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Embracing the new disability rights paradigm: the importance of the Convention on the Rights of Persons with Disabilities

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In 2008 the United Nations Convention on the Rights of Persons with Disabilities (CRPD) commenced operation. The CRPD has created a dynamic new disability rights paradigm that empowers disability people's organizations and creates a new paradigm for disability scholars. This paper analyses the impact of the CRPD and provides practical guidance as to how this convention can be used to drive change. Prior to this convention, persons with disabilities were protected by a range of general human rights conventions. Despite receiving nominal protection under general human rights conventions, persons with disabilities have had many of their human rights denied to them. The CRPD goes further than merely re-stating rights. It creates a new rights discourse, empowers civil society and renders human rights more obtainable for person with disabilities than any time in history.

Keywords: United Nations Convention on the Rights of Persons with Disabilities; disability human rights; disability rights paradigm

Points of interest

- Persons with disabilities have been protected by the general human rights conventions established following World War Two. These conventions have, however, failed to ensure persons with disabilities can exercise their human rights.
- In 2008 the United Nations Convention on the Rights of Persons with Disabilities (CRPD) commenced operation. This is the first human rights convention to expressly protect the human rights of persons with disabilities.
- The CRPD has created a new rights framework and disability rights paradigm. The CRPD re-states existing rights and provides detail on what states need to do to ensure those rights are realized.
- Disabled people's organizations are provided a voice in the implementation of the CRPD.
- This paper explores the capacity of the CRPD and how persons with disabilities and disability organizations can harness the potential of this convention to achieve substantive improvements in the lives of persons with disabilities.

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Introduction

People with disabilities across the world are regularly excluded from society and, in some jurisdictions, even need to fight for their right to life. Despite being simply an aspect of social diversity, impairments are often cast by law and culture as something inherently negative (Campbell 2001, 44; 2009, 5; Harpur 2009b). Throughout history, persons with disabilities have been regarded as subjects of charity and often have their rights discounted by mainstream society (Quinn 2009b). In 2006 the United Nations posited a convention that has altered the focus of disability politics and created a new disability rights paradigm. The United Nations Convention on the Rights of Persons with Disabilities (CRPD) received sufficient ratifications to commence operation in 2008. This rapid ratification and the associated disability rights discourse have created a unique opportunity to drive change and provide disability scholarship and politics with a common focus.

This paper will analyse the two major reasons that the CRPD creates a potential for change. First the CRPD does not merely re-state existing human rights. The CRPD re-states existing rights and then creates incidental rights to ensure that existing rights are realized. Through this process existing rights are provided greater clarity, which provides disability advocates and scholars with a powerful tool to hold states accountable. The second main reason the CRPD creates a disability rights discourse is the way in which it empowers persons with disabilities and their advocacy groups to be formally involved in the convention process. This official role requires the United Nations and individual states to provide persons with disabilities the greatest voice in public affairs to date. The CRPD enshrines the notion that there should be 'nothing about us without us'.

How has the CRPD created a new disability rights paradigm and research agenda?

Existing disability models

In 2006 when the CRPD was adopted by the United Nations there were two governing disability models embraced by states and many academics. This part will discuss the operation of the medical and social models that govern public policies and explore how the CRPD has advanced public policy beyond these governing disability policies. The CRPD does not replace the social model; rather, it builds upon this model and introduces a new disability rights paradigm.

The medical model focuses upon the person with the disability as the problem and looks for cures (Kaplan 2000; Rovner 2004). The medical model remains extremely popular in medical schools and with medical research, but has fallen out of favour with persons concerned with the overall rights of persons with disabilities. Certain aspects of the medical model remain important, but as an overall approach the narrow focus of this model means that most issues concerning people with disabilities are overlooked. The CRPD Articles 25 and 26 explain that persons with disabilities have a right to health and to rehabilitation. Part of this requires the state to facilitate research. The problem with policies guided by the medical model is that such policies place undue attention upon 'fixing persons with disabilities'. Medical model policies often do not recognize that a person with a disability has the capacity to live a fulfilling life with a disability. Such policies continually try to 'improve' a person's physical or mental state rather than focusing on other important public issues such as the removal of environmental barriers in society or

providing support to enable the person to exercise other rights. For example, there is limited value in policies that devote resources to a long-term strategy to help people in wheelchairs walk, if current construction standards do not require buildings to have lifts and ramps.

