

# Speak!

Volume 8  
Issue 1

## disability rights

### **“We Are All Rwandan”**

*treating disability after  
the genocide*

### **Access for All?**

*investigating the  
truth about HIV/  
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FROM THE *Speak!* Editor-in-Chief

Last June, the World Bank and WHO released the first ever World Report on Disability. Not only does this recognize the progress achieved by disability rights promoters, but also sets a precedent for the future of disability-related policy making. In this issue, we discuss the vast nature of disability rights and the exciting future that lies ahead. Will disability rights indeed become mainstreamed? Will the Canadian government finally adopt a national policy on disability? How will disability-inclusive policies make their way into development projects? We invite you to join us in exploring these questions as we learn about producing human rights media. Such a process means that you will see a wide range of article topics, writing styles and a diversity of voices. As always, we hope that this issue will open up a space for discussion and incite your inner activist!

With much love,  
Emily & the Newspaper team

For the WHO Disabilities World Report: <http://bit.ly/whodisabilities>

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Cover photo: Credit to Pauline Chery

# Journalists for Human Rights at McGill

Journalists for Human Rights (jhr) McGill, a Students' Society of McGill University club since 2003 and the McGill chapter of the national NGO, is a group of students actively engaged in informing their community about local, national, and international human rights issues through media campaigns and other on campus projects.

jhr's goal is to make everyone in the world fully aware of their rights. Creating rights awareness is the first and most necessary step to ending rights abuses. By mobilizing the media to spread human rights awareness, jhr informs people about human rights, empowering marginalized communities to stand up, speak out and protect themselves. By concentrating our programs in post-conflict African countries like the Congo (DRC), Liberia and Sierra Leone, jhr is improving human rights where they are most at risk.

jhr provides unbiased media and capacity building training to African journalists. Typically, a jhr trainer will work alongside an African journalist for 6-8 months, mentoring him or her and helping with field production. jhr stays in each country for only 5 years, in order to promote sustain-

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ability without dependency. jhr partners with local media organizations to reach millions of people at risk of abuse with information on how to protect their rights, and the rights of others.

jhr McGill also provides students with national and international human rights journalism opportunities. Through the jhr Chapters Program, we have offered McGill students opportunities for publication in national magazines and academic journals and the chance to participate in media internships in Ghana. jhr's Train the Trainer Conference on Media and Human Rights has been hosted four times at McGill.

jhr McGill is always open to new members, so if you would like to write and edit articles for Speak!, assist with the radio broadcast or TV production, or help organize fundraising or advocacy events, send us an email at [jhrmcgill@gmail.com](mailto:jhrmcgill@gmail.com) and we will add you to our listserv.

To learn more about jhr's international work, please visit: <http://www.jhr.ca>

For more info about jhr McGill and our upcoming activities, please visit: <http://jhrmcgill.wordpress.com>

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# FACT SHEET dis-a-bil-i-ty /,disə'bilɪtē/



**DEFINITION:** Historically, words such as "crippled" "retarded" and "mental" have been used to describe the disabled but over time, the importance of the language and terminology of disability has been changed to achieve respect and inclusion. Disability is an extremely diverse umbrella term that includes physical, mental, intellectual or sensory impairments that hinders an individual's effective and maximum participation in society "on an equal basis with others." Positive changes in the outlook on disability have now pushed for society to see disability in the context of a dynamic interplay between an individual and their environment, for someone who is "disabled" can be perceived to be someone who is "disabled by society's inability to accommodate all of its inhabitants." Evidently, disability is a **complex term** to quantify, as it reflects mutually reinforcing dynamics between an individual's own capacities and the societal context the individual lives in.



Photo credit: U.S. International Council on Disabilities

Hence, what is disability to you?

BY MINGYANG XIE

{The UN International Day of Persons with Disabilities is observed every year on December 3rd.}

BY EMILY REN

What is the difference between a disability and a handicap?

A disability embodies a condition that is caused by an accident, trauma, genetics or disease which will then impair a person's mental or physical processes. A handicap is a physical or psychological constraint imposed on a person regardless of whether the person is already disabled or not.

There are many different ways of describing disability. This is one way:

- Physical** – Inhibits a person's movement or dexterity
- Intellectual** - abilities to learn
- Psychiatric** - thinking processes
- Sensory** - ability to hear or see
- Neurological** - loss of some corporal or mental functions



# TIME LINE dis-a-bil-i-ty

/,disə'bilɪtē/

BY IAN SANDLER

**1981:** The International Year of Disabled Persons (Canada)

**1982:** Canadian Charter of Rights and Freedoms is established; Section 15 includes rights for physical and mental disability; First time in history that any national constitution referred specifically to persons with disabilities

**2000:** Beijing Declaration; Pretext to the Convention, develops a strategy for the full participation and equality of people with disabilities

**2001:** Mexico proposes the text for Article 179; UN General Assembly has to consider opening negotiations for a Convention on Rights of Persons with Disabilities

**2001:** December 19th: UN Third Committee adopts Resolution 56/115 after much debate; Calls for a new human rights Convention for People with Disabilities

**2002:** Ad Hoc Committee formed in which the foundations of the convention are laid; Convention is negotiated during eight sessions of an Ad Hoc Committee of the General Assembly from 2002-2006; Most rapidly negotiated human rights treaty in history

**2006:** December 13th: UN General Assembly formally adopts the Convention by consensus

**2007:** March 30th: Convention opens for signature; 81 member states and the European community sign the Convention; Highest number of signatures of any human rights convention on its opening day

**2008:** May 3rd: Convention comes into effect  
2011, September: 149 states have signed the Convention

BY EMILY REN



Courtesy of ccdonline.ca

Canada signs the Declaration on the Rights of Persons with Disabilities at the United Nations. Members of the Canadian Delegation Steve Estey, Chair of CCD's International Committee, and Dulcie McCallum look on.

According to the Australian Disability Clearinghouse, among persons with disability, unemployment is as high as 80%. Many employers automatically assume people with disability are unqualified to work or fear the cost of special facilities. Recent research shows that employees with disability remain at a job longer, have **fewer work related accidents and take fewer sick days off than their colleagues.**

## DEMOGRAPHICS

- The disabled represent 15% of the world population, or nearly 1 billion people; this makes up the world's largest minority. According to studies from UNICEF, 30% of street youth live with some form of disability.

- Comparative censuses show that only 45 countries currently have anti-discrimination laws for people suffering from disability.

- The UN Development Programme (UNDP) found that 80% of people with disability live in developing countries.

- Violence against children with disability is 1.7 times more likely to occur in comparison with non-disabled peers.

- Approximately 95% of disabilities are caused by illnesses rather than accidents.

# Status of Disability

## Canada

According to the Canadian Disability Association's 2011 Long-Term Disability Claims Review<sup>11</sup>, the following are the leading causes of new disability claims in 2010:

Musculoskeletal/connective tissue disorders (27.5%)  
Cancer (14.6%)  
Injuries and Poisoning (10.3%)  
Cardiovascular/circulatory disorders (9.1%)  
Nervous System-Related disorders (9.1%)

Canada Pension Plan (CPP) Disability Benefits provide a monthly taxable benefit to contributors who are disabled and to their dependent children.

There were 202 350 children (3.7% of children) between the ages of 0 and 14 years with a disability in Canada in 2006.

## United States of America

On July 26, 1992, The American with Disabilities Act became effective, which guaranteed equal opportunity for people with disabilities in public and commercial facilities

At present about 36 million people (12% of the population) that have some form of disability which include vision difficulties, problems with walking, climbing stairs, concentrating, remembering or making decisions

21% of the population aged 16 and older with a disability that are below the poverty level. Meanwhile, 11% of the population aged 16 and older without a disability, are below the poverty level.

72% of disabled people 16 and older are not in the labor force.

## Mexico

According to the 2000 census, 1.8% of the population experiences some form of disability

A Federal Act for Persons with Disability Rights is currently under legislative consideration, however much current legislation lacks regulation

The International Disability Rights Monitor (IDRM) Publication in 2004 concluded that disability rights awareness is low among both people with and without disabilities.

## European Union

Almost 85.5 % of the EU-14 population aged 16 to 64 do not report a disability. 4.5 % report a severe disability and 10 % report a moderate disability

6.2% of the Finish population report a severe disability

There are currently some 80 million people with various kinds of disabilities in the European Union. This number is expected to increase in the coming years, mainly as a result of the growing proportion of older citizens in the population.

European Union is preparing to pass an Accessibility Act for disabled people that is similar to the one passed in the United States in 1990.

## Asia

According to the World Bank 10% of the population in South East Asia live with disability.

There are approximately 400 million disabled people in the Asia and Pacific region; of which 250 million are of working age

## Africa

Approximately 350-500 people worldwide become amputees each day due to landmines that

# Around the World

BY AMIR BEN SHABAT  
AND EMILY REN

they encounter while walking, farming, or playing.

