



# Rehabilitation International

## News!

A GLOBAL ADVOCATE FOR REHABILITATION, INCLUSION AND HUMAN RIGHTS

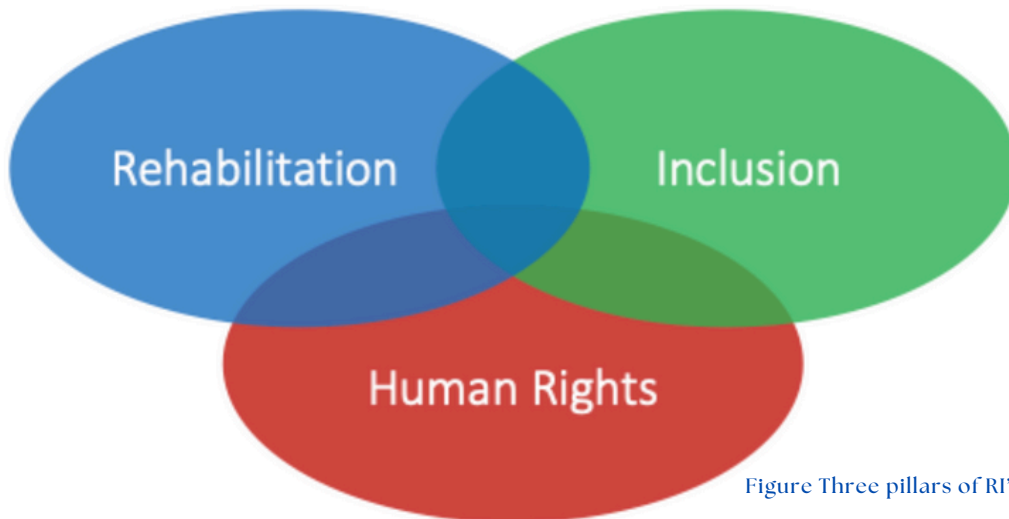


Figure Three pillars of RI's advocacy

## Editorial

**Dear Members of Rehabilitation International,  
Friends and Partners of Rehabilitation International,  
And All Interested Readers,**

Welcome to the January 2025 edition of the Rehabilitation International Newsletter!

In this issue, we bring you several key highlights:

- A 100-day **Interim Report from the RI President**, outlining advocacy principles, commissions, committees, task forces, the Youth Forum, membership updates, and more.
- A report on a project aimed at **promoting inclusive education in Zambia**, titled "Promoting Quality Inclusive Education Practices in Zambia's Schools," under the RI regional framework.
- In our Science Corner, we feature research published in Lancet Psychiatry on "**A Hidden Crisis: The Global Burden of Autism and the Need for Lifelong Support.**"
- Lastly, we continue to invite your contributions to the RI Newsletter—your insights and stories help strengthen our shared mission.

We sincerely thank all contributors for making this issue possible and our readers for their ongoing support and engagement.

Let's continue working together to advance Rehabilitation International's mission, creating a more inclusive and opportunity-filled world for everyone.

Warm regards,  
Hannover, January 2025

**RI President & RI Media**

## In this RI News!

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## Message from RI President - Interim Report - 1



Ladies and gentlemen,

In many countries around the world, it is a well-established custom to review the activities of a new government or board after 100 days since election. The new Executive Committee (EC) of Rehabilitation International (RI) was elected by the Governing Assembly (GA) on September 24, 2024. Therefore, it is now the right time to review the initial activities. Of course, this is not a report on results or success, however, as an interim report, it represents the “direction” of work. As 100 days are not a long period of time, aspects that could not be addressed yet must be taken into account, too.

### Rethinking RI's advocacy principles

Based on the Constitution, one of main areas of work is to advocate for the rights of persons with disability at a global level. This is in line with RI's history as one of the initiators of the UN- Convention on the Rights of Persons with Disabilities (UN-CRPD) which still is the most important and strong guiding document

Even though, the principles of the UN-CRPD are widely accepted, there are a number of open questions, and many discussions are going on. One of it comes from the shift of or mind set to understand that disability is not an attribute of a person but occurs from the negative interaction of a persons with the environment. This includes the replacement of the “medical model” to a “social model” of disability. In this context, rehabilitation often was described as purely medical which in fact does not reflect the modern developments of rehabilitation as a health strategy. As main strategy to overcome disability, inclusion is in the foreground. With progress in this discussion, it seems important to rethink the concepts of rehabilitation and inclusion as well as to ref-



