



The voice of blind and partially sighted people in Europe

# Personal Mobility Rights of Blind and Partially Sighted People in Europe: An Analysis of 15 Countries

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# 1. Purpose of the Report

This report presents and analyses the information relating to personal mobility rights contained in the European Blind Union CRPD online database.<sup>1</sup> Such information has the potential to equip campaigners, policy makers and others with valuable data and analysis that will support their efforts to enhance the personal mobility of blind and partially sighted people.

The EBU data will be presented and analysed in Section 3 – and this will constitute the core of this report. Before that, however, the UN and EU policy context will be briefly outlined in Section 2. Finally, a short conclusion will be set out in Section 4.

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<sup>1</sup> <http://www.euroblind.org/convention/>.

## 2. United Nations and European Union Policy Context

### 2.1 United Nations Context

The key human rights focus of initiatives to strengthen and secure the personal mobility rights of disabled people is now the United Nations Convention on the Rights of Persons with Disabilities (CRPD) and, in particular, Article 20. This will therefore be given detailed consideration in this section. Article 20 reads:

States Parties shall take effective measures to ensure personal mobility with the greatest possible independence for persons with disabilities, including by:

- (a) Facilitating the personal mobility of persons with disabilities in the manner and at the time of their choice, and at affordable cost;
- (b) Facilitating access by persons with disabilities to quality mobility aids, devices, assistive technologies and forms of live assistance and intermediaries, including by making them available at affordable cost;
- (c) Providing training in mobility skills to persons with disabilities and to specialist staff working with persons with disabilities;
- (d) Encouraging entities that produce mobility aids, devices and assistive technologies to take into account all aspects of mobility for persons with disabilities.

Although Article 20 of the CRPD is central to the analysis in this report, it would be misleading to read it in isolation. Thus, in the discussion which follows, reference will be made to other CRPD Articles where they have an important cross-cutting role to play in relation to personal mobility. Particular emphasis in this regard will be placed on Articles 26 and 9.

Article 20 requires States Parties to take 'effective measures' to ensure personal mobility for disabled people. The emphasis of the Article is on measures which enhance the opportunities of disabled individuals to have access to the mobility-related equipment, skills and assistance of their choice. Effective personal mobility depends upon access to aids, skills and assistance as well as on accessible systems and infrastructures. Without personal mobility, many life chances and benefits will be denied to disabled people. Their participation in education and employment will be restricted, as will their opportunities to participate in family, political, public and cultural life. Their access to

healthcare and opportunities to participate in community living will be diminished. The Article 20 right to personal mobility is thus fundamental to the right to live independently and be included in the community. It plays a crucial role in empowering people with impairments (including visual impairments) affecting mobility, to achieve independence and exercise the rights and freedoms addressed in many other CRPD Articles.

Despite its importance, Article 20 has to date received surprisingly little attention in the Concluding Observations of the UN Committee on the Rights of Persons with Disabilities (CommRPD). To date, none of the Concluding Observations on EU Member States have explicitly considered Article 20, although it is addressed in the Concluding Observations on the European Union.<sup>2</sup> The Committee there focused on inconsistencies in the practice of different bodies charged with enforcing passenger rights in different EU countries and recommended a strengthening of relevant EU legislation and monitoring.<sup>3</sup>

Article 20 has also been expressly considered in a number of Concluding Observations on non-EU countries – El Salvador,<sup>4</sup> Mongolia,<sup>5</sup> Paraguay,<sup>6</sup> and Gabon.<sup>7</sup> Unlike the Concluding Observations on the EU, issues of enforcement of passenger rights do not feature. A prominent and recurring theme is access to mobility aids and equipment, including by disabled people living in rural environments and by those who are relatively poor.<sup>8</sup> Emphasis is also placed on the steps taken by States to ensure that mobility aids are available (not only to poorer disabled people) and that schemes to subsidise their cost appropriately

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<sup>2</sup> UN Committee on the Rights of Persons with Disabilities, Concluding Observations on the European Union, 14<sup>th</sup> Session, 2015.

<sup>3</sup> Ibid, paras 52 and 53.

<sup>4</sup> UN Committee on the Rights of Persons with Disabilities, Concluding Observations on El Salvador, 10<sup>th</sup> Session, 2013.

<sup>5</sup> UN Committee on the Rights of Persons with Disabilities, Concluding Observations on Mongolia, 13<sup>th</sup> Session, 2015.

<sup>6</sup> UN Committee on the Rights of Persons with Disabilities, Concluding Observations on Mongolia, 9<sup>th</sup> Session, 2013.

<sup>7</sup> UN Committee on the Rights of Persons with Disabilities, Concluding Observations on Gabon, 14<sup>th</sup> Session, 2015.

<sup>8</sup> See eg UN Committee on the Rights of Persons with Disabilities, Concluding Observations on Paraguay, 9<sup>th</sup> Session 2013, para 51; Concluding Observations on El Salvador, above n 4, paras 43 and 44; and on Gabon, above n 7, paras 46 and 47.

incorporate considerations of quality and choice.<sup>9</sup> The fact that Article 20 has not yet received express attention in any Concluding Observations on EU countries may reflect a low prioritisation of it in suggestions from civil society regarding the List of Issues for the countries in question. Shadow reports prioritising issues connected with Article 20 (submitted by the European Blind Union with relevant partner organisations) are likely to raise the profile of Article 20 in Concluding Observations on EU countries.

Article 20 should not be considered in isolation. Successful implementation of the rights to personal mobility which it sets out is inextricably linked to the fulfilment of other articles within the CRPD. Article 26 and Article 9 have particularly close links to Article 20 and therefore merit some attention here.

Article 26 recognises a right to habilitation and rehabilitation. According to it:

“(1) States Parties shall take effective and appropriate measures, including through peer support, to enable persons with disabilities to attain and maintain maximum independence, full physical, mental, social and vocational ability, and full inclusion and participation in all aspects of life. To that end, States Parties shall organize, strengthen and extend comprehensive habilitation and rehabilitation services and programmes, particularly in the areas of health, employment, education and social services ...”

In so far as habilitation and rehabilitation schemes include training in mobility-related skills (such as the use of long canes or guide dogs), there is a clear overlap between Article 26 and Article 20(c) which concerns the provision of “training in mobility skills to persons with disabilities”.

In addition, the effectiveness of any initiative to implement Article 20 will be closely connected with the effectiveness of efforts to enhance the accessibility of public transport systems and street environments. Obligations to take steps to ensure such accessibility are set out in Article 9 of the CRPD.

