



## TCI Input to COSP Sub-Themes

**Sub-theme for Roundtable I: International cooperation to promote technology innovations and transfer for an inclusive future.**

**Input:** Technology innovations including assistive technology are crucial for independent living, assisting with daily needs of persons with disabilities, supporting participation and inclusion in community lives and having an overall effect on their wellbeing. However, discussions and works on AT have been mainly focused on people with physical disabilities, visual impairments, and hearing impairments but there has been very less interaction, research, and work on AT for persons with psychosocial disabilities. In TCI our core focus has been on article 19 of the CRPD and independent living of persons with psychosocial disabilities in the community. Unfortunately, people with psychosocial disabilities continue to be discriminated and labeled as persons with mental illness and unsound minds. Unfortunately, till today, people with psychosocial disabilities remain excluded from the discussions related to assistive technology, technology innovation, online community supports and services, etc. Also, intersectional identities of being persons with psychosocial disabilities, women and girls and gender diverse groups with disabilities, children and older persons with disabilities, migrant populations, persons from indigenous communities etc. and their access to AT should be discussed. With a global push towards developing and promoting Assistive Technology, the discourse should meaningfully engage and include persons with psychosocial disabilities and their representative organizations. Access to AT is a key enabler and equalizer for persons with disabilities, including persons with psychosocial disabilities in all aspects of life.

Under the sub-theme, discussions should evolve around challenges and barriers which restricts participation and inclusion of persons with psychosocial disabilities in the process of promoting and accessing technology innovations. Contextual factors such as location (rural vs urban), financial issues, low or no internet connectivity (in case of online technology), not adaptable to local and cultural contexts are some of the barriers that should be discussed. Persons with psychosocial disabilities, especially those who are institutionalized or have their gadgets taken away from them are further excluded from these discussions. In spite of the adoption of UN guidelines on deinstitutionalization<sup>1</sup>, government continue to direct their funding towards building and maintaining new institutions for persons with psychosocial disabilities, segregating persons with psychosocial disabilities. The discussion must highlight no access to information to people with psychosocial disabilities in grassroot communities.

In cases where AT exists for persons with psychosocial disabilities, it is mainly focused on locating or providing mental health services and treatment centers etc. However, TCI confirms that AT should assist in providing support to access mainstream services like employment opportunities, higher education supporting lifelong learning, accessing leisure and recreational opportunities, general health services, connecting with mainstream community and

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<sup>1</sup> CRPD/C/5 Available at : <https://www.ohchr.org/en/documents/legal-standards-and-guidelines/crpd5-guidelines-deinstitutionalization-including>



strengthening the social capital of persons with psychosocial disabilities, management of daily works, economic empowerment, digital assistants, easy accessibility and convenience to use tech products, etc.

Discussions must evolve around access to AI, gadgets, internet, communications, affordability and supporting technology innovations for Community Inclusion of persons with psychosocial disabilities. There are number of ways through which AI, AI and various tech products can support people with psychosocial disabilities to live equally in independently in the community.

Another major thread of discussion should be on the potential challenges or precautions to be considered while developing AI for persons with psychosocial disabilities. In order to avoid ableist perceptions within its development, the process should respect and uphold will, preferences, choices and rights of persons with psychosocial disabilities; should respect the range of diversity of human experiences and abilities instead of putting enhancement pressure; its use should be regulated with proper ethical guidelines and monitoring processes to avoid unintended psychological consequences; respecting physical and mental integrity of persons with psychosocial disabilities and ensuring that it is used as an instrument for empowerment rather than coercion or control.<sup>2</sup>

### **Sub-theme for Roundtable 2: Persons with disabilities in situations of risk and humanitarian emergencies.**

**Input:** TCI has been working with its member organizations, where Article 11 of the CRPD has been a key thematic area. People with psychosocial disabilities continue to be marginalized to the most severe extent of not having personhood, and are likely to be disproportionately affected and excluded in actions and plans before, during and after humanitarian crises and disasters<sup>3</sup>.

Under this sub-theme, it must be informed in the discussion that person with psychosocial disabilities who are on exacerbated risk to violence, abuse, inhuman, cruel and degrading treatments, shunting between different institutions (trans-institutionalization) and losing their life and liberty during the times of humanitarian emergencies. People with psychosocial disabilities are committed against their will to mental institutions, asylums, rehab centers, care homes, nursing homes, social care institutions, half way homes, de-addiction centers, group homes, shelters, camps and other variety of institutions.

The discussion of the sub themes must inform that in many Global South countries, persons with psychosocial disabilities continue to be confined and shackled legally under the incapacity laws. The sub theme must inform this discussion as these incapacity laws strip away persons with psychosocial disabilities personhood and their identity of even being a person to live in

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<sup>2</sup> <https://www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/advisorycommittee/neurotechnology/03-ngos/ac-submission-cso-international-disability-alliance.docx>

<sup>3</sup> [https://tci-global.org/wp-content/uploads/2023/07/TCI-Global\\_Submission-for-General-Comment-on-Article-11-CRPD.pdf](https://tci-global.org/wp-content/uploads/2023/07/TCI-Global_Submission-for-General-Comment-on-Article-11-CRPD.pdf)



the community, with no access to community services and support systems during the emergency situations.

Persons with psychosocial disabilities, children, women and girls with disabilities have no access to meaningful occupation, education, access to health care, nutrition, and other such basic amenities needed for life, on equal basis with others in the reconstruction period. Persons with disabilities staying in camps and evacuation centers are left to their own devices and resources, rather than seen as needing specific disability assistance or general services. During drought and famine situations, persons with psychosocial disabilities are allowed to die due to starvation, because they are the last ones to get food and water in camps and are often left behind during evacuation plans<sup>4</sup>. It has been reported in TCI by members that persons with psychosocial disabilities, particularly women are exploited during rescue operations as 'mules' to carry food, medicine and supplies between disaster zones, camps and households. Practices of violence, abuse and sexual exploitation of women and girls with psychosocial disabilities occur in evacuation centers and camps. As the persons are 'non persons', they have no recourse to justice, first responders and the police do not believe them.