Figure 1. Three pillars of RI's advocacy

lect the interaction and synergies of both approaches. In short, RI's advocacy is based on three pillars (Fig. 1):

1. **Rehabilitation.** Rehabilitation is a strategy to enable persons with disabilities and persons at risk of disability to achieve and maintain optimal functioning in interaction with the environment[1]. Rehabilitation always starts from the needs of the individual and must be tailored according to these needs. Rehabilitation as a strategy is well defined in the health sector, however, the principle of empowerment of individuals also is applicable for other sectors, such as education, work and employment, societal and religious participation, justice and politics, leisure and sports.
2. **Inclusion.** Inclusion is a principle that guarantees everyone has the opportunity to be involved in all areas of life without barriers. Inclusion is an obligation of every society including the international community, national societies and all smaller units of societal life, like schools, health services, transport and mobility, economy, justice and many others. It includes physical accessibility, orientation, access to health and other services but even more important, societal attitudes, non-discrimination and others.

## Message from RI President - Interim Report - 2

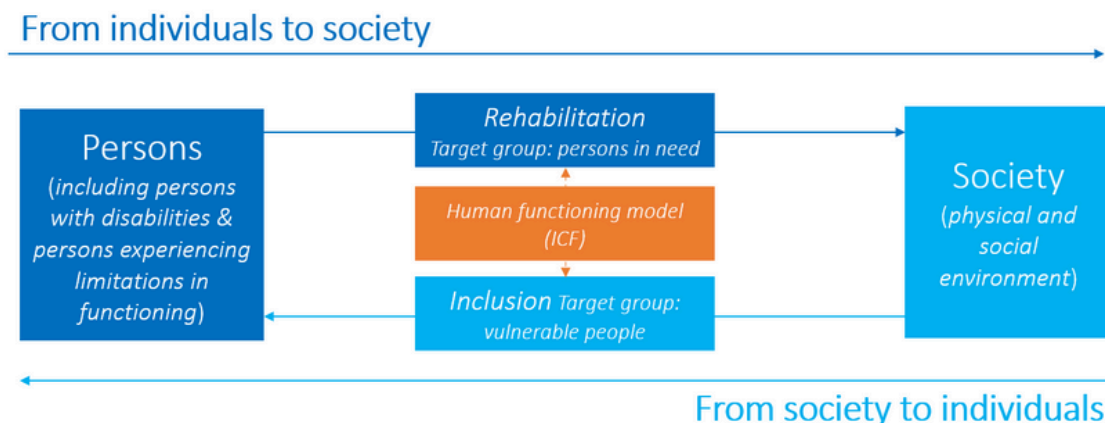


Figure 2. Graphical Deonstration of the interaction of the strategies of rehabilitation and inclusion and its interrelation by the Comprehensive model of functioning (International Classification of Functioning, Disability, and Health, WHO 2001)

3. Human rights. The UN-CRPD defines the most important principles of the rights of person with disabilities including to “promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity”[2]. This shows that advocacy for rehabilitation and inclusion is not based on opinions and charity approaches, it is based on human rights and therefore its realization is not voluntary – it is a must.

Classification of Functioning, Disability and Health (ICF)[3] and the UNCRPD that describes disability as a negative interaction of a person with impairment and the environment (see figure 2)(a more comprehensive argumentation is in preparation and will be published in a scientific journal soon). This also defines that full participation and inclusion need both the individual and societal approaches. And this is not an aspect of charity or “nice-to-have” “nice-to-have”, it is fundamental and based on Human Rights.

Both principles, rehabilitation and inclusion must be seen as equally important and shall interact in a synergistic way. They can be linked by using the comprehensive model of functioning as described in the International

The applicability of the suggested model additionally is demonstrated in figure 3 where the most common approaches are linked to the two main strategies.