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<sup>9</sup> See eg Concluding Observations on Mongolia, above n 5, paras 33 and 34; on Paraguay, above n 8, paras 51 and 52; and Gabon, above n 7, paras 46 and 47.

Article 9 is an innovative provision which articulates, for the first time in a UN human rights treaty, a series of accessibility-related obligations and entitlements. It requires States Parties to take

“appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas”.<sup>10</sup>

These measures should apply to “(a) Buildings, roads, transportation and other indoor and outdoor facilities ...”.<sup>11</sup>

The CRPD Committee’s vision of the demands of the accessibility obligation is set out in its General Comment No 2 on Article 9. A range of different types of measure which should be taken by States Parties when implementing Article 9 emerges from the Article itself and General Comment No 2. First, according to Article 9(1), these measures “shall include the identification and elimination of obstacles and barriers to accessibility”.

More specific obligations relating to the accessibility of services and facilities offered to the public (which would include public transport services and street environments) are set out in Article 9(2)(a)-(e). According to Article 9(2)(a), States should

“Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open or provided to the public”.

General Comment No 2 draws attention to the importance of ensuring that such standards are “in accordance with the standards of other States parties in order to ensure interoperability with regard to free movement within the framework of liberty of movement and nationality ...”<sup>12</sup> – a point which has particular relevance to EU countries. Article 9(2) then goes on to provide further examples of steps which States should take to enhance the accessibility of services and facilities open to the public:

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<sup>10</sup> CRPD, Article 9(1).

<sup>11</sup> CRPD, Article 9(1)(a).

<sup>12</sup> UN Committee on the Rights of Persons with Disabilities, General Comment No 2, para 4.

- “(b) Ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities;
- (c) Provide training for stakeholders on accessibility issues facing persons with disabilities;
- (d) Provide in buildings and other facilities open to the public signage in Braille and in easy to read and understand forms; [and]
- (e) Provide forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public”.

In terms of the processes which States will be expected to adopt in order to implement Article 9, some guidance has been provided by the Committee on the Rights of Persons with Disabilities. In its General Comment No 2, it notes that:

“States parties are obliged to ensure that persons with disabilities have access to the existing physical environment, transportation, information and communication and services open to the general public. However, as this obligation is to be implemented gradually, States parties should establish definite time frames and allocate adequate resources for the removal of existing barriers.”<sup>13</sup>

Article 19 of the CRPD, which sets out a right to live independently and be included in the community, also has strong links to Article 9 and Article 20 in this regard. Article 19(b) requires States to ensure that “community services and facilities for the general population are available on an equal basis to persons with disabilities and are responsive to their needs”. Community services and facilities, including those relating to transport and the built environment, will be available to disabled people on an equal basis with others only if they are accessible.

Finally, mention should be made of the general obligation, set out in Article 4(1)(f), relating to universal design. According to this States Parties agree:

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<sup>13</sup> UN Committee on the Rights of Persons with Disabilities, General Comment No 2, para 24.

“To undertake or promote research and development of universally designed goods, services, equipment and facilities, which should require the minimum possible adaptation and the least cost to meet the specific needs of a person with disabilities, to promote their availability and use, and to promote universal design in the development of standards and guidelines.”

## 2.2 European Union Context

The CRPD was ratified by the EU in December 2010. Because of this, the CRPD now operates as an important interpretive aid to EU law and provides powerful strategic orientation for EU law and policy development as well as for other actions. It thus provides the inspiration which underpins the European Commission's European Disability Strategy 2010–2020.<sup>14</sup> This Strategy includes commitments to work with Member States to enhance accessibility for EU citizens with disabilities. 'Accessibility' is one of the eight key areas for action in this Strategy. Under it, the Commission states that it will optimise the accessibility of the physical environment, transportation and information by using legislative and other means. It also indicates that it will foster an EU-wide market for assistive technology and support and

“support and supplement national activities for implementing accessibility and removing existing barriers, and improving the availability and choice of assistive technologies”.<sup>15</sup>

The EU's Initial Report to the CRPD Committee includes details of a range of EU-level activity connected with Article 20 of the CRPD.<sup>16</sup> Reference is made to EU legislation (and associated guidance) requiring live (and trained) assistance to be given by various transport operators to disabled passengers.<sup>17</sup> The Article 20 entry in this report also mentions another type of EU initiative of particular relevance to blind and partially sighted people. The relevant paragraph reads as follows:

“The EU has also taken action to make mobility more affordable and accessible to persons with disabilities. The EU system of customs duty exemptions for certain goods and services from outside the Union covers “articles specially designed for the educational, scientific or cultural advancement” of blind people or other physically or mentally “handicapped” people, provided that they fulfil certain conditions. Long canes for use by blind people are explicitly mentioned. Another directive allows the Member States to

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<sup>14</sup> Communication from the Commission to the European Parliament, the Council, the European Economic and Social committee and the Committee of the Regions European Disability Strategy 2010-2020: a Renewed Commitment to a Barrier-Free Europe, COM(2010) 636 final.

<sup>15</sup> Ibid, section 2.1.1.

<sup>16</sup> European Union, Initial Report of the European Union to the UN Committee in the Rights of Persons with Disabilities (5 June 2014), paras 109-113.

<sup>17</sup> Ibid, paras 109-110.

apply differentiated rates of taxation for energy products and electricity when they are used for or by people with disabilities.”<sup>18</sup>

Finally, the development of the “EU model” of parking badge for disabled people is also noted.<sup>19</sup>

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<sup>18</sup> Ibid, para 112.

<sup>19</sup> Ibid, para 111.

### 3. Analysis of Personal Mobility in the EBU Database

<http://www.euroblind.org/convention/>.

#### 3.1 Introduction

The EBU's online CRPD database was established in 2008 and is added to on an on-going basis. It covers 40 countries and aims to provide information about national laws and policies implementing various CRPD Articles which have particular relevance to blind and partially-sighted people.

The database is organised into different thematic strands reflecting different CRPD provisions. The structure of each of these thematic strands is underpinned by a series of questions, which are designed to address key concerns relevant to blind and partially sighted people. In response to each question, information about the national situation in the various EBU countries is provided by a designated EBU member from the relevant country.

One of the thematic strands included in the EBU database is personal mobility, linked to Article 20 of the CRPD. It is the EBU data collected on this topic that will now be presented and analysed in some detail. It includes information about 15 countries. These, together with the abbreviations which will be used to refer to them in the tables below, are:

Austria – At, Bulgaria – Bg, Croatia – Ct, Denmark – Dk,  
Hungary – Hg, Iceland – Ic, Israel – Is, Italy – It,  
Norway – Nw, Poland – Pl, Serbia – Sb, Slovakia – Sk,  
Slovenia – Sn, Spain – Sp, Switzerland – Sw.