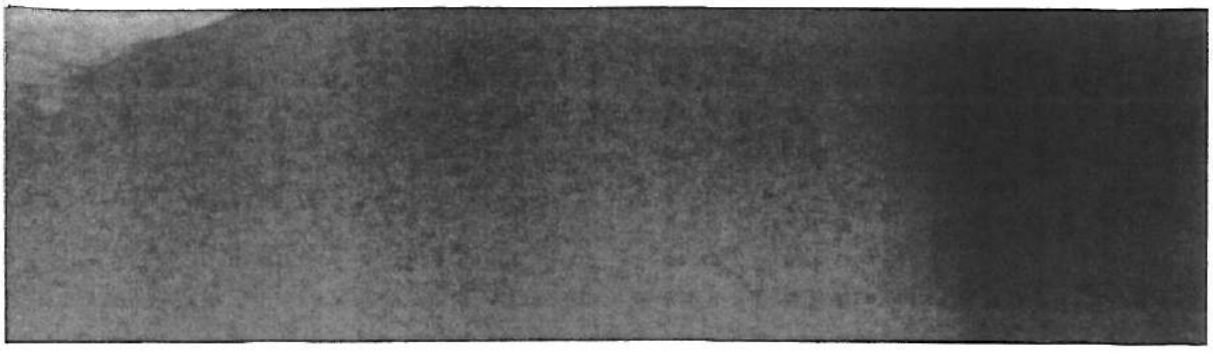
The social model is far more popular with disability scholars and those interested in the human rights of persons with disabilities. The social model scholarship first emerged out of the United Kingdom with authors such as Abberley, Barnes, Finkelstein, Mercer, Oliver, Shakespeare and Thomas (Abberley 1999; Barnes, Mercer, and Shakespeare 1999; Finkelstein 1980, 2002; Oliver 1990, 1996; Oliver and Barnes 1998; Thomas 1999). The main thrust of these authors is that impairment should be defined separately from disability. The distinction between impairment and disability has aimed to demonstrate how it is not a person's impairment that makes them disabled but the way in which society is structured, which means the impairment becomes disabling (Oliver 1990, 11). Using this distinction a person would have impairment if they had no eyesight or was in a wheelchair. The disability is caused when society elects not to permit books in accessible digital formats to be available on the Internet or decides to put steps outside a building rather than a ramp. Griffin has explained that the social model 'casts the "What is wrong with you?" question on the asker-on the one staring rather than on the one observed' (2008, 104). Essentially the social model:

> explores how ableism has shown up in social practices and institutions that have in turn portrayed people with disabilities as useless, marginal, abnormal, a burden on society, and perhaps most offensively, as living a life that is not worth living. (Mor 2006, 69)

The purpose of the social model is therefore to move society from treating persons with disabilities as 'defective' and to change society to render it more inclusive.

The idea of the social model has been embraced by the CRPD. The Preamble of the CRPD explains how the convention builds upon a non-radical understanding of the social model: '(e) Recognizing that disability is an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others'. The original social model argued that the growth of capitalism was a major cause of the oppression of persons with impairments (Finkelstein 1980; Oliver 1994). As part of this anti-capitalist agenda, the traditional social model employed Marxist concepts of radical economic reforms (Finkelstein 2001). The CRPD embraces the idea from the social model that society causes the disablement of persons with impairments, but the CRPD does not explain this disablement in terms of radical economic reforms. I would suggest that the CRPD explains the disablement of people with impairment through a non-radical social model. For disability scholars, the formal recognition that society needs to change to avoid disabling people with impairments is in itself positive. The CRPD, however, goes much further and introduces a new disability rights paradigm.

