprehensive and systematic approach on CRPD training

These considerations have to be embedded in the larger context of education and training in the disability sector. Education and training systems are highly complex and diverse across Europe, they involve lots of stakeholders. A wide comprehensive and systematic approach for developing, delivering, quality-assuring, certifying and funding training is required and should take into consideration a number of constraints including lack of human and financial resources and organisational capacity. Service providers should advocate within the different European strategies and instruments launched recently (Disability platform, Accessible EU) or to be launched soon (The Flagship Initiative to build a European Framework for Social Services of Excellence for Persons with Disabilities by 2024) on this topic for the development of a framework dedicated to the understanding and tracking of training processes within service providers and to the measure of the impact of this powerful and unique training in terms of filling the implementation gap of the Convention.

Europe also supports implementation of CRPD through funding via diverse funds, instruments and programs. Many of the initiatives collected emerged from a European project. A project scanning initial, vocational, continuing professional development training to investigate how much CRPD is integrated in the programs and encouraging stakeholders to ensure their training incorporate the principles enshrined in the Convention could be built and presented to financing.



Limitation of the study

The study was focused on training on CRPD. However, it is outlined that there are services in countries around Europe having fundamental values and following guiding principles that are not labeled “CRPD” but are still consistent with the ones advocated in the Convention. Some organisations develop proactive initiatives aligned with the CRPD but without being referred as such.

A future study may deepen the topic by studying the principles set in the Convention (and not the reference to the Convention) and its overlap / interaction with existing core values/initiatives. A very interesting review has been undertaken by the Health Information and Quality Authority in Ireland on the current use of principles in health and social care services (HIQA, 2021). The aim of the review is to inform the development of a set of principles to underpin future national standards for health and social care services. The move to a principle-based approach will allow to use the set of principles consistently across all national standards developed by HIQA, irrespective of the setting or service type. Such a methodology could be used in the context of CRPD principles.



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EASPD is the European Association of Service providers for Persons with Disabilities. We are a European not-for-profit organisation representing over 20,000 social services and disability organisations across Europe. The main objective of EASPD is to promote equal opportunities for people with disabilities through effective and high-quality service systems.