The Article 20 information in the EBU CRPD database is divided into five sections. The first addresses national legislation regarding personal mobility; the second addresses travel aid to facilitate personal mobility; the third addresses locomotion training; the fourth addresses autonomy in daily life; and the fifth addresses public information and professionals. These five elements will be examined in turn in the remainder of this section. Much of the data will be presented in summary tabulated form before it is subjected to a more in-depth analysis. However, the qualitative nature of some of the data does not lend itself to being presented in a table and accordingly no tabulated summary will be provided in such cases.



## 3.2 Legislation

### 3.2.1 Summary Tabulated Data

#### Are legislative measures taken to facilitate the mobility of people with disabilities?<sup>20</sup>

Answer	Countries
Yes	At <sup>21</sup> , Bg, Ct, Dk, Hg, Ic, Is, It, Nw, Pl, Sb, Sk, Sn, Sp, Sw.
No	None
Did not answer	None

#### Are there specific measures for the visually impaired?

Answer	Countries
Yes	At <sup>22</sup> , Bg <sup>23</sup> , Ct, Dk, Ic, Is <sup>24</sup> , It, Nw, Sk, Sp, Sw
No	Hg, Sb, Sn <sup>25</sup>
Did not answer	Pl <sup>26</sup>

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<sup>20</sup> This question is a slight variation of the question used in the database. It was modified to enable the information to be presented in tabulated form.

<sup>21</sup> Austria is currently trying to harmonise its laws in the field of construction, as each region presently has its own regulations.

<sup>22</sup> There are no specific measures regulated by law but a lot of measures, e.g. tactile systems, speaking beacons, are very common.

<sup>23</sup> Bulgaria provides specific measures for the visually impaired only in the big cities.

<sup>24</sup> Israel did not answer whether the announcement of the upcoming bus stop and train station is required by law. They also did not state whether any additional specific measures are in place.

<sup>25</sup> Although there are no specific measures for the visually impaired, legislation states that visually impaired people are to be taken care of when/while they are road-users. In addition, visually impaired are entitled to Parking Card for disabled people.

<sup>26</sup> The fact that the general situation of persons with disabilities is reflected in the Act on Rehabilitation 1997 did not answer whether specific measures are provided. The visually impaired are also entitled to Parking Card for disabled people.

## Are visually impaired Associations involved with the application of specific measures?<sup>27</sup>

Answer	Countries
Yes	At <sup>28</sup> , Bg <sup>29</sup> , Ct <sup>30</sup> , Dk <sup>31</sup> , It <sup>32</sup> , Pl <sup>33</sup> , Sk <sup>34</sup> , Sp <sup>35</sup>
No	Nw <sup>36</sup>
Did not answer	Ic <sup>37</sup> , Is, Hg <sup>38</sup> , Sb, Sn, Sw

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<sup>27</sup> This question is a slight variation of the question used in the database. It was modified to enable the information to be presented in tabulated form.

<sup>28</sup> Visually impaired associations put pressure on the authorities

<sup>29</sup> Visually impaired associations put pressure on the authorities

<sup>30</sup> The Croatian Association of the Blind acts in an advisory capacity in the selection of optimal solutions for the measures ensuring accessibility.

<sup>31</sup> There is no mandatory requirement that user organizations are included in the selection and application of solutions, though they do sometimes choose to get involved.

<sup>32</sup> There are four authorized organisations of blind and partially sighted people which are entrusted with the task of distributing a special railway travel card. DPOs are also consulted by public authorities regarding specific issues.

<sup>33</sup> Although not required to do so by law, visually impaired associations may be invited to take part in consultations.

<sup>34</sup> The Slovak Blind and Partially Sighted Union (UNSS) provides audits of project documentation, participates in final building approvals, counselling and training.

<sup>35</sup> Visually impaired associations are involved in movements which advocate for disabled individuals' rights and equality.

<sup>36</sup> The measures are implemented by law and there is no reference to visually impaired associations.

<sup>37</sup> A group within the Ministry of Justice is responsible for improving conditions for the handicapped.

<sup>38</sup> The Hungarian Federation of the Blind and Partially Sighted checks and comments on the drafts of rules affecting people with disabilities, as well as giving opinions and proposals on appropriate ways of ensuring accessible implementation

## Have they already produced tangible results?

Answer	Countries
Yes	At, Bg, Ct, Dk, Hg, Ic <sup>39</sup> , Is, It, Sk, Sn <sup>40</sup> , Sp <sup>41</sup> , Sw
No	None
Did not answer	Nw, Pl, Sb

## Are there penalties for the non-application of the measures?<sup>42</sup>

Answer	Countries
Yes	At, Is <sup>43</sup> , It, Sp, Sw <sup>44</sup>
No	Bg, Ct, Dk, Hg, Ic, Pl, Sk, Sn,
Did not answer	Nw, Sb

### 3.2.2 Question by Question Analysis

This section of the database contains responses to five questions.

Question A1 reads:

***“What legislative measures are being taken ... to facilitate the mobility of people with disabilities in general? ...”***

From the answers provided, it appears that 14 countries (Austria, Bulgaria, Croatia, Hungary, Iceland, Israel, Italy, Norway, Poland, Serbia, Slovakia, Slovenia, Spain and Switzerland) have mobility-related legislation of some kind which explicitly refers to disabled people or

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<sup>39</sup> Iceland noted that although tangible results have been produced, there still remained a lot of work ahead.

<sup>40</sup> Slovenia noted that despite awareness being gradually raised, there is still some ignorance among sighted people.

<sup>41</sup> Spain noted that although there have been developments in public transport, building construction and in the access to technology, this is not enough.

<sup>42</sup> This question is a slight variation of the question used in the database. It was modified to enable the information to be presented in tabulated form.

<sup>43</sup> Israel noted that although there are penalties, neither the blind nor the organisations for the blind receive any monetary compensation.

<sup>44</sup> Although Switzerland stated that some organisations are entitled to claim, it did not specify the actual penalty.

accessibility requirements. With one or two exceptions, the database entries reveal only a very limited amount of information about the detail of this legislation and the nature of the rights it confers on disabled people. In some instances (eg Croatia and Poland), the emphasis appears to be on the construction of an accessible environment whereas it is clear that, in other instances (eg Hungary), legislative requirements go further and prevent transport providers from discriminating against disabled people; and, in others (eg Italy) it includes provision for reduced fares for disabled passengers. In future versions of the database, it would be helpful if questions could be designed so as to capture this sort of information and thereby make a more nuanced analysis possible.