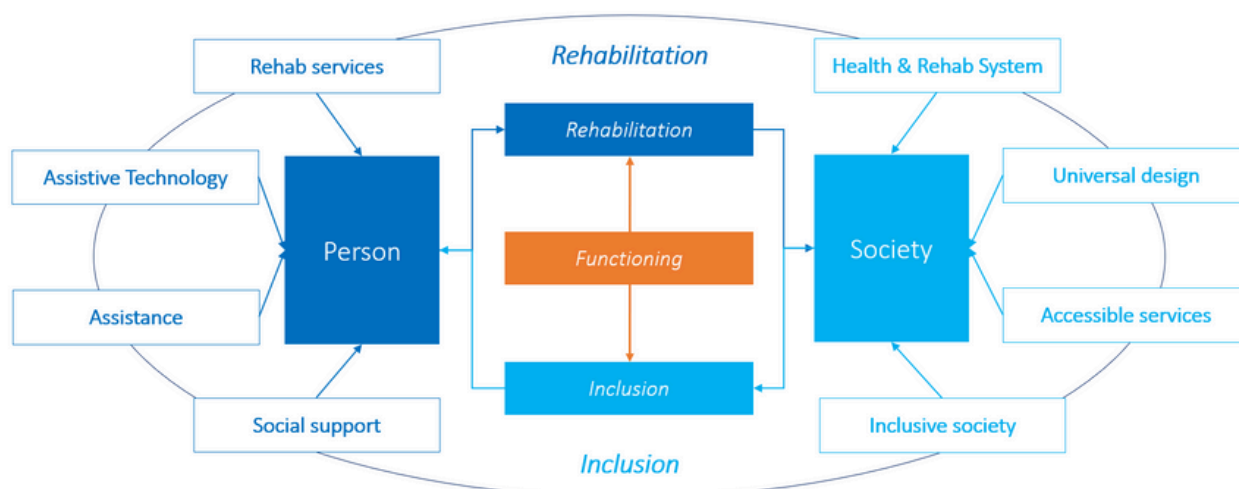


Figure 3. Linking the most important measures to improve functioning to the two strategies of rehabilitation and inclusion

## Message from RI President - Interim Report - 3

Based on these principles RI can be seen as a Global Advocate for Rehabilitation, Inclusion and Human Rights which is a unique selling point and not covered by any other international Non-State Actor.

Guiding principles for RI's advocacy at UN-level is that

- the principle of rehabilitation as a strategy of enablement of persons with disabilities and people experience disability are anchored in all international documents,
- the principle of inclusion of persons with disabilities is implemented as a fundamental principle in all international documents related to all life areas.

The resulting core strategy of RI can be formulated as follows:

To promote – based on human rights – the optimal cross-sectional societal response to the needs of persons with disabilities and persons experiencing limitations of functioning through integration of the two related strategies of inclusion and rehabilitation.

Advocacy aims at implementing necessary policies into international guiding document, i.e. at the level of UN and its agencies (step 2). Step 3 is to creating guidelines and tools for implementation that need to be used at the national level (step 4).

According to RI's international scope, the advocacy mainly addresses to the United Nations (i.e. Economic and Social Council (ECOSOC) and the Commission of the Rights of Persons with Disabilities (CRPD)) and its agencies, like the World Health Organization (WHO), the International Labor Organization (ILO), the United Nations Educational, Scientific and Cultural Organization (UNESCO) and others.

Of course, implementation at the national levels is of major importance. RI's role must be to support national Member Organization (NMO's) at national level by providing guidance, a scientific basis and practical support for the implementation.