According to US AID, the majority of Africans with disabilities are excluded from schools and employment, thus virtually guaranteeing an inadequate education

The USAID estimates that School enrolment for the disabled is no more than 5-10 percent.

## Latin America

The World Bank indicates that there are at least 50 M (10% of the region's population)

According to the Mexican census (2000), 1.8% of the population experiences some form of disability

A Federal Act for Persons with Disability Rights is currently under legislative consideration in Mexico, however much current legislation lacks regulation

The International Disability Rights Monitor (IDRM) Publication in 2004 concluded that disability rights awareness in Mexico is low among both people with and without disabilities.

About 82% of disabled people in Latin America live in poverty. It is important to recognize disability as both a cause and consequence of poverty.

## WORLD EVENTS



### 1 Continuing Dissent in Egypt

After decades of anger towards President Hosni Mubarak's government, protestors took the streets in January 2011. Since then, a military government has taken over, but many demonstrators still express doubt about military commitment to the ideals of the revolution. Charges of corruption and complicity in the killing of protestors were filed against Mr. Mubarak.

### Sectarian Demonstration Becomes Deadly Clash against Egyptian Government

A demonstration by the Coptic Christians in Egypt quickly escalated into a violent clash against the police, resulting in 24 dead and more than 200 wounded. While some report that Muslims ran into the streets to help defend the Christians, others say that their purpose was to help the police to restore civil stability. Egyptians have become increasingly discontent with the interim military government's delays in turning over power.

# What's up in the World.

BY CHARISSA POON, JANE ZHANG, AND KATIA FOX

### 2 Col. Gaddafi is shot in Sirte

On October 20th, French aircraft and a NATO fighter attacked Col. Gaddafi's convoy in Sirte, Libya. Rebel fighters eventually found Col. Gaddafi and his men hiding in drainage pipes. Col. Gaddafi was shot amid a crowd of people, yet the identity of the shooter remains a controversy. Thousands have thronged to Misrata to see his body. The UN Security Council has voted to end international military operations by October 31st.

### Syrian Government Targets Members of the Syrian National Council

Syrian government officials have attacked two members of the Syrian National Council. Mashaal Tammo, a leading figure in the liberal Kurdish Future Movement Party, was shot, while Riad Seif, a former political prisoner, was beaten in broad daylight. The Syrian National Council is a newly formed opposition front composed of various dissident groups against President Bashar al-Assad's corrupt government, which has typically avoided provoking the minority Kurdish community. Syria's economy has

wrestled with recession and numerous sanctions since early January 2011.

### 3 Wall Street Protest (New York, USA)

Hundreds of people have camped out in Zucotti Park near Wall Street, since September 17, 2011, for the Occupy Wall Street movement. The loosely organized group protesting for a wide range of issues associated with socioeconomic disparity claims to be defending the "99% of the US population against the wealthiest 1%, and called for 20,000 people to 'flood into lower Manhattan' and remain there for 'a few months'", according to BBC News. This movement has spread to cities all over the world, including Montreal.

### 4 Al-Qaeda Member Anwar al-Awlaki Killed (Yemen)

Yemeni-American imam and influential Al-Qaeda member Anwar al-Awlaki, whose targeted killing by the CIA was approved by President Obama, was killed in a drone attack in Yemen on September 30, 2011. He was accused of encouraging terrorism; his jihad preaching inspired many US and UK-based Muslims (primarily young men), including would-be terrorists and suicide bombers.

### 5 Indigenous Protesters March against Highway Plans in Amazon (Bolivia)

Controversial plans to build a highway through an indigenous rainforest reserve have sharply divided public opinion in Bolivia. Indigenous protesters began a long-distance march in August, but were blocked and dispersed by riot police using batons and tear gas. However, they were able to resume their demonstration a week later. The protests have since spread to the streets of La Paz, preventing construction thus far.

### 6 October Heat Record (UK)

British crowds soaked up some unexpected rays of sunlight on October 1, 2011, in Gravesend, Kent. The highest temperature record for October in the UK was made with an unseasonably warm 29.9C. The previous record was 29.4C on October 1, 1985, in March, Cambridgeshire. Temperatures topped those in normally warmer cities such as Athens, Los Angeles, and Barcelona.

### 7 New President Replaces Anti-Corruption Chief (Zambia)

During his campaign, President Michael Sata pledged to weed out corruption among government officials. Thanks to his unexpected victory, Sata has dismissed the head of the country's anti-corruption watchdog. After his first week, the president already fired the head of the central bank, along with a line of previous government employees.

### 8 World's First Fat Tax (Denmark)

Danish officials have implemented a new surcharge on butter, milk, cheese, pizza, meat, oil, and processed food that contain more than 2.3% saturated fat. Al-

though hopeful in reducing the population's intake of fatty foods, the policy spells an array of consequences: consumers hoarding products before the price rise and potentially shopping abroad, and a bureaucratic nightmare for producers. Scientists, however, think saturated fat may be the wrong target as salt, sugar, and refined carbohydrates are more detrimental to health.

### 9 Mexico's War on Drugs Continues

In a battle against drug cartels and gangs that has lasted for over 3 years, Mexico has now been faced with possibly the most brutal murders to date. With at least 52 people killed in a Casino arson in late August, a blogger beheaded, and 2 journalists slain in September, Mexico is in a state of political unrest. President Calderon's National Action Party has come under scrutiny for corruption and the Institutional Revolutionary Party is currently favored to regain the presidency next year.

### 10 Women in Saudi Arabia Allowed to Vote but not Drive

In King Abdullah's annual speech this past September, he announced that women would be allowed to vote in the next set of local elections. However, no one knows when they will be held, as the recent municipal election was only the second to occur in the past 50 years. It is speculated that this is King Abdullah's attempt to protect Saudi Arabia from the upheaval sweeping neighboring states. Although women's rights activists see this as a promising step in the right direction, skeptics have pointed out that women will still not be able to hold cabinet positions, travel outside of the country without male permission, or drive a car.

### 11 Harper Presses Sri Lanka on Human Rights

This past September, Harper threatened to boycott the 2013 Commonwealth summit in Sri Lanka if its government does not show accountability for human rights abuses towards the Tamil. Although Sri Lanka denies these accusations, a UN panel found "credible allegations" that the government had shelled civilians, no-fire zones, and hospitals, and that torture continued after the war had ended. Many are speculating that this sudden move is Harper's attempt to court the Tamil communities in the Toronto-area ridings that have recently converted to Conservative representation.

### 12 Does Distressed Denim come at a Terrible Price?

The sandblasting of denim has been causing an incurable lung disease in factory workers. Silicosis is caused by small particles of silica dust from sand embedding themselves in the lungs, causing shortness of breath, coughing, weakness, weight loss, and even death. Levi Strauss & CO and H&M publicly banned sandblasting, but many companies tend not to own the factories that produce their clothing and thus cannot regulate them. Turkey banned sandblasting in 2009, but the method has spread to other countries including Bangladesh, Pakistan, China, and Egypt.





# "We Are All Rwandan"

## Treating disability after the genocide

BY PAULINE CHERY

In April of 1994, Rwanda was pronounced clinically dead. Its Hutu militia conducted the most efficient genocide in human history, wiping out close to one million Tutsis and moderate Hutus in less than one hundred days. Seventeen years later, survivors of the genocide walk Kigali's calm and

ordered streets, their machete scars and missing limbs serving as eerie reminders of the trauma everyone wishes to forget. While the government has taken steps to support this disabled population, it has largely been unable to convert its policies into concrete progress. As a result, many remain



PHOTOS COURTESY OF THE WIKWIHEBA CENTRE  
PHOTOS AT LEFT, ABOVE AND PG 1: Sights from a typical the Wikwiheba Mwana Centre's new courtyard.

excluded from necessary services.

The Wikwiheba Mwana Centre for Handicapped Children is located in the small village of Ngarama in Rwanda's Eastern Province, about a four-hour drive from the capital, Kigali. Mediatrice, the centre's director, struggles to meet the standards in nutrition, cleanliness, and health that the government has imposed, despite limited financial support of centres like hers. In the last two years, the government has only sent her three cows, ten goats and 800,000 RFr (\$1,400CAN). As Mediatrice explains, "the government is supporting the centre, but not suitably". About 40 centres of this kind exist in Rwanda, and the problems faced by Mediatrice represent of the pros and cons in the steps that the government has taken regarding disability rights.