It is critical to find ways to bridge the boundaries between the daily reality of disability advocates and the disability research performed by academics (Goodley and Moore 2000). Perhaps focusing upon the CRPD could provide such a vehicle. The agenda of the disability movement is often at the practical level where people simply desire their rights ensured. The social model advances persons with



disabilities rights by removing barriers in society, but can overlook the role of impairments. Authors, such as Shakespeare (2006), have raised concerns that the social model fails to explain the role that impairments have upon individuals. Through creating barriers, society creates disablement. Even if society removed barriers, people would be impacted by their impairments to varying extents. Creating an 'accessible environment minimises the inconvenience of impairment, but does not equalise disabled people with non-disabled people' (Shakespeare 2006, 51). The limitation of the social model has meant that research strictly employing this model has sometimes failed to adequately factor in the impact of barriers that were not created by society. Disability advocacy needs to support individuals to deal with the impact of their impairment while also fighting to stop society from creating barriers. Perhaps the new disability rights paradigm introduced by the CRPD can assist disability research to better align with practice. The CRPD adopts the non-radical social model and introduces a new disability rights paradigm that aims to assist persons with disabilities with every aspect of their lives (Harpur and Bales 2010).

Introducing the CRPD

In 2001, the United Nations General Assembly established an Ad Hoc Committee to report on the possibility of the United Nations adopting a disability-specific, human rights convention (Protect the Rights and Dignity of Persons with Disabilities 2001). Ultimately, this process resulted in the CRPD being presented to the General Assembly on 5 December 2006. On 13 December 2006, the United Nations General Assembly unanimously adopted the CRPD. The adoption of this Convention followed five years of transparent negotiations with states and disabled people's organizations (Lord and Stein 2008). Following ratification by states the CRPD came into force on 3 May 2008.

The CRPD is the first general United Nations human rights convention to expressly protect persons with disabilities human rights. While existing human rights conventions provide general protections to all persons, and as a consequence also protect persons with disabilities, these conventions have generally had limited success at ensuring persons with disabilities can exercise their rights. One example of this problem is the continuing low employment rates of persons with disabilities across developed and less developed nations (Bagenstos 2004; Harpur 2009a). Data indicate that approximately 20% of people in developed nations have a disability. Overall persons with disabilities are approximately four or five times more likely to have their right to work denied to them when compared against non-disabled citizens (UN Enable n.d.). In developing states, the unemployment of persons with disabilities often reaches as high as 80%. How can the CRPD redress this chronic problem?

The rights-based approach

To ensure persons with disabilities can exercise their human rights will require a range of interventions. The CRPD provides guidance on what interventions are required to enable persons with disabilities to exercise their rights. CRPD Article 1 states the purpose of the convention is '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'. Persons with disabilities are protected by rights found in Articles 3–9, which include universal

rights, and Articles 10–30, which include substantive rights. These rights often restate existing rights, but some of the rights are included to ensure the well-established rights can be realized. For example, the right to equality and non-discrimination is well established. To realize this right, the CRPD includes a right to access buildings, schools, programmes and public transport, a right to live independently and to be included in the community, a right to personal mobility, freedom of expression and opinion, and access to information, the right to have privacy protected, a right to participate in political life and a right to participate in cultural life, recreation, leisure and sport. Further, the right to life and to be free from torture or cruel, inhuman or degrading treatment or punishment are well-established rights. To ensure these rights, the CRPD includes rights that are primarily relevant to persons with disabilities such as the rights to respect for home and the family, to healthcare, to habitation and rehabilitation and to work, and to an adequate standard of living and social protection. Finally, CRPD Articles 31–40 establish implementation and monitoring schemes and Articles 41–50 provide rules governing the operation of the CRPD (Harpur 2010; Harpur and Bales 2010).