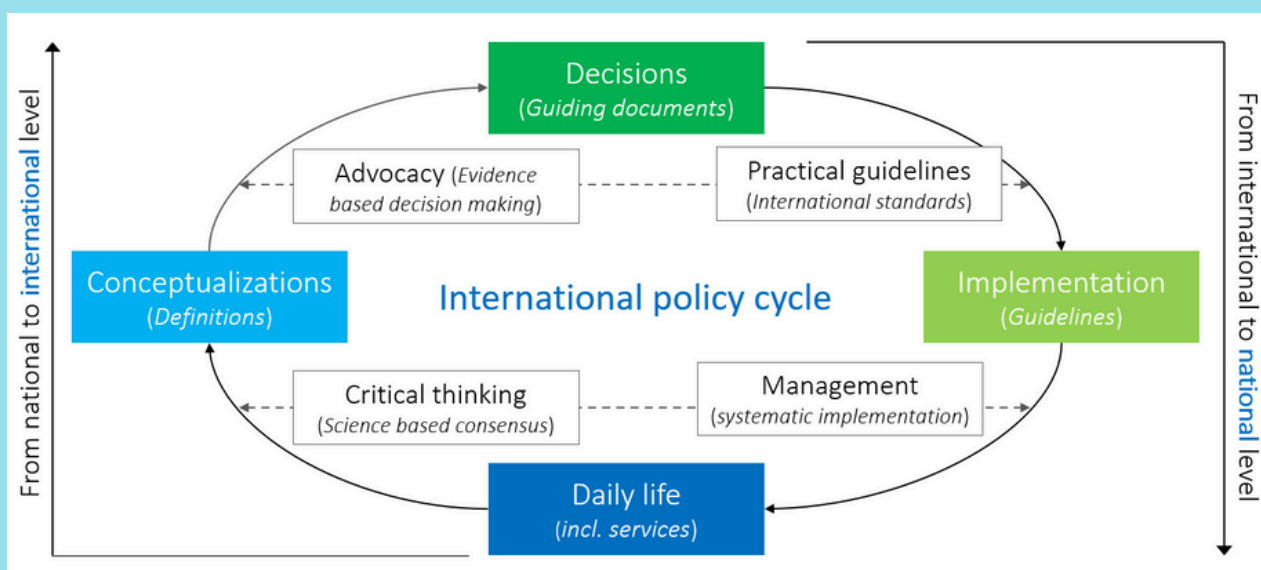


Figure 4. Principles of the international approach with starting point of daily life issues to international guiding documents and back to implementation at national levels

International policies in the area of rehabilitation, inclusion and human rights always aim at improvement of the real life situation of persons with disabilities (figure 4). Basis of an international policy cycle is the analysis of the situation, critical thinking and conceptualizing solutions (step 1).

During the last couple of years, funding and support for projects at national and international levels have been essential part of RI's work. One of preconditions to continue this work is to allocate funds, which is challenging in a

## Message from RI President - Interim Report - 4

period of shortening of budgets a public and private level. One of great achievements is the new Autism Fund, this has been given to RI by the China Disabled People Federation (CDPF) (see also the chapter on the scientific basis of RI's work).

### Operational processes

The main governing bodies of Rehabilitation International, the Governing Assembly and the Executive Committee traditionally meet in person once or twice a year respectively. However, in a dynamic world, many processes must be initiated and followed-up continuously. For this reason, a Managing Board (MB) has been established, consisting of the President, the Past-president, the Secretary General, the Treasurer, and the Regional Vice-presidents. The Managing board meets virtually once a month and supports the President in complex and urgent matters. Of course, the Managing Board cannot make decisions that according to the constitution are in the responsibility of the Executive Committee and the Governing Assembly. Examples for the discussions in the Managing Board are the process to decide about future congresses, how to support the Commissions in their work, and the membership fees.

As in most face-to-face EC meetings time is too short to discuss all necessary topics into detail, additional virtual meetings have been organized. One of these meeting was dedicated to the discussion on the work of the Commissions the other one on RI' strategy to organize future congresses and international events as well as how to collaborate with partner organizations. This will be continued in all cases where it is needed.

The President and the Treasurer visited the New York Office to discuss with the Secretary General about the operational issues and necessary actions. One of the ideas that came up, is to upscaling the office and to develop a kind of Communication Centre with the goal to discuss with partners from UN-system, governments and civil

society as well as to organize small workshops, seminars, webinars and other events. A first meeting already has been organized for a discussion with a delegation of the German Ministry of Social Affairs. Of course, enhancing capacity of the office staff remains an issue to be solved.

### Membership

Rehabilitation International is an organization based on membership. Main membership categories are National Member Organizations (NMO's), Associated Member Organizations (AMO's) and Individual Members (IM's). As it is very important to involve Membership more intensively in RI's work i.e. in between the GA's, it is important to increase communication in both directions. Concrete measures that have been taken is a call for nominations for membership in RI's Commissions and the Newsletter (see below).

As the Latin American Region currently is underrepresented in RI, the president took the initiative to increase membership in this large and important world region. This initiative has started with establishing personal contacts to former members of the region and to people personally known. One of aims is to elect a Regional Vice President for Latin America in 2025.

The President is interested to visit Member Organizations to discuss RI's work and to learn from their work. In 2024 he already visited RI MO's in the Republic of Korea as well as in Norway and Denmark. More visits are planned for 2025.

A first webinar for Member Organizations is planned in early 2025. Furthermore, it has been discussed with the Commission Chairs to organize webinars related to the areas of their work. Member organizations also are welcome to present their expertise and work in the newsletter and any another appropriate format.

## Message from RI President - Interim Report - 5

Another issue that needs to be solved is the Membership Contribution Schedule. The valid principle is based on a countries population and the Gross Domestic Product (GDP). As it does not reflect the income of a Member Organization, a new schedule needs to be developed and implemented. A task force consisting of RVP's, Treasurer and SG has started to work on this.

### **Commissions, Committees and Task Forces**

Most important platforms of RI's work are done in the Commissions, Committees and Task forces. With the goal to strengthen the Commission's Work, a video-meeting of the EC was held and the scope of the work of the committees have been discussed. To facilitate reporting and to improve comparability a documentation sheet has been developed, discussed and agreed. Furthermore, a call to nominate delegates to the Commissions have been sent out in November 2024.