Under the current government, people living with disabilities (PWDs) have enjoyed significant improvement to their rights. In 2003 President Paul Kagame announced a ten-year National Development Plan which included a paragraph promoting the rights of PWDs. In 2001 the Ministry of Local Govern-

# Disability After Genocide

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ment (MINALOC) created its National Policy for the Protection of the Handicapped (MINALAC). In the same year, MINALOC also created the Federation of Associations and Centres of Handicapped People in Rwanda (FACHR), which acts as an umbrella organization for PWD services. Despite these remarkable policies, centres like Mediatrice's have not seen any improvement. According to a report produced by the Rwanda Policy Project of the Disability Knowledge and Research (KaR) Programme, an initiative of the UK's Department for International Development (DFID), only 5 percent of disabled Rwandans are able to access the services they need.

This is largely because government services and benefits are not allocated based on need. In Rwanda, key actors in the disabled sector tend to prioritize survivors of the genocide while excluding the rest of the disabled population. These actors include associations like the National Assistance Fund for Needy Survivors of Genocide and Massacres (FARG) and the National Demobilization and Reintegration Commission (NDRC). FARG only supports disabled genocide survivors. The rehabilitation and training centre recently established by the NDRC grants exclusive access to the ex-combatants in the genocide.

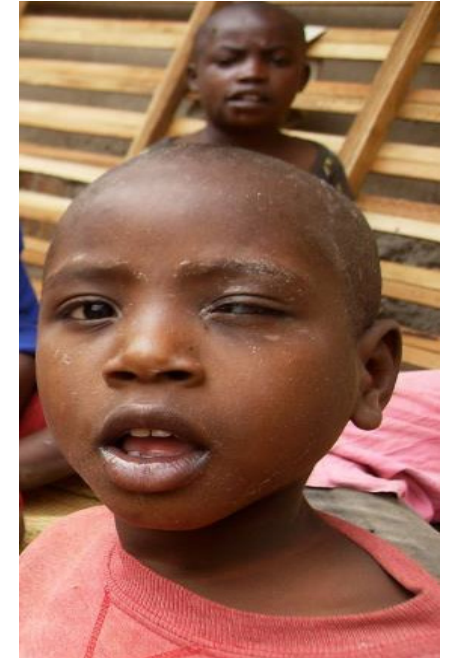
Ex-combatants who helped drive out the genocidaire in July of 1994 enjoy other preferential treatment compared to the rest of the disabled population. Indeed, depending on the severity of the

disability, ex-soldiers can receive between 100,000 and 500,000 RFP in addition to free medical care. MINALAC also enforces other forms of preferential treatment. Only a small percentage of MINALAC's allocated budget reaches individual districts because other vulnerable groups, mainly widows and orphans, are prioritized over PWDs.

Rwanda also has a unique attitude regarding PWDs. Communities tend to be more accepting of people with physical disabilities (because of their close association with the genocide) but negative attitudes towards those with severe intellectual and learning disabilities are quite evident. Kathi, a volunteer who worked at Mediatrice's centre for a year, recounts, "Parents – especially in the villages – see the birth of a disabled child as a punishment from God. Some of the parents bring their child to the centre in order to leave [him there] and never come back."

Finally, poverty -- not the genocide -- is the main cause of many disabilities. All of this ultimately means that a huge percentage of the disabled population in Rwanda is excluded from assistance. Mediatrice's centre, for example, only takes on children born after the genocide and is automatically excluded from many government benefits.

Rwanda's experience with disability is unique compared to that of many other countries. Not many have had to refine their society's disability rights in the shadow of a traumatic genocide. Cambodia, however, is an example of a country that shares a similar past with Rwanda, but has adopted a



non-exclusive disability rights policy. From 1975 to 1979 the Khmer Rouge regime brought about the death of an estimated two million Cambodians. The Disability Action Council (DAC), established by the government in 1997, created a "single classification system for disabilities," according to a report made by the DaR Programme's Cambodia Policy Project. Unlike Rwanda, organizations do not offer preferential treatment to genocide victims. PWDs receive the same treatment regardless of the origin of their disabilities.

Rwanda's recovery since 1994 is remarkable. The tiny country is rapidly becoming a leading model for development throughout the African continent. Many in Rwanda, when asked about their ethnic background, respond by stating: "We are all Rwandan." Whether this rhetoric of unity and non-discrimination will be carried over to the disabled sector remains to be seen.





BY FRANCESCA MITCHELL

*Disabled people living with HIV/AIDS are among the most stigmatized and marginalized of the world's citizens.* As national and international responses to HIV become more organised, persons with disabilities find themselves at the fringes of the movements, often excluded from anti-AIDS initiatives that supposedly aspire to achieve "Access for All."

According to the Africa Campaign on Disability and HIV /AIDS, an estimated 60 million people are currently excluded from the fight against HIV /AIDS simply because they are disabled. Access to HIV testing and treatment is limited due to social and economic obstacles, physical accessibility problems, and above all, prejudicial attitudes and misconceptions. This exclusion extends even to the information – or rather lack thereof - available on disability and HIV/AIDS. In the words of AIDS Free World co-director, Paula Donovan: "There's just a real dearth of data."

PHOTO COURTESY OF IAS/STEVE FORREST/WORKERS' PHOTOS

Inaccurate perceptions of the probability of HIV infection amongst disabled people are widespread. Contrary to popular opinion, seminal research by the World Bank and Yale University shows that disabled individuals have equal or greater exposure to all known risk factors for HIV infection as those without disabilities. Such misconceptions, explains Steven Estey, chair of the International Committee of the Council of Canadians with Disabilities, "go to the very core of the popular 'understanding' of people with disabilities as being asexual and having different kinds of lives to their able-bodied contemporaries."

Whilst it is indeed often assumed that people with disabilities are not as likely to be sexually active, a UNICEF study found that adolescents and adults with physical or mental impairments are just as likely to be sexually active as their non-disabled peers. The study also shows that disabled individuals are just as prone to drug and alcohol use as non-disabled people.

Moreover, a 2004 study found that disabled men and women are more likely to be victims of sexual abuse or rape. This increases their vulnerability to STIs such as HIV, and creates what Dr. Cassandra Phillips, editor of Disability International, calls "a perpetuating cycle." She highlights the popular belief in some developing countries – notably in South Africa – that if a man with HIV/AIDS has sex with a virgin, then he will no longer be HIV positive. Since women with disabilities are com-

monly considered to be asexual, they are presumed to be virgins, and are often raped "for the cure." "Women with disabilities," she explains, "are therefore not only contracting HIV but also spreading it. Often, when women try to report the rape, they are not believed. Some have intellectual disabilities and are thought to be 'imbeciles' or are blind so they cannot de-

scribe their attacker. Charges are very seldom laid against the perpetrators. Nothing stops them from coming back time and time again. Other victims are literally told they are 'lucky to get sex since nobody else would have them because of their disability'."

At present, there are many challenges in sending information, mes-

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PHOTO COURTESY OF IAS/STEVE FORREST/WORKERS' PHOTOS  
OPPORTUNITY LOST: The 2011 International AIDS Society Conference closes in Rome, Italy. Will disabled peoples' rights to access be addressed at the 2012 conference?



PHOTOS COURTESY OF LISA BEAUDRY/IAS  
RENEWED COMMITMENT: Dr. Stephen Lewis speaks at the 2006 International AIDS Conference in Toronto. The Stephen Lewis Foundation recently added disability issues to its list of HIV/AIDS initiatives.



# Truth About HIV/AIDS and Disability

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individuals with HIV/AIDS. A World Bank Study found that disabled persons in many countries frequently report being turned away from clinics, under the popular premise that "disabled people do not get AIDS." Furthermore, HIV messages are often inaccessible to the blind, deaf or those whose disabilities render education less accessible.

Central planning initiatives against HIV/AIDS also often neglect the disabled population.

According to the Africa Campaign on Disability and HIV/AIDS, "despite a growing international attention to disabled people's rights, African governments and AIDS policy makers rarely consider disability issues when formulating their strategic plans." Indeed, UNICEF estimates show that only three percent of disabled people with HIV are able to access the rehabilitation services they need.

Despite this, there are many simple and cost-efficient ways of making prevention and care services more accessible; from entrance ramps to clinics for those with physical impairments, to Braille leaflets and subtitled commercials for blind and deaf people.

Dr. Phillips advocates improvements in educational material for people in disabilities. He states that such resources "need to be in a language and format they

are going to understand. This might mean pictures and not text for those who are illiterate or cognitively impaired". She also stresses that "men need to be informed about gender and disability myths, not only about the use of condoms" in order to dispel the misconceptions so frequently made about disabled persons and HIV/AIDS.

To this end, as the World Bank report suggests, it is fundamental to ensure that people with disabilities are depicted as mem-

bers of the general population in posters, billboards and the media, as well as train-

ing AIDS educators, outreach workers and clinical staff on disability issues. Both the World Bank and the Africa Campaign stress the importance that people with disabilities are themselves considered for these positions, under the universal slogan of the disability rights movement: "nothing about us without us."

