Written submission for the draft guideline on deinstitutionalization, including in emergency

**Coalition for the Promotion of De-institutionalization in Japan**

- Japan National Assembly of Disabled Peoples’ International (DPI-Japan)

- Japan Council on Independent Living Centers (JIL)

 \* Number of affiliated organizations of persons with disabilities (as of 4 July 2022):

DPI: 93 OPDs / JIL : 116 OPDs

4 July 2022

I. Purpose and Process of these Guidelines

**Paragraph 1,**

**Comments:**

To make it clear that it is a mandate and the responsibility of the State Parties to implement.

**<Proposal>**

They provide guidance to parties to the Convention, civil society organizations and other stakeholders to support State Parties’ responsibility in implementing the right of persons with disabilities to live independently and be included in the community.

II. Obligation to end institutionalization

**Paragraph 10,**

**Comments:**

It should also indicate measures for countries without international human rights institutions.

v. Enabling legal and policy frameworks

**Paragraph 64,**

**Comments:**

It should also take considerations that direction of care does not lead to young carers which causes another problems.

c. Deinstitutionalization strategies and action plans

**Paragraph 65,**

**Comments:**

It is the responsibility of the States Parties to develop strategies and necessary budgets for securing human resources for Personal Assistants and other support personnel in the community.

**<Reasons>**

In Japan, there is a shortage of essential workers in all genres, but the lower income of personal assistants compared to other jobs is a main factor of the shortage, so it is necessary to include effective measures to improve the treatment of current personal assistants in the strategy for securing human resources in community settings.

VI. Comprehensive community support services, systems and networks

a. Support systems/networks

**Paragraph 69,**

"If a person with a disability does not wish to be supported by his or her family or community, he or she should have access to other options.”

**Comments:**

What are the other options? What exactly should they have access to?

**Paragraph 72,**

"This includes the development of respite services, but these should not imply institutionalization of children and adults with disabilities, even for short periods of time."

**Comments:**

This paragraph is implying “family dependency” of the person with disabilities which is inconsistent with principle of the Article 19th of the Convention. Thus it needs to be re-organized.

b. Support services

**Paragraph 73,**

Support services should be developed in accordance with a human rights model that respect the will and preferences of persons with disabilities, ensuring their full participation and that of their broader support network if the person so wishes. States Parties should not use medical criteria when developing new needs assessment tools, and medical professionals should not be involved. Instead, a person-centred process should be used, identifying the range of supports such as peer support, including independent living centers, self-advocacy, circles of support, and other support networks a person may need to live independently and be included in the community.

**Comments:**

Articulate the kinds of supports for persons with disabilities to be able to exercise independent & community living as opposed to hospitals or institutions.

**Paragraph 92,**

**Comments:**

Re-training programmes should be systematically implemented for staff who are currently employed at institutions to be able to support community living rather than institutions. Furthermore, include measures for the transition of workplaces and roles of staff who have undergone the above-mentioned re-training programmes.

**<Reasons>**

Since workers who are currently making a living by being employed by the institutions as staff may become obstructive factors to the deinstitutionalization process, it is considered effective to simultaneously implement support measures that enable them to find new jobs through transition to the community settings, such as personal assistance, without losing their jobs as a result of deinstitutionalization.