Two new ad-hoc committees and task forces have been established:

- 1) a task force on Community Based Rehabilitation led by Demelash Bekele
- 2) a technical task for to develop a new Membership Contribution Schedule, consisting of RVP' Treasurer and SG.

A review on existing task forces will be done at the occasion of the first Executive Committee Meeting in 2025.

### **Youth Forum**

The RI Executive Committee decided in Abu Dhabi to establish a Rehabilitation International Youth Forum. It aims to provide a special platform for young people with disabilities and people that are committed to work towards better inclusion of the young generation. The platform shall be open for all young members of RO MO's and individuals who like to become individual members.

The Forum shall organize itself and appoint two coordinators or speakers respectively. The Forum shall make its own workplan and follow it up.

The forum is free to organize meetings (using social media or in-person meetings). We will stimulate the members of the Forum to participate in all other RI activities. The speakers (or coordinators) shall get the opportunity to attend the EC meetings as guest without right to vote.

After a call, a number of NMO's declared their interest to participate in the Forum and nominated members for the Forum. Furthermore, some initiatives to allocate funding for the project have been started. A more detailed project plan is in preparation.

### **Scientific basis of RI's work**

Research and science are fundamental sources of knowledge. Such information is the basis for effective advocacy and helps to find solutions for existing problems. For that reason, collaboration with academic Institutions is of great importance for RI.

Mme Zhang Haidi during her presidency took the initiative to establish a Health and Rehabilitation Sciences University in Qingdao (China). In the meantime this university has been opened and two RI-related centers have been initialized, which are the Rehabilitation International Global Autism Research Center and the Rehabilitation International Global Collaboration and Research Center.

To continue this initiative and to establish continuous close collaboration, in October 2024 a Memorandum of Understanding between the University and RI has been signed. Main activity of collaboration will be the establishment of the Autism Center. More details will be discussed and announced in 2025.

To strengthen the scientific basis for RI's advocacy, it is envisioned to create a Scientific Advisory Board and Network within the organization. However, a more detailed concept needs to be developed (which is envisioned for the year 2025).

## Message from RI President - Interim Report - 6

### Advocacy activities and projects

For advocacy it is not only relevant to have expertise and clear messages, but it is also important to discuss with the relevant stakeholders at the occasion of international events. Therefore, the president visited and gave inputs in the following events:

- **The UN-COSP-17 meeting** on the follow-up of the UN-Convention of the Rights of Persons with Disabilities in June 2024 in New York City (USA),
- **The 7th CBR/CBID Africa Conference** in Entebbe (Uganda) in September 2024 (on-line),
- **The 70th Anniversary of RI Korea** in Seoul (Republic of Korea) in September 2024,
- **A WHO Global Expert Consultation on Health Equity and Disability** in Berlin in October 2024 in Berlin (Germany)
- **The UNESCO-Conference on Inclusive Education** in November 2024 in Fortaleza (Brazil).
- Furthermore, Prof Asha Hans took part in **United Nations Economic and Social Commission for Asia and the Pacific** (UN-ESCAP) (see report in the November Issue of the Newsletter).
- Active participation of RI in the **Global Disability Summit in April 2025** in Berlin (Germany) is in preparation.

Informal meetings have been carried out with representatives of the WHO Noncommunicable Diseases, Rehabilitation and Disability unit, the UNESCO Education Unit, the World Rehabilitation Alliance (WRA), Humanity and Inclusion (HI), the International Disability Alliance (IDA), the International Social Security Association (ISSA), and the International Society of Physical and Rehabilitation Medicine (ISPRM).

With regard to relations with important international bodies the Executive Committee decided to apply for the status of "official relations" with UNESCO and to apply for membership in the WHO-hosted World Rehabilitation Alliance (WRA).

Furthermore, as mentioned before, RI participated in the WHO Initiative on a Framework for Disability-inclusive Health Systems (more information in upcoming newsletters).

### Communication and Public Relations

As mentioned before, communication and public relations is a core element for advocacy and for a membership-based organization in general. For this reason, the Newsletter has been reactivated and regular postings in social media have been started. To do this Dr Boya Nugraha has been contracted for one year with the option of continuing further. All members are invited to use both of these platforms to present their activities, to discuss important topics and to share their opinion.