It seems that there is an increasingly clear consensus that the exclusion of disabled people from HIV/AIDS prevention and care must end. Given that the disabled population constitutes approximately 10 percent of the world's citizens, it is impossible to successfully address the AIDS crisis without the full inclusion of disabled individuals in all anti-AIDS measures.

Popular advocacy can play an important role in this move

towards inclusion. However, as Mr. Estey explains, "somebody has got to make the decisions to make these measures accessible. It is largely a top-down process, with organisations such as the UN engaging with AIDS Free World and other activists as countries develop their strategies on AIDS, in order to work towards getting disability onto the agenda. The CRPD [Convention on the Rights of Persons with Disabilities] has the potential to be a tremendously useful international instrument here, as it offers a mechanism to compel the discussion of disabilities in the AIDS crisis."

At present, it seems that we are far from true "Access for All", but nevertheless, steps are now finally being taken to change this. Whilst Dr. Phillips believes that any hope for extensive discussion in the near future is "very optimistic", some progress is being made with this marginalized issue.

The Stephen Lewis Foundation recently added a disability lens or perspective to HIV/AIDS globally. In addition to this, Mr. Estey predicts that disability is set to receive a higher profile at the International AIDS Society Conference in Washington D.C. in 2012.

"It is my hope," he explains, "that the Washington DC conference will be a turning point for the discussion of disability and HIV/AIDS. Maybe I will be accused of being overly optimistic, but it certainly doesn't hurt to try to give this issue a higher profile". With this in mind, it seems fair to argue that now is the time for this long-neglected issue to finally come to the fore.

## INTERNATIONAL Support Rather than Segregation:

### *The Destitute Conditions of Institutions for Children with Disabilities*

BY MERCEDES SHARPE

Disabilities are not uncommon among children, affecting an estimated 10 per cent of children worldwide. It is therefore a matter of social justice to integrate these children into society by raising standards of acceptance and encouraging their potential for successful futures. Unfortunately, this is not a simple task. In addition to learning impairments, and both physical and mental health, children with disabilities also face the challenge of transcending social barriers that deny them access to basic health services and infringe on their inherent right to life, survival and development. According to the World Health Organization, an estimated 80 per cent of children with disabilities live in developing countries that cannot sufficiently accommodate them due to inadequate financial resources. When families can no longer provide sufficient support, children with disabilities become subject to strong traditions of institutionalization and even stronger violations against human rights. In turn, they are at risk of neglect, social isolation, and in some cases, human trafficking.

Since foreign funding in developing countries is often misdirected towards the improvement of rehabilitation facilities rather than the provision of services, Mental Disability Rights International (MDRI), an advocacy organization dedicated to the development of disability rights, provides reports that paint a grim picture of the destitute conditions of countless psychiatric institutions, rehabilitative centers and orphanages in nations that cannot afford alternatives. Without adequate laws to protect children with disabilities from arbitrary detention, facilities in Central and Eastern Europe have suffered from rising numbers of chronic-patients and consequent diminishing of resources. These conditions result in the



*Handicap International, supported by the Libyan Ministry of Education, develops mine-risk education programs for children. Benghazi, Libya. (Photo credit: UNICEF/Marta Ramoneda)*

inhumane living environments for patients. Without proper services to assist with eating, for instance, disabled children in Romanian institutions are malnourished and starving due to their inability to feed themselves. This was also witnessed in Serbia, where adolescents were found to weigh less than 30 pounds. In addition, until the release of the MDRI report on Turkey in 2005, children as young as nine years old were being administered electroconvulsive treatment without anesthesia.

These inhumane treatments are not only limited to developing countries. Last year, MDRI released an urgent appeal to the United Nations to inquire into the abusive practices of the Jude Rotenberg Center in Massachusetts, where children are still subjected to electric shocks as a form of punishment. In some areas of the world, children with disabilities are stripped of

any records and disappear into a world of exploitation. For instance, the MDRI report of Mexico in 2010 describes how children with disabilities in the social service system are targeted for trafficking into forced labor or sex slavery. These social injustices can only be remedied by the eradication of ideological and political barriers that segregate children with disabilities from the rest of society.

Around the globe, governments must establish policies and procedures that support these children rather than segregate them. A major priority should be the development and funding of accessible community-based services, such as health clinics and monitored foster care. Societies must adapt to recognize that all children, regardless of physical, learning or mental disabilities, have the same potential and require support to promote healthy futures.



# INTERNATIONAL

## Rebuilding a Disability-Inclusive Haiti

BY ANNIE SHIEL

*There is no question that Haiti's 2010 earthquake was a tremendous tragedy. And yet, its reconstruction has presented a unique opportunity to improve the accessibility of the country's infrastructure to its large and widely overlooked disabled population.*

Prior to the earthquake, living with a disability in Haiti was already fraught with hardship: public buildings and mass transit were often inaccessible to those with disabilities, lacking ramps and wheelchair access, and schools were ill equipped to facilitate disabled students. Poorly resourced hospitals lacked essential rehabilitation programs and technology such as prosthetics and walkers. The earthquake, which destroyed buildings and infrastructure and ravaged the healthcare system, only intensified the problem. According to the International Monetary Fund, in 2008 about 800,000 people—over 8 percent of Haiti's population—were disabled. In the wake of the 2010 earthquake, that number rose to 12 percent, encompassing over 1 million people.

In spite of these discouraging statistics, there are those who see reconstruction as an opportunity to rebuild a more inclusive Haiti. According to architect Carol Pardo Lopez, structural criteria and building codes are only one part of the reconstruction process; accessibility is also vital. She claims that "it is important for Haiti to have an aggressive education campaign to assure these principles are incorporated and implemented. Local engineering and architecture students should have extensive courses on structural design as well as Universal Design principles."

Reconstruction in Haiti is not

only physical; it also represents a valuable opportunity to build a more inclusive and accessible infrastructure, and even address the severe social stigmatization of the disabled population. Hoping to address infrastructure issues is German NGO Christian Blind Missions (CBM), which began working in Haiti in 1976 with the vision of transforming Haiti into a "barrier-free and inclusive society where persons with disabilities have equal rights and opportunities and are empowered to actively participate in sustainable development of their communities." CBM's health care initiative seeks to implement rehabilitative care by training local staff in physiotherapy and occupational therapy, while in education they emphasize the need for universal accessibility in schools as well as special needs education facilities. CBM has also launched an advocacy program with Haiti's State Secretariat for the Inclusion of Persons with Disabilities to insure accessibility in all aspects of reconstruction, including the construction of a national center of inclusion in Port-au-Prince.

Addressing the stigmatization of disability may prove to be more difficult, however. According to Cassandra Phillips, Steven Estey, and Mary Ennis of Disabled Peoples' International (DPI), "myths about disability pose barriers to assistance for persons with disabilities," and "many Haitians view disability as a curse or punishment." This is well illustrated by the Creole slang word for disabled, "cocobai," which implies a sense of worthlessness. What's more, in a low-tech society such as Haiti in which most work is manual, the disabled face wide-scale unemployment and discrimination. One amputee, a Haitian

man named Basaney Simon, expressed fear over losing his job as an airport lawn-care worker in an interview with the Miami Herald following the earthquake. His wife and son had already abandoned him for his inability to provide.

To combat these issues, Phillips, Estey, and Ennis suggest applying a disability lens to all rebuilding policies to avoid omitting the group, making efforts to equalize employment opportunities for the disabled, and educational programs to shatter stereotypes about disabilities. They also offer a more long-term solution, which emphasizes the empowerment of the disabled and their active participation in rebuilding Haiti. In their view, the greatest experts on disabilities are the disabled themselves, and as such they must be consulted on Haiti's reconstruction and accommodation needs.

Disability rights are a crosscutting issue in Haiti's reconstruction, and many NGOs, government agencies, local communities, and foreign donors are working to rebuild infrastructure and improve accessibility to better rehabilitative services and healthcare. Rebuilding will take years but according to researchers Lisa Lezzoni and Laurence Ronan, "one positive legacy of Haiti's earthquake could be the emergence of social attitudes,

public policies, and physical environments that more fully accommodate disability across the lifespan." Should the future show a marked change in the stigmatization and overall inclusivity of Haitian society, it may serve as a valuable example and a precedent for the improvement of global accessibility standards.