Question A2 reads:

***“Are there specific measures for visually impaired people? ...”***

The responses to this question clearly indicate that country authors understood the question in different ways. Some responses (eg Hungary and Switzerland) appear to focus on the existence of legal measures, developing answers provided to Question A1. Others (eg Bulgaria and Iceland) appear to focus instead on whether in practice there are any mechanisms included in street or transport design (eg tactile paving, audio-announcements on buses) which enhance accessibility for blind and partially-sighted people. In addition, some of the entries (eg Denmark) appear to suggest that there is both specific provision in law and in practice.

Whilst these differences in approach make detailed analysis difficult, 11 of the responses (Austria, Belgium, Croatia, Denmark, Iceland, Israel, Italy, Norway, Slovakia, Spain and Switzerland) suggest that specific measures for blind and partially-sighted people exist. Of these 11 countries, 7 (Croatia, Denmark, Iceland, Italy, Slovakia, Spain and Switzerland) appear to guarantee such measures through legislation. There are also instances in which legislation provides a measure of discretion. This can be seen in Italian legislation, which states that traffic lights can (but not ‘must’) be fitted with audible signals for the blind.

Personal mobility is also linked to universal design. In this regard, it is interesting to note that Norway and Spain make reference to universal design when considering accessibility and personal mobility. Norway states that universal design is part of the Anti-Discrimination and Accessibility act.

Question A3 reads:

***“How are these measures implemented? Are visually impaired Associations associated with their application? ...”***

This question elicited a more differentiated picture of the state of affairs than did the first two questions discussed above.

7 responses (Austria, Bulgaria, Croatia, Denmark, Italy, Slovakia, Slovenia and Spain) drew attention to the role played by blind and partially sighted people’s organisations in relation to the application of specific measures. The specific role played by such organisations varies from country to country, as does the amount of detail provided by the country authors.

Other countries interpreted the question in a slightly different way. Hungary and Iceland did not focus on the implementation or enforcement of the specific measures. Instead, they referred to the fact that visually impaired associations are involved in the drafting of the legislation and regulations affecting disabled people. A number of other responses were difficult to connect to the question.

Question A4 reads:

***“Have they already produced tangible results?”***

The results from this question were very positive, as the database reveals that this question was answered affirmatively for 12 countries. However, ascertaining the nature of the results achieved is more challenging in light of the fact that many of the answers are extremely brief – eg for Bulgaria, Israel and Slovakia the response is simply ‘yes’.

A number of countries which answered this question in the affirmative (Austria, Croatia, Denmark, Hungary, Italy) did provide fuller responses. However, reference was made in some instances (eg Iceland, Slovenia, Spain and Switzerland) to the fact that much work remains to be done.

Question A5 reads:

***“What are the penalties for non-application of the above measures?”***

The responses provided by 5 countries (Austria, Israel, Italy, Spain and Switzerland) indicate that mechanisms are in place to penalise entities which do not apply the aforementioned measures. Nevertheless, some apparently positive responses (eg for Austria and Israel) are qualified by serious limitations. In the Austrian entry, for example, it is noted that although it is possible to sue the entity and win financial compensation, complaints have not resulted in measures to improve the situation. Conversely, the response for Israel indicates that, although there are penalties which can be imposed on entities in breach, financial compensation or damages are not payable either to visually impaired claimants or DPOs. In the response for Spain it is also noted that, even when regulations and rights are breached, they are rarely challenged. Many responses (eg Bulgaria, Denmark, Hungary, Iceland, Poland, Slovakia and Slovenia) indicated that there are no penalties for breach. The potentially damaging impact of this lack of penalty is, in some instances (eg Croatia), mitigated by a front-loaded approach whereby permission to build cannot be granted unless accessibility requirements have been met.

### 3.3 Travel Aid

#### 3.3.1 Summary Tabulated Data

<b>Aid</b>	<b>Countries</b>
<b>Long cane</b>	At, Bg, Ct, Dk, Hg, Ic, Is, It, Nw, Pl, Sb, Sk, Sn, Sp, Sw
<b>Optical aids</b>	At, Bg, Ct, Ic, Is, Nw, Sk, Sp, Sw
<b>Electronic Aids</b>	At, Bg, Ct, Ic, Nw, Sk, Sp, Sw
<b>GPS</b>	At, Bg, Dk, Ic, It, Nw, Pl, Sb, Sk, Sn, Sp, Sw
<b>Guide Dogs</b>	Dk, Nw, Pl, Sn, Sw
<b>Vocalised paths</b>	It

#### Is training provided during the acquisition of technical aids?

<b>Answer</b>	<b>Countries</b>
<b>Yes</b>	At, Bg, Ct, Dk, Hg, Ic, Is, It, Nw, Sk, Sp, Sw
<b>No</b>	Pl, Sb
<b>Varies depending on region and/or specific aid</b>	Sn <sup>45</sup>
<b>Did not answer</b>	None

#### Is either full or partial funding available?<sup>46</sup>

<b>Answer</b>	<b>Countries</b>
<b>Yes</b>	Bg, Ct, Hg, Ic, It, Nw
<b>No</b>	Pl
<b>Varies depending on region and/or specific aid</b>	At, Dk, Ic, Is, Sb, Sk, Sn, Sp
<b>Did not answer</b>	None

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<sup>45</sup> In Slovenia, although some training is provided for certain technical aids, it is mainly for long white canes. Concerning guide dogs, a blind person has 75 hours of training.

<sup>46</sup> This question is a slight variation on the question used in the database. It was modified to enable the information to be presented in tabulated form.

### Are repairs and maintenance financed?<sup>47</sup>

<b>Answer</b>	<b>Countries</b>
<b>Yes</b>	At, Ct, Dk, Ic, It, Nw, Sk
<b>No</b>	Bg, Hg, Is, Pl, Sb, Sn
<b>Varies depending on region and/or specific aid</b>	None
<b>Did not answer</b>	Sw, Sp

### Is the white cane recognised as a symbol of visual impairment?

<b>Answer</b>	<b>Countries</b>
<b>Yes</b>	At, Ct, Dk, Hg, Ic, Is, It, Nw, Pl, Sb, Sk, Sn, Sp, Sw
<b>No</b>	Bg
<b>Varies depending on region and/or specific aid</b>	None
<b>Did not answer</b>	None

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<sup>47</sup> This question is a slight variation on the question used in the database. It was modified to enable the information to be presented in tabulated form.