Another important tool for information, communication, exchange and public relations are the RI World Congresses. Jointly with the International Social Security Organization (ISSA) and hosted by the Zayed Higher Organization (ZHO), RI organized the World Congress on Rehabilitation in Abu Dhabi, United Arab Emirates (UAE) in September 2024. The main topic was Work and Employment but many other important topics have been presented and discussed under the motto "Embracing Inclusion". Please find more details in the November Edition of this Newsletter and on the RI website. Once again, I would like to thank the host, ISSA and all the members of the organizing and program committees for their great work that was the basis for the great success of the event.

As mentioned above, a process to plan upcoming congresses has been started within the Executive Committee.

### Finances

The Treasurer and President of the RI Foundation Mme Hon. Susan Parker in close collaboration with RI President and Finance committee established a solid budget plan for the year 2025. It includes some investments for the upcycling of the NYC

## Message from RI President - Interim Report - 7

office and the Public Relations/Social media project. Nevertheless, for future projects fund raising is of great importance. Strategies for more systematic fund raising are under development.

### Outlook

As seen from this first interim report after 100 days of office of the president and the newly elected Executive Board, RI's work is extremely complex. It includes upscaling of internal and managing processes, communication with the member organizations as well as intensifying Advocacy with clearly defined targets and messages. Stable financial basis is a precondition for successful work. On the other hand, it can be seen, that RI has an important voice at the global levels and its work is most relevant for the realization of equal human rights for all persons with disabilities.

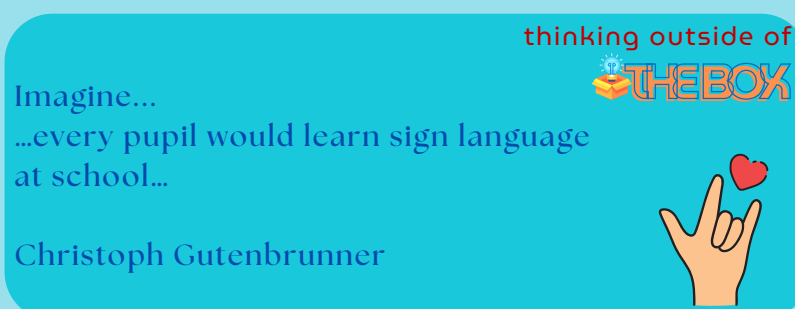
All members and collaborators are invited to contribute to this challenging work. This includes critical remarks, suggestions and in particular contribution to RI's global work. Furthermore, it also is important to inform about the specific situations of persons with disabilities in the regions and at national level. Together we can find solution and become and maintain a strong and influential organization.

Hannover, in December 2024

Prof Christoph Gutenbrunner, MD, PhD, FRCP, SFEBPRM  
Rehabilitation International President

### References:

- [1] Gutenbrunner & Nugraha. (2019). Rehabilitation as a Health Strategy. JISPRM 2(Suppl 1):p S15-S18.
- [2] United Nations. (2006). Convention on the Rights of Persons with Disabilities. Treaty Series, 2515, 3.
- [3] World Health Organization. (2001). International classification of functioning, disability and health: ICF. World Health Organization.





## Breaking Barriers: Transforming Zambia's Education System for Children with Disabilities - 1



As we embark on a new year, it's essential to reflect on the progress made in promoting inclusive education by ensuring that the preconditions for quality education access and learning are in place in the mainstream schools for vulnerable Children with disability. The "Promote Quality Inclusive Education Practices in Zambia's Schools" Project, funded by Rehabilitation International, has made significant strides in Chipata District, Eastern Province of Zambia. This project is proving that inclusive education is not just an aspiration—it is an achievable reality.

### Milestones and Achievements

Education is often hailed as the great equalizer, yet for many children with disabilities in Zambia, it remains an elusive dream. This project has sought to change that narrative by implementing concrete measures to make education accessible and effective for all students.

Among its key achievements targeted mainstream school, the project has:

- 1) 279 children with disabilities enrolled in five targeted schools including out-of-school children.
- 2) 400 parents, teachers, and community members sensitized on inclusive education
- 3) Five schools adapted for accessibility
- 4) Assistive devices provided to 25 children with disabilities

- 5) Partnerships established with government ministries, organizations, and donors
- 6) Using public media especially radio to raise awareness on rights of children with disabilities
- 7) 25 teachers trained as trainers of trainers (TOTs)

parents and Caregivers to support them on giving extra care and attention to Learners with Special Needs at home for effective learning.

### Challenges on the Road to Inclusivity

Despite the project's successes, significant hurdles remain:

1. **Stigma and discrimination** continue to be major barriers in mainstream schools, where outdated attitudes persist.
2. **Inadequate funding** and a shortage of trained special education staff pose ongoing challenges.
3. **Accessibility.** Many children with disabilities live long distances from schools, making regular attendance difficult.
4. **A lack of proper referrals for physical rehabilitation** means that some students do not receive the medical support they need to maximize their learning potential.