# 14 INTERNATIONAL

## The Deaf and Mute Brigade:

### *Fighting Tacitly for Libya and Disability Rights*

BY MORGANE CIOT

*As in many developing nations, particularly those with a chronic history of human rights transgressions, disability rights in Libya have been woefully neglected under the megalomaniac impulses of Dictator Muammar Gaddafi. With the Gaddafi regime effectively neutralized, Libya is now undergoing a period of change; one in which the Arab Spring could very well instill the post-revolutionary government with the political imperative to not only recognize disability rights, but also address them fully and properly as decreed by the United Nations Convention on the Rights of Persons with Disabilities.*

According to post-revolutionary political theory, marginalized groups that play an important role in a revolution are likely to earn sufficient political clout to more actively participate in the public sphere, increasing the likelihood that their needs and interests are met. In Libya, a particular subset of the disabled community has risen to prominence in the war effort. The Deaf and Mute Brigade is a group of 86 men - most of whom are deaf and some of whom are mute - serving in the war effort against Gaddafi, who have had an especially large impact in Misrata, the scene of much of the conflict still taking place.

On the surface, Libya's position on people with disabilities appears positive. Their constitution prohibits discrimination based on disability, and the nation ratified the UN Convention on the Rights of Persons with Disabilities,

a document that insists on legislation providing monetary and social assistance to disabled persons while integrating them into society. The UN Human Rights Council report on the progress of Libya's Jamahiriya - Gaddafi's largely theoretical "state of the masses" - in regards to human rights was deceptively positive. States like Belarus, Kuwait, Brazil, and Bahrain praised Libya for its efforts in providing care for the disabled, and Libya itself claimed it was adhering to the Convention's mandate.

The rhetoric the state had been espousing is certainly not the story the Deaf and Mute Brigade will tell. The 2010 Human Rights Report notes that although there were government-sanctioned organizations that provided disabled people with assistance, state facilities failed to provide "access to employment, education, health care, and other state services...and there was limited access to information and communications".

According to one member of the Deaf and Mute Brigade, employment and education opportunities - not to mention education tailored to the deaf - under Gaddafi were sparse, and they were discriminated against to the point of being feared. Despite the lack of education, in a brilliant example of the linguistic versatility of the brain, the deaf and mute community of Libya developed its own sign language, though it limits their abilities to communicate abroad.

Mohammed Hussein Gabag, the spokesman and translator of the group, has been trying to

organize the deaf community since 1992 but has been consistently thwarted by the Gaddafi regime's chronic fear of inter-citizen solidarity. The revolt was thus the opportunity for a representative portion of Libya's deaf community to organize around the rebel cause. However, they are not driven by thoughts of future political openings. They want to show others that even if they cannot hear or speak, they can still fight. This gave them a confidence rarely encountered in citizens under Gaddafi's rule, especially once other rebel fighters accepted them as legitimate assets. Though fighting sans oral or auditory abilities may be perilous, Khalid Mustafa Sati, the leader of the group and a quasi-hero in Misrata, counters with his belief that the impairment of one sense only fine-tunes the others. Some of the members were even approached by intelligence agencies asking them to spy on potential sign-language-propagated sedition.

The children of some fighters are also members of the brigade, a sign that this founding organization might be something that is propagated into the new regime rather than an interesting anecdote born of circumstance. At the very least, the brigade seems to be the start of an alliance that will perhaps accrue post-revolutionary political leverage, especially under the auspices of a new government. Of course, only time will tell whether or not this will be a catalyst for greater government respect for disabled Libyans.



# Out of Sight, Out of Mind:

*Post-Traumatic Stress Disorder Sufferers Ineligible for Purple Heart Award*

BY DEVIN KESNER

Word association can be dangerous when it comes to recognizing disabilities. To many, the word 'disability' suggests physical impairments such as amputations and blindness. Whether they are unintentionally forgotten or purposefully ignored, unseen, or 'invisible', disabilities often receive far less attention than physical ones. The Americans with Disabilities Act (ADA) of 1990 defines disability as a "physical or mental impairment that substantially limits one or more major life activities, a record of such an impairment, or being regarded as having such an impairment." With an amendment in 2008, legislators intended to make the act even more broad and inclusive so as to cover as many people as possible, even those with unseen disabilities. Canada has yet to pass a similar comprehensive act. While improvements have been made towards acknowledging a variety of disabilities and being legally inclusive of many invisible impairments, this does not necessarily mean that the general population regards these invisible disabilities in the same way.

A relevant topic in regards to invisible disability rights today is Post Traumatic Stress Disorder (PTSD), especially that seen in returning soldiers. The American Psychological Association defines PTSD as "an anxiety disorder that can develop after exposure to a terrifying event or ordeal in which grave physical harm occurred or was threatened." Ac-

ording to the Journal of the American Medical Association (JAMA), in 2010 between 8.5% and 14% of soldiers returning from Iraq and Afghanistan suffered from PTSD, which is higher than the overall population incidence of the disorder. Each case of PTSD varies, but commonly observed symptoms include frequent panic attacks, physical symptoms (i.e. headaches and stomach pain), feelings of mistrust, problems assimilating back into everyday society, substance abuse, relationship problems, depression, and suicidal thoughts. All of these symptoms are essentially invisible, meaning that many would not immediately consider or recognize people suffering from PTSD as disabled.

This apparent failure to recognize PTSD as a disability came to the forefront of public debate in recent years as people in the United States began to fight for soldiers suffering from PTSD to be eligible to receive the prestigious Purple Heart award. The award is restricted to physical injuries, and thus the Pentagon declared that PTSD would remain ineligible. John Fortunato, an American army psychiatrist, states that the excluding PTSD "says this is the wound that isn't worthy," highlighting that in certain contexts some invisible disabilities receive less recognition than physical ones. However, perhaps more importantly, PTSD sufferers are provided with treatment through the Department of Veteran Affairs in the United States. In con-

trast, Canada sees PTSD and other mental disorders caused by war trauma as eligible for Canada's similar Sacrifice Award alongside treatment services offered for soldiers.

While Canada recognizes PTSD on equal footing as physical disabilities in terms of awards, some have expressed frustration with the treatment services provided. In an interview with CBC, Stéphane Grenier, the military's special advisor on operational stress injuries, points out that sufferers of PTSD are "an anomaly for the mainstream mental health experience" and that they "don't fit the mould. They're absorbed as just another person in crisis." Another problem is the restrictive criteria of the few programs that do exist specifically for PTSD.



## Out of Sight, Out of Mind

Many of the facilities will not accept patients who recently attempted suicide, are unstable, or have anger management problems, despite all of these being part of the reason why they need to be treated in the first place.

The societal distinction of invisible disorders from physical disabili-

ties has the potential to downplay the seriousness of an illness just because it is unseen as well as confusion on how to treat these invisible disabilities. Though only symbolic in value, the exclusion of PTSD eligibility for a Purple Heart represents this distinction. Invisible disabilities can be equally, or even more damag-

ing than physical disabilities and yet frequently receive less recognition or acceptance societally and legally. These issues emphasize the importance to remember that just because something is invisible does not mean that it does not exist.

## "Real" budget reform means recognizing disability

BY ANNE PRESTON

*Imagine, for a moment, that every resident in Montréal was simultaneously compacted into a single space.* Now, add all the residents of Vancouver and Toronto. This number of people is not even half of the people living with disabilities in the United States. This translates to over 60 million people receiving some form of Disability Protection and Aid. It is important to note that those with minor disabilities are disqualified from any sort government financial aid.

In the US, disability protection derives from the Americans with Disability Act (ADA), issued in 1990. This act protects those living with disabilities from basic discriminatory acts –prejudices that would include restrictions in housing, employment, building access, and other standard civil rights. Thanks to the ADA, accessibility and autonomy for disabled persons in the US has increased astronomically.

However, despite the ADA, fiscal benefits for the disabled are still lacking. Unlike Canada, the US does not have public health care be-

yond the limited scope of the Medicaid/Medicare programs. Most of the monetary assets regarding disability benefits derive from the public Medicaid program. Medicaid, sadly, struggles to distribute their limited funding and often certain recipient groups are neglected. Chicago resident Henry Williams, who is wheel-chair bound, stated, "We are the first ones to get cut. We disabled people are always being pushed back."

A disability advocacy group called DisAbility Rights Galaxy, based in Seattle, revealed that President Obama has released plans to cut \$3.6 trillion from the federal deficit, removing approximately \$72 billion specifically from disability benefits. Congress has created a selective 'Super Committee' to aid development where the cuts and budgetary alterations of the Medicaid program will occur. As the news program Chicago Talks commented, these potential cuts would result in great strain on independent-based programs, forcing the disabled into already under-staffed nursing homes. This results in a lack of autonomy for the disabled. Earl

Smith, a member of Disabled Americans Want Work Now reflects, "...more are stuck with family members taking care of us or institutions taking care of us."