During preparedness there are number of capacity building initiatives taken by humanitarian organizations. Individuals with psychosocial disabilities and our organizations are not included in capacity building and training initiatives. These capacity building opportunities include trainings on evacuations, responses, creating safe places, humanitarian programs cycles, and legal systems.

Unfortunately, due to subject to institutionalization and medical approach to psychosocial disability, we are completely left behind throughout the capacity building processes. Capacity building focuses on 'mental health' rather than 'inclusion', restricting the trainings to the medical model and coercive frameworks. People with psychosocial disabilities have no access to information and communications related to the any trainings nor involved in the process.

The sub theme discussion must highlight that there must be restriction on creating new or refurbishing of the existing institutions during humanitarian emergencies, specifically in the name of care homes for people with psychosocial disabilities, intellectual disabilities, elderly people and neuro-diverse identities. What we have seen in various countries that governments, and other development agencies use the humanitarian aid for the improvement of the mental asylums and institutions often advertised as 'state of the art' facilities, instead of investing in community support and community services during emergencies.

It is highly important to inform the discussion on de-institutionalization of persons with psychosocial disabilities during the humanitarian emergencies, and community inclusion by making available CRPD compliant community support services and systems. The discussions under the sub theme must ensure that the right to live independently (Art19) in the communities is not suspended during the situations of humanitarian emergencies and disaster situations

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<sup>4</sup> <https://tci-global.org/wp-content/uploads/2022/05/Indonesian-Mental-Health-Association-Investigation-in-Palu-Central-Sulawesi.pdf>



and a culture of Community Inclusion prevails in the society with comprehensive awareness, and capacity building on disaster preparedness and inclusion of persons with psychosocial disabilities in the community.

The sub theme must highlight discussions on the implementation of the DI guidelines, adopted by the CRPD committee “Guidelines on De-institutionalization, including during emergencies” (A/HRC/C/5) in October, 2022. This gave visibility and direction to the situation of underrepresented groups, especially during times of humanitarian emergencies and disasters. The guideline must be adopted by the humanitarian agencies as a reference document during the humanitarian programming cycle.

Under the sub-theme discussion related to disaggregated data, needs assessments and social protection must also be highlighted. As people with psychosocial disabilities, in many countries where we are tagged with the identity of being a person with unsound mind, we are left out from the data collection and social protection and budgets discussions for inclusion in disability and development.

### **Sub-theme for Roundtable 3: Promoting the right of persons with disabilities to decent work and sustainable livelihoods.**

**Input:** In TCI the right to decent work and sustainable livelihood opportunities has been our core thematic of works members. Under the sub theme the discussion should inform that it is one of the facilitators of community inclusion of persons with psychosocial disabilities to live equally and independently in the community.

Persons with psychosocial disabilities are frequently shackled legally, by incapacity laws, mental health laws and a wide variety of civil laws, through ‘civil commitment procedures’ (e.g. through Vagrancy law). They are stripped of their personhood and their right to identity, further exacerbated through guardianship and conservatorship laws. People with psychosocial disabilities are tagged as persons with unsound minds, they are not seen as requiring reasonable accommodations at the individual level, nor supported with decision making processes for enjoying their legal capacity on an equal basis to others. The impact of being a person with a psychosocial disability, including youth, women and LGBTQI community is total disqualification from family life, work and employment, education, livelihood opportunities, etc.<sup>5</sup>

The discussion must inform that poverty is also a leading driver for institutionalization of persons with psychosocial disabilities. The discussion must inform that in many countries when people with psychosocial disabilities try to access an identity card, they are provided with a “not fit to work” certificates which restricts their inclusion in accessing right to decent work, access to social protection, and sustainable livelihoods. Along with other barriers of access to no support services and support systems in community, this creates a normative in the community and the person is labelled in the family as a loser, confined inside home for

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<sup>5</sup> <https://tci-global.org/wp-content/uploads/2023/02/Background-Reading-Legal-Capacity-Round-Table.pdf>



household works, nor supported for home-based employment/livelihood opportunities and therefore sent to a mental health institution.

The sub themes must highlight discussions related to awareness and sensitization in mainstream communities and various work & employment stakeholders, for equitable access to livelihood opportunities and reasonable accommodation at work places for persons with psychosocial disabilities. Community support systems must be put in place to support people with psychosocial disabilities in decision making, considering home based employment opportunities, and creating linkages at community level for employment, skill building, trainings, and choosing a livelihood of their own choice for living in the community, which thereafter must be supported by the communities of persons with psychosocial disabilities and other agencies for scaling.

The sub theme discussion must emphasize on awareness raising, mobilizing and sensitizing the communities, employers, and governments on transformative solutions and CRPD compliant employment to ensure equal access of persons with psychosocial disabilities to employment and livelihood opportunities. The sub theme must highlight that any sheltered or segregated employment is not CRPD compliant. There should be a discussion highlighting good practice examples of advocacy campaigns led by persons with psychosocial disabilities with their policy makers on repealing or modifying of discriminatory practices or policies at workplace.

The sub-theme must highlight discussion on the implementation of the DI guidelines which states about the support systems, social protection/security packages and support services to be available for persons with psychosocial disabilities to access education, employment and livelihood opportunities. Therefore, also supporting in preventing institutionalization and facilitating adequate standard of living for persons with psychosocial disabilities in the community. There could be various community support systems and community support services of an individual depending on his/her own community requirements to access mainstream services and live independently in the society.