## Breaking Barriers: Transforming Zambia's Education System for Children with Disabilities - 2

### Lessons Learned: The Path Forward

Through these challenges, the project has unearthed valuable lessons about what works—and what doesn't—in fostering inclusive education.

1. The importance of teacher training and support
2. The need for individualized education plans and assistive technologies to enhance learning
3. The impact of poverty on education outcomes for children with disabilities – parents financial limitation in providing educational materials

### Opportunities to Scale Up Inclusive Education

As we move forward, it's crucial to build on the momentum generated by this project. Many children with disabilities in underserved rural communities are still denied their basic right to education, underscoring the urgent need for inclusive and accessible learning environments. This need encompasses accessible learning materials, assistive technologies, and adequate training for school teachers and administrators. To achieve inclusive and universal primary education in Zambia, we need to:

- 1) Expand inclusive education initiatives to more underserved schools and districts
- 2) Strengthen partnerships with government ministries OPDs and donors
- 3) Provide ongoing teacher training and relevant assistive technologies for effective teaching and learning
- 4) Continue raising awareness on children rights to reduce stigma and discrimination in target communities and mainstream schools



### What Project Means to Children with Disability and Zambia

- **Increased enrolment and retention** of children with disabilities in local schools
- **Improved access to quality primary education** for vulnerable children with disability close to their homes
- Children with disability will have **greater understanding** of their **social and education rights** and are able to claim them
- **Strengthened OPDs inter-sectorial collaboration** support and advocacy for large-scale education projects in Zambia
- **Increased visibility of RI support in Zambia!**

This article is based on report provided by:



**Mr. Miyoba Hamuhuma**  
CEO Enlight Abilities

**Enlight Abilities** stands ready to scale up these efforts and create a more inclusive and equitable education system in Zambia.

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# A Hidden Crisis: The Global Burden of Autism and the Need for Lifelong Support - 1



**Autism spectrum disorder (ASD)** is a lifelong neurodevelopmental condition that affects social interaction, communication, and behavior. Published in **The Lancet Psychiatry** in **December 2024**, the **Global Burden of Disease (GBD) Study 2021**, presents the most comprehensive estimates to date on the global prevalence and health burden of ASD. The findings highlight a substantial increase in prevalence compared to previous estimates, emphasizing the need for improved diagnostic strategies and lifelong support services for autistic individuals.

## Key Findings: Autism by the Numbers

The study estimates that 61.8 million people globally were autistic in 2021, equivalent to 1 in every 127 individuals. This marks a significant increase from prior GBD estimates, which had relied on data sources that likely underestimated ASD prevalence.

Statistic	Value (2021)
Global prevalence of ASD	788.3 per 100,000 people
Prevalence in males	1,064.7 per 100,000
Prevalence in females	508.1 per 100,000
Total global burden (DALYs)	11.5 million DALYs
Top-ranked non-fatal health burden in ages <20 years	Among the top 10 causes

Disability-adjusted life years (DALYs)—a measure of overall health burden—were estimated at 11.5 million globally, demonstrating that ASD is a major contributor to non-fatal health challenges. ASD ranked among the top ten causes of non-fatal health burden for children and adolescents under 20 years old.

## Regional and Demographic Disparities

The burden of ASD varies significantly across geographical regions, reflecting differences in diagnostic awareness, healthcare access, and cultural factors.

Region	Prevalence (per 100,000)
High-income Asia Pacific	1,559.50
High-income North America	1,097.20
Western Europe	896.6
Southeast Asia, East Asia, and Oceania	669.2
South Asia	666.2
Latin America & Caribbean	689.5

Among high-income regions, Japan had the highest prevalence, with 1,586.9 per 100,000 people diagnosed with ASD. Conversely, Bangladesh had the lowest recorded prevalence globally, at 588.2 per 100,000—a figure likely influenced by limited diagnostic infrastructure.

## The Role of Gender in ASD Prevalence

The study also underscores the gender gap in autism diagnosis, with males twice as likely as females to be diagnosed. However, the report suggests that historical underdiagnosis of females may contribute to this discrepancy, as autistic traits in females often manifest differently and may go unnoticed.

## The Lifelong Impact of Autism

ASD is often diagnosed in childhood, but its effects persist across the lifespan. The study found that prevalence is highest at birth and decreases with age, primarily due to underdiagnosis in adulthood and higher mortality rates among autistic individuals.