Nevertheless, should these rights be cut, they won't be lost without a struggle. DisabilityScope.com provided an update regarding their efforts, explaining that great hope was seen on September 21st this year, during a national rally entitled 'MEDICARE MATTERS'. More than 1,000 people, both those with disabilities and allies of, stormed Congress to advocate for their rights. This was the largest gathering of disability advocates since the signing of ADA! Notable participants are representatives from ADAPT, a major grassroots community that is front-lining the protests and providing information regarding the current disability rights situation in the US. They are already publicizing another rally to occur from April 21-26, 2012. ADAPT Member Bob Kafka commented, "...We will be in the nation's capital to be heard in force to let decision-makers know that real budget reform means recognizing that Medicaid matters."



# WOMENS' RIGHTS

## Double Discrimination: Women with Disabilities in East Timor

BY OLIVIA PAONITA



Women at the Shanta Memorial Rehabilitation Centre (SMRC) in Orissa, India receive leadership, advocacy and micro credit program training. (Rehabilitation International)

In some countries, women face social, political, and economic inequalities. Women in this situation who also suffer from disabilities, whether physical or mental, often experience "double discrimination." Such is the case in the Democratic Republic of Timor-Leste, commonly known as East Timor. In general, women with disabilities are extremely vulnerable, and are often victims of rape and other injustices.

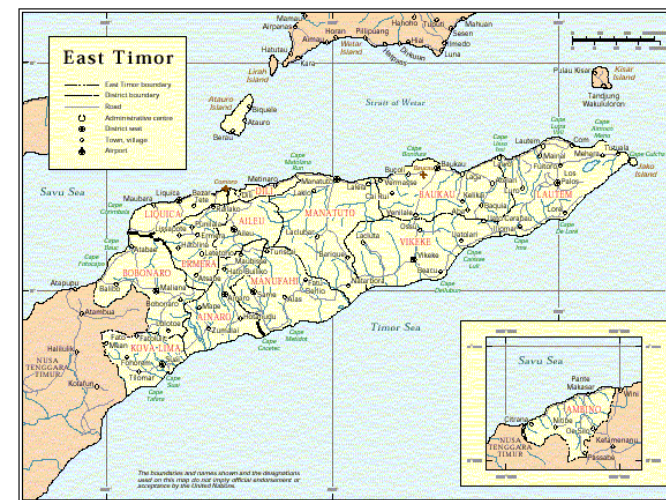
A recent UN report found that East Timorese women with mental disabilities are at high risk of suffering from serious human rights violations. During an interview on Radio Australia, Louis Gentile, the UN rep-

resentative of the High Commissioner for Human Rights in Timor-Leste, expresses the seriousness of this issue. When asked about the constitution of the country, which calls for non-discrimination and equal treatment of disabled persons, he explains that, "it's a question of the resources and the implementation now and we'll wait and hear for the formal response, but I think the response is already there in the strategic development plan of the government and in their policy which is being developed".

The government has been taking some measures in trying to ease this discrimination but their limited resources for health care and rehabil-

itation leave many disabled unaccounted for. One measure that the government is currently implementing is the inclusion of the disabled in voter registration. Gentile explains, "some of the districts have started to advocate and actively register voters with disabilities, so they'd be able to vote in the upcoming presidential and parliamentary elections in 2012. So these are all very positive steps, but most of these things are just beginning and they're under resourced". While this is a progressive measure, it still neglects the other social injustices that exist as a result of the double discrimination of women.

In Uganda, women face similar



struggles. As a result of "the impacts of physical, mental, intellectual and sensor impairments, we are doubly discriminated [against], first as women, and then as disabled," says Beatrice Guzu, Executive Secretary of the National Organization of Women with Disabilities in Uganda. A closer examination of East Timor reveals the similar social conditions of women living with disabilities in the country.

The UN Report of Persons with Disabilities in Timor-Leste shows the extent to which social implications of women's mental disabilities affect their place in society. Although the constitution officially protects those with disabilities from discrimination, this does not stop the double discrimination of women. This UN report explains that "in Timor-Leste, many different words are used to describe persons with disabilities, and some of them are stigmatizing." Also, "some cultural beliefs in Timor-Leste can stigmatize persons with disabilities. For example, persons with disabilities are reportedly perceived by many adherents to traditional belief systems as being punished by spirits because they have broken a cultural taboo."

From April 2010 to March 2011, the UN registered nine cases of rape against women with disabili-

ties; this however, only accounts for the cases reported to the police. Many go unreported due to the fear of incurring further abuses by their offenders. In some cases, mentally disabled women with children of rape have been sterilized without their consent, because their doctors or families felt this was necessary.

The findings of this report bring about several questions, regarding discrimination against people with disabilities, not just in East Timor, but the world at large. What can be done to ensure that women with disabilities have equal opportunities and can seek treatment? How can the stigma and social implications of disabilities be lessened in a society to make sure that these human rights violations will not be continually incurred? What can we do to ensure that women with disabilities are more equally treated and cared for?

For more information on this issue, there are several UN organizations such as Women Watch and Enable devoted to the advancement of women, especially those suffering from disabilities. The Independent Living Institute also provides information about the social programs that exist for women in these situations ([www.independentliving.org](http://www.independentliving.org)) find out how you can get involved!

### From the UN fact sheet on Women Watch

{<http://www.un.org/women-watch/enable/>}

- Girls and women of all ages with any form of disability are generally among the more vulnerable and marginalized of society.

- Less than 5 per cent of children and young persons with disabilities have access to education and training; and girls and young women face significant barriers to participating in social life and development.

- Men with disabilities are almost twice as likely to have jobs than women with disabilities. When women with disabilities work, they often experience unequal hiring and promotion standards, unequal access to training and retraining, unequal access to credit and other productive resources, unequal pay for equal work and occupational segregation, and they rarely participate in economic decision-making.

- Every minute, more than 30 women are seriously injured or disabled during labor... However, those 15 – 50 million women generally go unnoticed

- Women with mental disabilities are particularly vulnerable, while there is limited understanding, in general, of the broad range of risks to mental health to which women are disproportionately susceptible as a result of gender discrimination, violence, poverty, armed conflict, dislocation and other forms of social deprivation.



# INDIGENOUS RIGHTS

## Deaf Inuit Struggle for Language Recognition in the Justice System

BY OLIVIA ZEYDLER

*Imagine communicating at ease, with your family, friends, and local community every day, but the minute you step out, you are speechless and unable to vocalize your rights.* This was the case for Bobby Suwarak, a deaf Inuit who was unable to express himself during a 1999 trial because the court did not recognize his local language, an Inuktitut variant of American Sign Language (ASL). Suwarak faced charges of sexual assault, breaking and entering, and indecently tampering with a dead body.

Under the assumption that all deaf people speak either ASL, or *Langues des Signes Quebécoise* (LSQ), Suwarak was communicating in a sign that was unfamiliar to the court. The Department of Justice Canada commissioned James MacDougall, a McGill University Psychologist, to investigate Inuit Sign Language and create a corresponding interpretation system. MacDougall issued a report in 2000 on providing fair representation for those who are not adequately represented in the justice system.

During this investigation, MacDougall conducted a series of interviews to interpret whether or not indigenous peoples communicated in another form of sign. He located four different indigenous communities, Nunavut, Iqaluit, Pangnirtung, and Rankin Inlet, and used a video camera to conduct the interviews. MacDougall found that the languages were not only easily comprehensible among the deaf members from different areas but within

each community, hearing members recognized the unique form of sign language.

He reiterates that in "the Nunavut case there exists the possibility that the sign language system used by Suwarak may be a more developed indigenous signing system supported by the cultural-linguistic environment". Thus, he suggests that the concept of language is acquired naturally during a person's upbringing, and therefore should not hinder his or her comfort or ability to communicate in their sovereign country's court systems.

In fact, MacDougall found that both deaf and non-deaf members of many indigenous populations communicate using a physical sign language that is unrelated to the common ASL or LSQ. This particular event is reflective of a broader concern that Inuit in northern communities are not properly represented in the Canadian justice system and are often subject to discrimination based on misunderstood cultural differences. Federal Agencies such as the Human Resources and Skills Development Canada focus on protecting the rights of people with disabilities through disability legislation and policy. They also work on the premise that all citizens have the right to a fair trial.

According to the Federal Disability Report (2008), the percentage of disabled Aboriginals is much higher than the overall population of Canada. Disabled Aboriginals face higher drop out, unemployment rates and higher incidences of living in poverty. The Canadian judicial system's failure to accommodate

Suwarak proves that the disabled Aboriginal community needs to be better integrated within the rest of Canada.

Because the local sign language of the Inuit remains unrecognized, MacDougall also found that some suggested sending the deaf members from northern communities to southern Canada to learn ASL or LSQ, and return to their communities once they have mastered the language. MacDougall warns that it is crucial to recognize other forms of sign language; "another important consideration is that virtually every society in the world has its own form of sign language... Most of these languages were developed by hearing people and their utility for deaf members of the community".