Research	Countries
Conducts research	Ct, Dk, Ic, Is, It, Nw <sup>48</sup> , Pl <sup>49</sup> , Sk, Sp, Sw
Does not conduct research	Bg, Sb, Sn
Did not answer whether research is conducted	At, Hg
Research involves visually impaired people	Ct, Dk, Hg, Ic, Is, It, Sk, Sp
Research does not involve visually impaired people	none
Did not answer whether visually impaired people are associated with the research	At, Bg, Nw, Pl, Sb, Sn, Sw

### 3.3.2 Question by Question Analysis

This section of the database contains responses to seven questions.

Question B 6 reads:

***“What are the main technical aids used by visually impaired people in your country for mobility: long cane, optical aids, electronic aids, GPS?”***

According to the database, the technical aids used by visually impaired people vary considerably between countries. All 15 responses stated that white canes are used by visually impaired people. 12 responses (all those apart from Croatia, Israel and Hungary) stated that GPS was used. 9 responses (all except Denmark, Hungary, Italy, Poland, Serbia and Slovenia) stated that optical aids were used. 8 responses (Austria, Bulgaria, Croatia, Iceland, Norway, Slovakia, Spain and Switzerland) stated that electronic devices are used. Surprisingly, only 5 responses (Denmark, Norway, Poland, Slovenia and Switzerland) stated that guide dogs were used. However, it is possible that this small number may be due to the fact that guide dogs were not listed in the suggested possible answers.

7 responses (Austria, Belgium, Iceland, Norway, Slovakia, Spain and Switzerland) stated that visually impaired people in their country used all

<sup>48</sup> Norway has developed several text-to-speak voices.

<sup>49</sup> A Polish GPs navigator has been produced and it meets the needs of blind people.

four of the listed technical aids. 1 response (Croatia) stated that visually impaired people in their country used three of the listed technical aids. 6 responses (Denmark, Israel, Italy, Poland, Serbia and Slovenia) stated that visually impaired people in their country used two of the listed technical aids. Only 1 response (Hungary) stated that visually impaired people in their country used one of the listed technical aids (long cane). Accordingly, the responses appear to indicate considerable inconsistency of approach. However, no obvious explanation for the differences emerges and it is questionable whether the responses reflect the situation on the ground entirely accurately.

Question B 6.1 reads:

***“How are they distributed?”***

The qualitative nature of this data meant that no tabulated summary could be provided.

This question elicited a differentiated picture regarding the manner in which technical aids are distributed from country to country. The responses for 7 countries (Austria, Bulgaria; Croatia, Hungary, Iceland, Israel, Slovenia) indicate that aids are distributed through non-governmental associations for the blind or partially sighted. Thus, in Austria specialised stores run by the regional association for the blind are used; in Bulgaria aids are distributed through UBB; in Croatia it is the Croatian Association of the Blind; in Hungary it is the Hungarian Federation of the Blind and Partially Sighted; in Iceland it is the National Institute for the Blind, Visually Impaired and Deafblind; in Israel it is the Centre for the blind; and in Slovenia it is UBPS.

3 countries (Denmark, Norway and Slovenia) also make use of governmental organisations for distributing technical aids. For instance, the municipality authority in Denmark distributes some relevant resources; in Norway a Government body called NAV takes a lead role; and in Slovenia governmental health institutions take on this role.

In 4 countries (Austria, Croatia, Italy and Slovakia) technical aids are also distributed through private companies. In Austria, technical aids are available in private companies; in Croatia some aids are distributed through companies specialising in technical aids for disabled people; in Italy devices are sold through commercial businesses; and in Slovakia electronic aids are distributed by a private company.

A number of countries did not answer the question in the standard manner. Poland said that a blind person may buy two canes, but did not state from which type of organisation the individual would purchase the aid. Serbia did not reply and Switzerland said that the question cannot be answered as there is no useful data so far. Spain's response<sup>50</sup> indicates that they interpreted the question as asking how each individual is dealt with and how it is decided what they should receive, rather than which organisations distribute the material.

The answers therefore appear to demonstrate that there is a considerable inconsistency of approach between different countries.

Question B 6.2 reads:

***“Is training provided during their acquisition?”***

Although the amount of detail provided by the country authors differed, it is clear that the vast majority of countries provide training during the acquisition of technical aid. This is reflected in the table above.

9 responses (Austria, Bulgaria, Hungary, Iceland, Israel, Norway, Slovakia, Spain, and Italy) indicate that orientation and mobility classes are provided for a fee. The responses for Croatia and Switzerland also reveal that training is provided, but do not indicate whether or not the payment of a fee is required.

The responses for Denmark and Slovenia provide a comprehensive breakdown of the training which blind and partially sighted people are entitled to receive. The Denmark response noted that mobility training is declining and decreasing in quality due to a lack of understanding on the part of relevant professionals. The Slovenia response noted that the amount of training an individual would receive depended on the specific piece of equipment.

The only 2 countries which failed to answer this question in the affirmative were Poland and Serbia.

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<sup>50</sup> “After analysing each individual case, special attention is paid to the problems being faced by users, focusing their claims on obtaining the required aids.”

Question B 6.3 reads:

***“How are they funded in their acquisition?”***

The information provided in response to this question by the 15 country authors demonstrates that a wide range of approaches are taken towards funding the devices. In 3 responses, (Croatia, Hungary and Norway) those in need may have their assistive devices fully funded through an insurance system or by public funding. However, the Austrian author notes that the availability and amount of funding varies by region. Furthermore, 7 countries (Denmark, Iceland, Italy, Serbia, Slovakia, Slovenia and Switzerland) acknowledge that the availability and amount of funding varies depending on the type of assistive device. 3 other countries (Bulgaria, Israel<sup>51</sup> and Spain) note that an organisation for the blind and partially sighted sells them at a reduced price.

The Polish entry is the only one to state that no funding is provided. Accordingly, in Poland the lack of affordable assistive devices to visually impaired persons is a serious concern.

Question B 6.4 reads:

***How are repairs and maintenance financed?***

This question also yielded a diverse range of responses. The responses for Austria and Denmark note that maintenance is subsidised. In a similar vein, for 4 of the countries (Croatia, Iceland, Norway and Slovakia) it is reported that maintenance is paid for through public funding. The Slovenia and Switzerland entries also state that the UBPS provides a replacement if the mobility cane is broken or damaged. However, entries for 5 countries (Bulgaria, Hungary, Poland, Serbia and Slovenia) draw attention to the fact that maintenance is at the cost of the individuals. The Israel entry also states that maintenance is at the cost of the individual after the first year warranty expires.

The responses for Italy and Spain are more ambiguous. Although the Italy entry states that maintenance is organised in accordance with the current commercial maintenance and repair regulations, it does not explain what this entails. The entry for Spain notes that repairs and maintenance are managed by users or through a specialised centre.