## A Hidden Crisis: The Global Burden of Autism and the Need for Lifelong Support - 2

Age Group	DALYs per 100,000
Children <5 years	169.20
Ages 5–19	163.40
Ages 20+	137.7

A separate analysis suggests autistic individuals face an increased risk of premature mortality, particularly due to suicide and self-harm. In 2021, an estimated 13,400 suicide deaths globally were attributed to ASD, highlighting the urgent need for mental health interventions tailored to autistic individuals.

### Challenges in Data and Diagnosis

While the new estimates are more comprehensive than ever, researchers caution that data gaps persist—particularly in low-income and middle-income countries where diagnostic tools and healthcare access remain limited. Many previous prevalence estimates were based on passive case-finding methods (e.g., administrative records), which tend to underestimate actual ASD rates.

Future research priorities include:

- Expanding diagnostic surveys globally to ensure better geographical representation.
- Improving early screening and intervention programs, especially in low-resource settings.
- Developing more inclusive diagnostic criteria to address gender disparities.

### Policy Implications: A Call for Action

The findings of the GBD 2021 report highlight an urgent need for increased healthcare investment in ASD services worldwide. Experts recommend:

- ✓ Early detection programs to improve childhood diagnosis.
- ✓ Lifelong support services tailored to the unique needs of autistic adults.
- ✓ Mental health interventions addressing the higher risk of suicide and co-occurring conditions.

### Conclusion

The Global Burden of Disease Study 2021 redefines the global landscape of autism prevalence and burden, emphasizing that ASD is not just a childhood condition but a lifelong challenge requiring continuous support. Policymakers, healthcare providers, and researchers must collaborate to ensure that autistic individuals receive the care and resources they need—from early childhood to adulthood.

(Prepared by BN).

### Reference

Santomauro, Damian F et al. *The global epidemiology and health burden of the autism spectrum: findings from the Global Burden of Disease Study 2021. The Lancet Psychiatry, 2025. Volume 12, Issue 2, 111 - 121*

### Global Disability Summit 2025

2nd – 3rd April, 2025 / Berlin



“The International Disability Alliance (IDA), the Government of Germany, and the Government of Jordan will host the third Global Disability Summit (GDS).

The Global Disability Summit aims to galvanize global efforts to realize disability inclusion around the world. It is a mechanism bringing together a wide variety of high-level stakeholders, engaging and discussing the progress in disability inclusion: governments, multilateral agencies, the private sector, academia and civil society organizations, organizations of persons with disabilities, and foundations.”(<https://www.globaldisabilitysummit.org/>)

## Call for contribution

A heartfelt thank you to all our contributors for your invaluable support, dedication, and engagement! Your efforts continue to inspire and drive our shared mission of creating a more inclusive world for everyone.

### We are excited to invite:

- **Member Organizations:** Showcase your impactful programs, innovative projects, and success stories that advance rehabilitation and inclusion.
- **RI President & Vice Presidents:** Share your strategic insights, regional updates, and experiences from the frontlines of advocacy.
- **RI Commissions:** Contribute research findings, policy recommendations, or groundbreaking initiatives that shape the future of accessibility and empowerment.
- **RI Regions:** Highlight local achievements, unique cultural approaches to rehabilitation, and stories of resilience within your communities.

Whether it's a breakthrough initiative or an inspiring individual, we encourage you to share your activities, achievements, thoughts, or ideas with us. Your contributions provide valuable insights and help amplify the incredible work being carried out worldwide.

### Why Contribute?

Your stories not only foster collaboration and learning but also inspire others within the Rehabilitation International community to take meaningful action. Together, we can create a powerful platform for change and advocacy.

### How to Submit?

Please send your submissions to: **RI Media** ([rimedia@riglobal.org](mailto:rimedia@riglobal.org))

We welcome articles, photos, videos, and any other materials that best showcase your work and its impact.

Let's continue to work together to shine a light on the exceptional efforts that make a difference in the lives of individuals and communities around the world.

We look forward to hearing from you soon!

### Don't forget to check and follow our social media:



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Rehabilitation International



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### Event Calendar

**RI Executive Committee Meeting** (on invitation)  
31 March - 1 April 2025

**Global Disability Summit**  
Berlin, Germany  
2-3 April 2025

**COSP 18**  
10-12 June 2025



Rehabilitation  
International

**A GLOBAL ADVOCATE FOR REHABILITATION,  
INCLUSION AND HUMAN RIGHTS**

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