The case of Bobby Suwarak shows how deaf Inuit in North communities face a form of "double discrimination": first as a visible minority and secondly as a disabled person. The Canadian justice system struggles to recognize all populations equally. In these instances, intermediaries like James MacDougall are crucial to shed light on the locally-specific disabled culture in such communities.

Seemingly, as a result of cultural and geographical differences, Inuit in northern communities have little interaction with the rest of Canada. This renders communication between two groups very difficult. To better integrate these groups into greater Canadian society, the federal government must promote an inclusive system that surpasses language barriers and recognizes the rights of the disabled peoples.



McGill

## Disability Plan Top Notch in Canada

BY LAUREN REDIES

*McGill's disability plan seems to be working well and is up to par with the rest of the country.* All universities across Canada are required to provide disability services for its students, though types of accommodation vary across the country. McGill's Office for Student with Disabilities (OSD), offers both permanent and temporary services for its students. For students with "permanent disabilities" this includes "mobility and coordination impairments, hearing or vision impairments, chronic physical or mental health problems, and learning disabilities or Attention Deficit Disorder (ADD)." Meanwhile, "temporary disabilities" include "situations of significant, unexpected illness and hospitalization and accidents resulting in temporary mobility problems or broken limbs," which affect academic tasks. OSD services are offered to all students who have paid the respective student services fee and have documented disabilities.

The legal mandate of the McGill Disability Office is to "provide reasonable accommodations within a framework which does not compromise academic objectives and standards, and [its] position within Student Services emphasizes [its] goal of supporting individual student success." Also, the OSD observes principles outlined in the United Nations International Convention on the Rights of Persons with Disabilities by "respect[ing] the dignity and the autonomy of the person; [they] work to prevent discrimination and promote equality of opportunity; we support the en-

hancement of both inclusion and accessibility; [as well as] promote a respect for difference." McGill campus is also very accessible for students in wheelchairs, offering elevators and ramps across campus and in the main libraries. An adapted mobility bus is also provided as well as over a hundred classrooms were renovated last year to make them more disability inclusive.

The University allocates \$400,000 a year to making campus more accessible to students with disabilities and works closely with the academic advising office to make sure students with disabilities are not penalized. McGill also offers note-taking services for students who have difficulty taking adequate notes in class and provides digital voice recorders if the class itself is not recorded. Students with documented learning disabilities such as ADD and dyslexia may also use the services of McGill's learning skills specialist or get tutoring at a discounted cost of \$12.00 an hour from the regular rate of \$15.00. However, due to the MUNACA strike, the tutorial services have unfortunately been cancelled. The OSD is made up of nine staff overall, although currently, five of them are on strike. This has made it difficult to provide services for students, though they have been incredibly patient according to Heather Mole, one of the Access Services Supervisors at the OSD.

In general, McGill's Disability Services are of high standards though there are some issues. For example, the office is literally on a hill. This can make it difficult for students with

physical disabilities to reach and so the office will be moving down by Service Point next year, making it easier to access. Making the classroom more disability inclusive presents another challenge. According to Heather Mole, the office encourages professors to be more proactive by introducing a concept called the universal design for learning (UDL). This is defined as "a set of principles for curriculum development that give all individuals equal opportunities to learn." UDL focuses on customizing learning for all students, rather than a single, one-size-fits-all solution. This approach would not only benefit McGill's disabled students, but others as well.

Overall, McGill's Disability Service holds a very high standing relative to the rest of Canada. They provide aid for both temporary and physical disabilities, classroom support, special skills services, and other resources for its students. Services are even provided for exam anxiety for all McGill students, regardless of temporary or physical disabilities. This involves both individual and group therapy and counseling. McGill's University Policy Concerning the Rights of Students with Disabilities addresses all major issues for its disabled students. It does not discriminate in its admission process based on disability and students are entitled for loans and bursaries if facing a reduced course load. The OSD helps provide a barrier-free environment and helps students with disabilities enjoy full access to university life.



# ACTION CAUSES YOU CAN CELEBRATE

## motionball gains momentum in expansion to Montreal

BY HATTY LIU

An organization on the rise: motionball made a rousing entry onto Montreal's philanthropic scene in September by launching the first Montreal edition of the Marathon of Sport, its nationally celebrated Special Olympics fundraiser. With \$50,000 raised for the Special Olympics Canada Foundation (SOCF), it was the event's most successful debut in any Canadian city.

In its native Toronto, motionball has already embarked on its 10th year of activity. There, it runs three more events alongside the Marathon – a gala, plus community sports matches called Fall Classic and Football Frenzy.

Paul Etherington, co-founder and chairman of motionball, calls the Marathon "our template event." It typifies motionball's mandate that uniquely combines fundraising with



PHOTOS COURTESY OF MOTIONBALL

AT RIGHT: Athletes kick off Montreal's first Marathon of Sport

wishes to reach a position to donate \$1 million annually to the SOCF by 2014.

Montreal's successful first Marathon also spells progress for motionball's awareness-building

objectives. For Etherington, the proof is in the work of Patrick Boivin and François Trudel, young Montreal professionals who brought the Marathon to the city.

"We rely on guys like them, with busy lives, to take time to help. We want a next generation of donors and volunteers [for the SOCF]," Etherington said.

Ultimately, "we want to create long-term awareness for the movement," Etherington said. "[Like] the Paralympics...we want the same level of enthusiasm for the Special Olympics. It is the largest disability movement in the world, but in terms of government funding it is the smallest."



awareness-building.

"Participants form teams of ten. We put one or two Special Olympics athletes on each team...to have interaction between [the athletes] and the community," Etherington said.

In addition to Toronto and Montreal, the Marathon is run in Vancouver, Halifax, Calgary, Ottawa and at Queen's University. The goal is to introduce the event to other universities and to every major Canadian city. Financially, motionball

## Spotlight on Handicap International

BY EMILY LENNON



This non-profit humanitarian organization carries out more than 250 projects in over 60 countries around the world. HI works to empower disabled people in their community through rehabilitation, physical and mental health programs. HI also works on emergency response to natural disasters and humanitarian crises. Most recently they have been working in Haiti after the January 2010 earthquake and in Pakistan, after the floods in August 2010.

One of the organization's top priorities is building more disability-inclusive communities. Their work is based upon the Human Rights for All strategy. Other projects include "Say NO to CLUSTER BOMBS!", "Sports and Disability" and "a Boite Jaune", a battery-recycling campaign.

**What can I do? HI welcomes new volunteers and offers internship and professional positions. Check out the website for further information.**

**www.handicap-international.ca**  
**info@handicap-international.ca**  
**Facebook @ Handicap International Canada**  
**Twitter @HI\_Canada**

## RECENT EVENTS

### Life After Gaddafi: Prospects for Post-War Libya

BY PAULINE CHERY

On October 13, McGill's Political Science and International Development Studies students gathered in the Bronfman Building for a round-table discussion called "Prospects for Post-War Libya." After 42 years of Gaddafi's oppression and a bloody revolution that ousted him, the Libyan people face an enormous task of rebuilding their nation. Whether they will succeed remains an open question.

The talk was hosted by the Atlantic Council of Canada and featured five speakers: Dr. Rex Brynen and Dr. Imad Mansour of McGill; Dr. Miloud Chennoufi from the Canadian Forces College; Mr. Salhin Gheriani, Chair of the Canadian Libyan Council; and Paul Chapin, a former diplomat who served for more than 25 years in the Canadian Department of Foreign Affairs.

One look at Gaddafi's policies is enough to understand why some are pessimistic about Libya's future. Colonel Muammar Gaddafi became the autocratic leader of Libya after staging a military coup in 1969. As Dr. Brynen points out, Gaddafi spent the next 40 years destroying political institutions, banning political parties, and using neopatrimonialism to attract loyalists. Such a legacy can be extremely difficult to reverse.

Libyan society's numerous tribal, regional and religious cleavages that Gaddafi exploited as a means to consolidate his power pose another significant obstacle. Dr. Mansour sees the Berbers, whom Gaddafi had oppressed, as a potential security threat both for Libya and surrounding countries. Currently

Dr. Chennoufi is fearful of certain policies proposed by the National Transition Council (NTC). NTC's president promised more political freedom but wishes to govern with Sharia law.

But there are also signs that promise a more successful transition. Gaddafi's institutional legacy, or lack thereof, leaves the country "with a clean slate," said Dr. Brynen. This could be seen as an advantage compared to countries like Egypt with over-bloated bureaucracies. Dr. Brynen also points out that despite lingering cleavages in Libyan society, the revolution has inspired "a strong sense of national unity." Dr. Mansour mentioned that the international political economy could positively shape Libya's future with the better investment of the country's oil revenues. And Mr. Gheriani was particularly confident in his country's prospects, stating that Libya "has all the necessary ingredients" for democratic government and that he "is very thankful that NATO intervened."