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<sup>51</sup> In Israel, canes are subsidised at 90% of the retail price.

Question B 6.5 reads:

***“Is the white cane recognised as a symbol of visual impairment? If yes, specify the conditions related to its attribution, sanctions in cases of abuse, specific provisions regarding its use.”***

As regards the first aspect of this question, the entries for all but one country (Bulgaria) acknowledge that the white cane is recognised as a symbol of visual impairment.

Regarding the second aspect, the entries for 3 countries (Croatia, Iceland and Slovenia) note that attribution of the white cane depends on proof of visual impairment that is classified as blindness by the standards of the WHO. However, the vast majority of responses (Austria, Bulgaria, Denmark, Israel, Italy, Norway, Poland, Slovakia, Spain and Switzerland) are silent about the conditions relating to its attribution.

As regards sanctions, the responses reveal a consistently unfavourable pattern. 7 countries (Croatia, Denmark, Hungary, Iceland, Norway, Serbia and Slovakia) note that there are no sanctions or enforcement mechanisms in cases of abuse, whilst the entries for the remaining 8 countries (Austria, Bulgaria, Israel, Italy, Poland, Slovenia, Spain and Switzerland) do not mention the sanctions in cases of abuse. This seems to suggest that, in cases of abuse, blind and partially sighted people often have no recourse to enforcement mechanisms.

Question B 7 reads:

***“Is research conducted in your country to develop new assistive devices? How are visually impaired people associated with this research?”***

This question is centrally concerned with the requirement set out in Article 4(g) of the CRPD which requires state parties to

“undertake or promote research and development of, and to promote the availability and use of new technologies, including information and communications technologies, mobility aids, devices and assistive technologies, suitable for persons with disabilities...”.

Once again, this question elicited a fragmented pattern of responses. According to the responses provided, relevant research is conducted in 7 countries (Croatia, Iceland, Israel, Italy, Slovakia, Spain and Switzerland), but not in 3 others (Bulgaria, Serbia and Slovenia). The responses for a further 2 (Austria and Hungary) did not answer the question.

The Denmark entry highlights that although structured and authorised research is not conducted, inventors do create new solutions. Although the Norway and Poland entries do not answer the question in the standard form, they reveal that several Norwegian text-to-speech voices have been developed and that a Polish GPS navigator to meet the needs of blind people has been developed.

The responses to the second part of the question expressly indicate that 8 countries (Croatia, Denmark, Hungary, Iceland, Israel, Italy, Slovakia and Spain) take steps to involve visually impaired people in research – although the nature of this involvement varies from country to country. For example, in Croatia, associations of PWDs are in the role of partners. In Denmark, inventors often contact disabled people's organisations to ask for advice and to test the prototype. Likewise, visually impaired people and their organisations in Slovenia participate in the identification of areas where research is needed, in testing and sometimes also in development. In Hungary, the opinion of the Federation is sought after a piece of equipment has been invented. In Iceland and Israel, some research projects are led by blind or visually impaired people. This is similar to Italy and Spain, in which research projects are carried out with the participation of visually impaired people's associations.

Although none of the entries explicitly state that visually impaired people are not associated with research, 7 countries (Austria, Bulgaria, Norway, Poland, Serbia, Slovenia and Switzerland) give no indication of their involvement.

### 3.4 Locomotion Training

#### 3.4.1 Summary Tabulated Data

#### Is the mobility instructors' training recognized by an official certificate?

Answer	Countries
Yes	It, Sk <sup>52</sup> , Sn <sup>53</sup> , Sw
No	At, Ct, Ic, Is, PL, Sb, Sp
Did not answer	Bg, Hg, Nw, Dk

#### 3.4.2 Question by Question Analysis

Question C 8 reads:

***“How are visually impaired people ... trained in mobility?”***

The qualitative nature of this data meant that no tabulated summary could be provided.

This question was answered in slightly different ways by different country authors. Nevertheless, the responses reveal that different methods of training are used and that each country provides at least some mobility training for visually impaired people.

In the responses for 8 countries (Austria, Iceland, Italy, Norway, Poland, Slovakia, Slovenia and Switzerland) orientation and mobility training courses are provided by service providers and national Associations of the Blind. Danish, Hungarian and Polish Associations of the Blind are also reported to run centres for newly blind people and courses through which participants can learn basic mobility skills. UNSS in Slovakia is also reported to provide mobility training to persons of all ages on a one-to-one basis; and visually impaired people in Bulgaria are entitled to access day rehabilitation centres, whilst Croatia trains visually impaired

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<sup>52</sup> In Slovakia, the training of mobility instructors is provided by UNSS based on certificate of the Ministry of labour, social affairs and family

<sup>53</sup> The students are awarded a BA degree, which is nationally recognised by Slovenian Quality Assurance Agency for Higher Education (SQAA).

people in the Centre for the blind as well as through CAB member associations. In Israel, blind adults and older people are taught at home by qualified rehabilitation teachers. In Spain, the mobility and orientation program is carried out by a rehabilitation technician.

The responses indicate that in Denmark, Israel and Serbia, children are trained in schools by special consultants and instructors. Similarly, Bulgaria, Hungary, Poland, Slovakia, Slovenia and Switzerland provide special schools to train blind children in mobility. In Spain, it is reported that personal autonomy has been established as a specific area within the school curriculum.

Question C 9 reads:

***“What is the training undertaken by mobility instructors? Is it recognised by an official certificate? If yes, specify briefly the content of the training.”***

Responses indicate that in 10 countries (Austria, Bulgaria, Iceland, Israel, Norway, Poland, Serbia, Slovenia, Spain and Switzerland) there is a specific formal programme for training mobility instructors. In 2 of these countries (Poland and Slovenia), mobility instructors train in graduate or post-graduate university courses. However, in 4 countries (Croatia, Hungary, Italy and Slovakia) no formal systematic approach is in place. Although Italy does not provide regular training courses, a series of courses have been put in place by different local authorities. Furthermore, both Slovakia and The Hungarian National Institution for Blind People provide on-the-job training for mobility instructors.

Of the 10 entries which mention a specific formal programme, the entry for Italy gives the most detailed account of the programme's content. According to this, the training includes general training, teaching activities aimed at the acquisition of skills in the fields of pedagogy, teaching-methodologies, psychology, health-care and hygiene related to the processes of training, education and rehabilitation of visually impaired people. It also includes specialised training in orientation and mobility, which consists of individual lessons with simulated visual impairment and teach-back activities. Additionally, it involves direct and indirect practical training, including direct instruction to people with visual impairments.