NATO's intervention was in its own right a central point of contention in the talk. NATO, following the United Nations Security Council's Resolution 1973, established a no-fly zone over Libya and targeted Gaddafi's loyalist army tanks. It played an essential role in preventing pro-Gaddafi forces from eliminating the rebel threat. Paul Chapin accepted that



Gaddafi as a young officer. Courtesy of Foreign Policy in Focus.

countries are pragmatic in their foreign policies, but maintains that NATO intervened on moral principle, mainly to avert massive casualties.

However, Dr. Chennoufi rebuffed this argument by pointing to NATO's inaction towards protests in Syria, Yemen and Bahrain. He added that "a moral principle that is only applied once is not a moral principle." He believes that pragmatism drove intervention and that ultimately, the West wants only to create another submissive oil-rich ally.

It is too early to tell precisely what fate awaits Libya. But for Paul Chapin, one thing is certain: "At the end of the day Libyans see it as their revolution. They did it. It's not up to us to tell them how to run their country."



## RECENT EVENTS

## jhr Rhythms for Rights—

Thursday, September 29



A big **thank you** to everyone who came out to the third annual *Rhythms for Rights!* Despite the rainy weather, we managed to fill 3 Minots and dance the night away! Musical acts included Matt Stern, The Howling Gales, Effusion a Cappella and Small Town Treason and McGill music students Guillaume Pilote, Neil Heaton, Blake Hawley and Alan Mackie. All proceeds went to Journalists for Human Rights. See you at next year's Rhythms for Rights!

Top left: Toronto band Small Town Treason performing live. Top right: The Howling Gales. Bottom: McGill Acapella group Effusion.

Photo credit: Kallee Lins

World Press Photo Exhibition 2011  
October 2

BY APARNA NARAYANAN



An injured Afghan woman, World Press Photo of the Year by Jodi Bieber  
To browse more photos: <http://www.worldpressphoto.org/>

*Words may not translate across cultural, geopolitical, or linguistic barriers but photographs do.* They sum up subjects, techniques, and creativity. Photojournalism takes photography to the next level by providing stories, messages, and emotion. Additionally, photojournalists throw in thematic

ingredients such as courage, truth, and determination. As such was the case at World Press Photo Exhibition 2011. For the inattentive reader, photojournalism is an appealing way to follow stories, issues and news throughout the globe. Such photos demand attention.

Founded in 1955, the World Press Photo foundation celebrates pho-

tojournalism through contests, exhibitions, and educational programs held on a global scale. They are based in Amsterdam, the Netherlands, and host annual exhibitions and other events in 45 locations. Montreal hosted this year's event, sponsored by Canon and TNT.

The World Press Photo Exhibition accredits images that convey powerful messages, ideas, or even abstract thought. Some of the memorable and impacting photographs were centered on the Port-au-Prince earthquake, U.S-Mexico border violence, themes of social justice and women's empowerment, crime, and urbanization.

Renowned photojournalists such as Olivier Laban-Matt, Daniel Morel, Guang Niu, Javier Manzano and Massimo Beruti captured images with significant social, cultural, or environmentally relevant content. One particularly memorable series of images called "A Series of Unfortunate Events" courtesy of Michael Wolf, displays street crime in Paris recorded through Google Street View. These images received honorable mentions at World Press Photo, and later stirred up debate on what constitutes "photojournalism," due to its departure in technique and use of the internet.

The winning photo focused on disability survival, taken by photojournalist Jodi Bieber. The photo contest is judged by a jury of professionals in journalism and photography, which changes every year. According to the World Press, over two million people go to a hundred different venues to see these photos.



## UPCOMING

BY SIMONE STEINBERG

## EVENTS

**What: Holocaust Education Series**

When: October 26th to November 6th

Description: A series of programs that include film screenings workshops, discussions, free guided tours of the Montreal Holocaust Memorial, lectures, and even a book launch. The programs are to increase understanding of how human rights violations and genocide are part of our history.

Web: [www.mhmc.com](http://www.mhmc.com) > events**What: Anti-capitalist demonstration against the G20, Canadian Imperialism, and the Conservative Government**

When: Thursday, November 3 at 5:30 PM

Where: Phillips Square (Ste-Catherine W, between Union and Aylmer)

Web: [www.clac-montreal.com](http://www.clac-montreal.com), [info@clac-montreal.net](mailto:info@clac-montreal.net)**What: STAND McGill- Seeking Refuge**

When: November 3, 7:00 - 10:00 PM

Where: Galerie Armatta (3255 St-Jacques)

Description: Join STAND McGill at the Seeking Refuge Conference during the Holocaust Education Series.

More information at the facebook event page.

**What: Strategic Summit: Equity and Diversity at McGill**

When: November 4, 5:00 PM

Where: William Shatner University Centre, Clubs Lounge

More information at [ssmu.mcgill.ca](http://ssmu.mcgill.ca) > events**What: Our Bodies, Our Choice: Reproductive Justice and Systemic Violence (with la Federation du Quebec pour le planning des naissances)**

When: November 8, 6:00 to 8:00 PM

Where: 1500 de Maisonneuve West, Suite 404

Description: A workshop that will highlight both the historic and current state of abortion in Quebec and Canada. Barriers to access

# Speak!

and current attacks on abortion rights will be discussed. Part of the Blue Print Project, a series of workshops run by CKUT and the Centre for Gender Advocacy

**What: Education Beyond Borders Waiting for Superman Film Screening**

When: November 8th, 6:30PM

Where: Education Building, Room 129

Description: "an examination of the crisis of public education in the United States told through multiple stories—from a handful of students and their families whose futures hang in the balance, to the educators and reformers trying to find lasting solutions within a dysfunctional system."

**What: Global Health Conference**

When: November 13th through 15th

Where: Hotel Hilton Bonaventure, 900 de La Gauchetiere W

Description: Sponsored by the Consortium of Universities for Global Health, the Canadian Society for International Health and the Global Health Education Consortium. Topics covered will be infant mortality and micronutrition, global health and media, teaching innovation in global health, and many more.

Web: [www.2011globalhealth.org](http://www.2011globalhealth.org)**What: Women in Conflict with the Law (with the Elizabeth Fry Society)**

When: November 22, 6:00 to 8:00 PM

Where: 1500 de Maisonneuve West, Suite 404

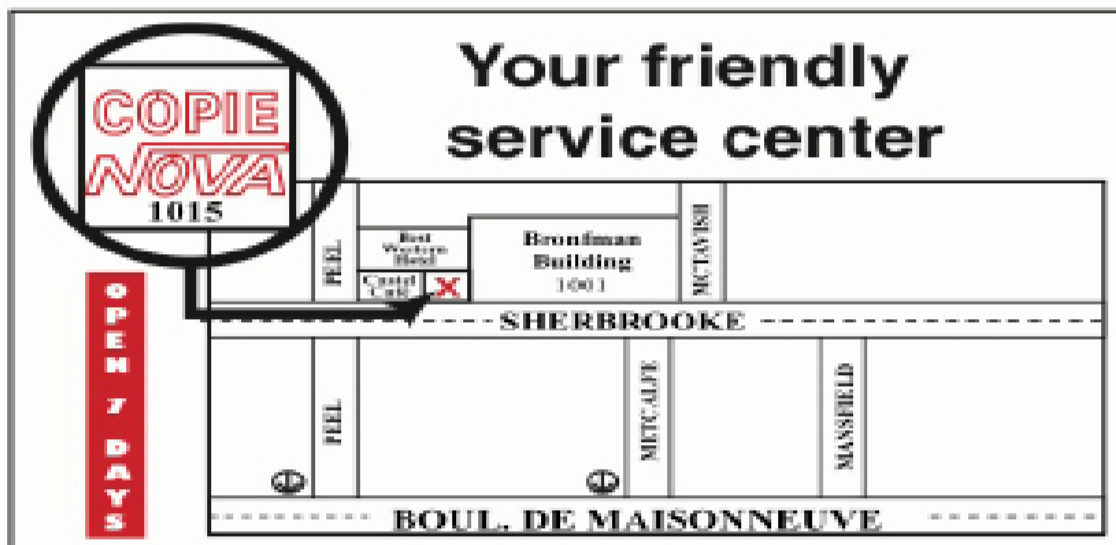
Description: Kim Pate, the Executive Director of the Canadian Association of Elizabeth Fry Societies and Dee LeCompte, the programmer of Prison Radio on Radio CKUT will discuss the right of access to equal opportunities and programs for women in the justice system in another workshop part of the Blue Print Project.

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Correction for Volume 7, Issue 3 April 2011:

"Discrimination in Disguise?: Affirmative Action Policies in the U.S. and India" was written by Aparna Narayanan.