The Slovenia entry also states that its national programme offers basic theoretical knowledge and understanding of the areas of fundamental education and rehabilitation of blind and partially sighted people. Students also gain practical experience and competences for testing and assessing the specific needs of visually impaired people as well as the ability to plan, implement and evaluate the programme. The entry for Norway states that additional training in mobility is provided, and mobility instructors in Serbia have training only in the faculty for special education and rehabilitation

The responses indicate that official training certificates are provided in 4 countries (Italy, Slovakia, Slovenia and Switzerland); but not in 5 countries (Croatia, Israel, Poland, Serbia and Spain). Entries for 2 countries (Austria and Iceland) state that an official certificate is not provided due to the fact that the training to become a mobility instructor is undertaken in a different country. Similarly, the certificate provided in Italy is only recognised in the region where it is issued and is not recognised by the State. Finally, entries for 4 countries (Bulgaria, Denmark, Hungary and Norway) do not state whether an official certificate is provided.

### 3.5 Autonomy in Daily Life

#### 3.5.1 Summary Tabulated Data

#### Are visually impaired people trained to be autonomous in daily life?<sup>54</sup>

Answer	Countries
Yes	At, Bg, Ct <sup>55</sup> , Dk <sup>56</sup> , Ic, Is, It <sup>57</sup> , Hg, Nw, PL <sup>58</sup> , Sk, Sn <sup>59</sup> , Sp, Sw
No	Sb
Did not answer	None

#### Is there specific support?

Answer	Countries
Yes	Bg, Ct, Ic, Is, It, Pl, Sk, Sn, Sp, Sw
No	None
Did not answer	At, Dk, Hg, Nw, Sb

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<sup>54</sup> This question is a slight variation of the question used in the database. It was modified to enable the information to be presented in tabulated form.

<sup>55</sup> Individuals are trained within projects run by CAB member associations.

<sup>56</sup> Individuals may be offered training at the local resource centre if newly blind. They may also be offered training at the DAB training centre. Also the Institute for the Blind offers training to persons that are deemed to need more intensive instruction.

<sup>57</sup> Special dedicated courses are organised by the I.Ri.Fo.R and by UICI branches.

<sup>58</sup> Organisations working for persons with a visual impairment run courses in daily activities.

<sup>59</sup> UBPS, together with regional associations, conduct several programmes services and activities. After initial training, the visually impaired person receives a visit by an assistant who helps them to overcome some difficulties in daily life at their homes.

**Does your country have training for instructors in autonomy?**

<b>Answer</b>	<b>Countries</b>
<b>Yes</b>	It, Pl, Sk, Sp, Sw
<b>No</b>	At, Bg, Ct, Dk, Ic, Is, Sn
<b>Did not answer</b>	Hg, Nw, Sb

### 3.5.2 Question by Question Analysis

Question D 10 reads:

***“How are visually impaired people ... trained to be autonomous in daily life?”***

With the exception of Serbia, all responses indicate that there is training for visually impaired people in independent living skills. However, whilst they name the organisation responsible for training, only 2 responses (Slovenia and Spain) provide any further information.

The Slovakia entry states that visually impaired people receive visits from an assistant who helps them overcome difficulties in daily life at their homes; and the Spain entry states that the rehabilitation program may be carried out outdoors both within the user's own environment and within unknown spaces.

Of the 14 entries which indicate that visually impaired people are trained in independent living skills, 5 (Belgium, Hungary, Ireland, Norway and Slovakia) state that visually impaired people receive such training in rehabilitation centres. 7 entries (Croatia, Denmark, Italy, Poland, Slovakia, Slovenia and Spain) state that visually impaired individuals are trained through programmes and courses run by a variety of organisations at different training centres. A further 2 entries (Israel and Norway) note that this training involves instructors entering the homes of newly blind people.

In Poland and Slovakia, it is reported that lessons within special schools are a means through which visually impaired children are prepared to be autonomous in daily life. Finally, although the Switzerland entry states that individuals receive training in low vision and daily life practical skills, no further details are provided.

Question D 11 reads:

***“Is there specific support? If so by which professionals is it provided and in what context? What is the training of these professionals?”***

Many of the answers provided to this question were extremely brief and some were incomplete or missing altogether. This may be due to lack of clarity about what information the question was seeking.

Entries for 8 countries (Bulgaria<sup>60</sup>, Croatia, Iceland<sup>61</sup>, Israel<sup>62</sup>, Italy<sup>63</sup>, Slovakia, Spain<sup>64</sup> and Switzerland<sup>65</sup>) note that specific support is provided. Although the Poland entry indicates that specific support is not guaranteed by law, there are reported to be local initiatives which foster relevant activity by disabled people. 5 responses (Austria, Denmark, Hungary, Norway and Serbia) do not specify whether specific support is provided. The Slovenia entry states that whether individuals receive further training depends on their progression during the basic visual awareness training. In none of the entries are details of the nature of the support set out.

In response to the second part of this question, only 4 entries (Denmark<sup>66</sup>, Slovakia<sup>67</sup>, Slovenia<sup>68</sup> and Spain<sup>69</sup>) provide information on the training of professionals. 1 entry (Austria) expressly notes that professionals are not trained. Although entries for 3 countries (Croatia<sup>70</sup>, Iceland<sup>71</sup> and Switzerland) explain which professionals provide the training, none of them specify what training is received by them.

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<sup>60</sup> There are national programs for personal social assistants and home helpers.

<sup>61</sup> The Center has professionals that provide services based on individual needs and in the environment the client requests.

<sup>62</sup> The Center for the Blind provides computer training courses as well as other services.

<sup>63</sup> Support is given by instructors in autonomy. Training is carried out in private facilities. The training includes • A General Training Module activities aimed at the acquisition of skills and competencies in the fields of pedagogy, teaching-methodologies, psychology, health-care and hygiene related to the processes of training, education, re-education, rehabilitation of visually impaired people with or without additional disabilities; A Specialised Training in Independent Living Module structured in individual lessons with simulated visual impairment, and teach-back activities

<sup>64</sup> Staff, families and volunteers go to the individual's homes and help them to manage their tasks.

<sup>65</sup> The special support is called "life-practical skills".

<sup>66</sup> The professionals are trained at the Institute for the blind or by peer instructors.

<sup>67</sup> Slovakia trains professionals based on certificate provided by Ministry of labour, social affairs and family.

<sup>68</sup> The assistant get basic visual awareness training, but further training depends on their learning through practice with working with the individual one-to-one.

<sup>69</sup> The training professionals receive focuses on specific issues linked to visual disabilities: interaction, accompanying and so on.

<sup>70</sup> Specific support is provided in the mentioned Department; from professionals and experts in the field of special education teaching, psychology, social work etc.

<sup>71</sup> The Center has professionals such as teachers, mobility officers, a social worker and a physiologist that provide services.

Question D 12 reads:

***“Does your country have training for instructors in autonomy?  
Is there a certificate recognised by the State?”***

The responses provided by 8 countries (Austria, Bulgaria, Croatia, Denmark, Iceland, Israel, Serbia and Slovenia) indicate that there is no training for instructors in ‘autonomy’. It is unclear whether answers to this question were affected by misunderstanding or lack of clarity about the information the question is seeking. It is, for instance, perhaps not obvious whether ‘autonomy’ indicates ‘independent living’ skills.

Entries for 5 countries (Hungary, Italy, Poland, Slovakia and Switzerland) provide affirmative answers to this question. The entry for Hungary notes that there is a ‘Special Rehabilitation Educator’. The Italy entry notes that although training for instructors in autonomy is not provided on a regular basis, a series of courses have been put in place since 1992 by different entities<sup>72</sup>. The Poland entry states that certain teachers are trained to support the autonomy of visually impaired people in graduate or post-graduate university courses. Finally, Slovakia and Switzerland responses note that training for instructors in autonomy is provided.

Entries for 7 countries (Austria, Belgium, Israel, Poland, Serbia, Slovenia and Spain) draw attention to the fact that there is no certificate recognised by the state. In Slovakia<sup>73</sup> and Switzerland, however, the training is recognised by an official certificate.

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<sup>72</sup> These entities include I.Ri.Fo.R and the Helen Keller Regional Centre of the Italian Union of the Blind and Partially Sighted.

<sup>73</sup> Training is based on a certificate of Ministry of labour, social affairs and family.

### 3.6 Public Information and Professionals

#### 3.6.1 Summary Tabulated Data

**Is the public informed of the mobility needs of visually impaired people?**

Answer	Countries
Yes	At, Bg, Ct, Hg, Ic, Is, It, Nw, Pl, Sb, Sk, Sn, Sp, Sw
No	Dk
Did not answer	None

**Do professionals who interact with visually impaired people have any specific training concerning visual impairment?**

Answer	Countries
Yes	Bg, Ct, Dk, Hg, Is, It, Sp, Sw
No	Ic, Nw
Depends on the field in question	At, Pl, Sb, Sk, Sn
Did not answer	None

#### 3.6.2 Question by Question Analysis

Question E 13 reads:

***“Is the public informed of the mobility needs of visually impaired people? If yes, by whom and how.”***

As depicted in the above table, responses to this question indicate that in each country apart from Denmark there are mechanisms to inform the public of the mobility needs of visually impaired people. The responses also reveal a wide range of approaches to how this happens. For example, of the 14 entries which indicate that the public is informed, 6 (Bulgaria, Italy, Poland, Slovakia, Spain and Switzerland) note that they

use campaigns; 4 use media channels (Croatia<sup>74</sup>, Hungary, Serbia, Slovakia); 3 (Croatia<sup>75</sup>, Israel<sup>76</sup> and Italy<sup>77</sup>) have designated dates as blind days; 2 (Hungary and Norway) put on courses at school; 2 use presentations (Croatia and Slovakia); 2 (Italy and Slovakia) make use of press conferences; and 3 (Italy<sup>78</sup>, Slovenia<sup>79</sup> and Spain) host informative activities.

Entries for 5 countries (Bulgaria<sup>80</sup>, Norway, Poland, Serbia and Switzerland) suggest that just one method of awareness-raising is used. Entries for 7 other countries, however, (Croatia, Hungary, Iceland, Italy, Slovakia, Slovenia and Spain) suggest that a multi-faceted approach is adopted.

The responses contained little information about the effectiveness or impact of awareness-raising initiatives. The Austrian entry, however, notes that, despite public information initiatives, there is still a problematic lack of awareness of the mobility needs of blind and partially sighted people.

Question E 14 reads:

***“Do professionals who interact with visually impaired people have any specific training or awareness training concerning visual impairment?”***

This question was answered in the affirmative in relation to 9 countries (Bulgaria, Croatia, Denmark, Hungary, Israel, Italy<sup>81</sup>, Slovakia, Spain<sup>82</sup> and Switzerland). Reference was made by 3 entries (Austria, Serbia,

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<sup>74</sup> This includes television, radio, newspapers and the internet.

<sup>75</sup> White Cane Day, 15th October.

<sup>76</sup> June 6 was blind day throughout Israel.

<sup>77</sup> Guide dog day.

<sup>78</sup> Special events including dedicated sports events.

<sup>79</sup> Slovenian organisations host events including “Black Bar” and “Breakfast in the Darkness” for the public to learn about visually impaired people.

<sup>80</sup> Bulgaria informs the public by means of campaigns.

<sup>81</sup> Training is provided for staff in railways and airports, especially for staff in charge of assistance to persons with disabilities. Awareness training is also provided in the fields of transport, healthcare, social protection, education, culture and sports.

<sup>82</sup> Training is provided for professionals in schools, care centres for the elderly, hospitals, transport companies, the hotel sector and other service sectors.

and Slovakia<sup>83</sup>) to the fact that whether professionals have any specific training depends on the particular field of the professional in question. More specificity on this would therefore be helpful in future versions of the database.

Entries for 2 countries (Iceland and Norway) state that specific training is not provided; and the Slovenia entry notes that very few professionals have specific training concerning visual impairment. The Poland entry indicates that generally responsibility for training tends to be placed on companies, because specific training is not mandatory but merely optional.

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<sup>83</sup> In Slovakia, training occurs mainly for special teachers and exceptionally for social workers.

## 4. Conclusion

In conclusion, as noted in the 2014 analysis of its entries on political participation, the EBU CRPD Database has the potential to play an extremely important role. Its focus on impairment-specific information makes it possible to focus on issues of particular significance to the realisation of CRPD rights for blind and partially-sighted people. Personal mobility, the subject of Article 20 of the CRPD, is a clear example of an issue which raises quite specific types of issue for people with visual impairments.

An analysis of the Concluding Observations of the CRPD Committee suggests that, to date, Article 20 issues have had a surprisingly low profile in European countries. The EBU CRPD Database should provide a rich source of data that could be used as the basis of shadow reports by EBU and its member organisations on this, as well as on other matters.

In order to fulfil its potential, however, it is suggested that the Database would benefit from some reworking. More targeted specific questions, organised around indicators of structure, process and outcome, would be likely to yield more useable data and information. Currently, the open-textured nature of many of the questions renders the task of analysing the responses somewhat problematic.



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