Melish has observed that '[r]atification of the Convention will ... require States to think strategically about accessibility and reasonable accommodation for persons with disabilities in all ... areas of life' (2007 , 45). Under this paradigm shift, persons with disabilities are regarded as being entitled to the same human rights as people without disabilities. Traditional human rights instruments provided persons with disabilities nominal protection, but the interpretation of these instruments often discounted persons with disabilities rights. Now the rights are applied to focus upon true equality. Under the CRPD disability is not regarded as a medical condition requiring assistance but as an aspect of social diversity. The challenge is to realize the potential of the CRPD and to achieve the change that the adoption and rapid ratification of the CRPD has created.

How to use the CRPD to drive change

The clarification of what rights mean

The CRPD empowers persons with disabilities through creating a new disability rights paradigm and through facilitating the voice of disabled people's organizations. This paper will analyse how this new paradigm provides opportunities to disability scholars and advocates through using the right to work as a case study.

It could be argued that one reason existing human rights conventions have failed to protect persons with disabilities rights is that existing human rights conventions contain a substantial scope for interpretation. The ability for states to interpret the implementation of rights means that these existing rights can be interpreted in either an inclusive or an exclusive manner. The CRPD has settled this question in favour of persons with disabilities.

Prior to the CRPD it was necessary to base arguments for reforms on one interpretation of the right to work. The problem with this approach is that these rights can be interpreted in a way that maximizes or minimizes social inclusion. The right to work applied equally to everyone in society and appears in general terms. The Universal Declaration of Human Rights (1948) Article 23 provides:

> Everyone has the right to work, to free choice of employment, to just and favourable conditions of work and to protection against unemployment.

Article 6(1) of the International Covenant on Economic, Social and Cultural Rights (1976) provides clear support for the Universal Declaration of Human Rights:

> The States parties to the present covenant recognize the right to work, which includes the right of everyone to the opportunity to gain his living by work which he freely chooses or accepts, and will take appropriate steps to safeguard this right.

These provisions were posited in 1948 and require substantial interpretation as to how these rights are to be realized. For example, the terminology in the Universal Declaration of Human Rights, 'just and favourable conditions of work', could include the right to fair pay (Cowling, Mitchell, and Watts 2006; Harvey 2004), the right to not be unemployed (Burgess and Mitchell 1998), the right to use work to alleviate poverty (Udombana 2006), the right to employment for immigrants (Borghard 2006), the right to decent work for people with disabilities (O'Reilly 2003), and various other rights associated with industrial conditions.

The potential for interpreting the right to work has arguably weakened the strength of any critique of government policies concerning persons with disabilities right to work. Without an easily definable and widely accepted benchmark for applying the right to work for persons with disabilities, governments could elect to be either inclusive or exclusive. It could be argued that exclusive policies would go against the notion of equality inherent in international human rights treaties. In practice, however, governments could easily justify exclusive policies on the basis that these policies best protect persons with disabilities rights. This paper has already discussed the two governing disability models. How would the right to work be interpreted by these models? Under the medical model, persons with disabilities were regarded as innately 'defective' and requiring of charity and help. Under this paradigm there was a reduced focus on helping persons with disabilities access the open labour market. The social model, in contrast, regarded persons with disabilities as full citizens and highlighted barriers created by society. States began to recognize that society disabled people and introduced anti-discrimination laws to partially redress this discrimination. While the introduction of anti-discrimination laws was positive, often these laws were drafted and interpreted in a way that did not enable persons with disabilities to exercise their right to work on an equal basis as others.

The CRPD significantly decreases the potential for interpreting the right to work in a way that discounts the rights of persons with disabilities. In contrast to human rights conventions that do not have a specific disability focus, the CRPD provides substantial detail on how the right to work should be implemented. CRPD (2008) Article 27(1) provides:

States Parties recognize the right of persons with disabilities to work, on an equal basis with others; this includes the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible to persons with disabilities. States Parties shall safeguard and promote the realization of the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation, to, inter alia:

> (a) Prohibit discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance of employment, career advancement and safe and healthy working conditions;

(b) Protect the rights of persons with disabilities, on an equal basis with others, to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions, including protection from harassment, and the redress of grievances;

(c) Ensure that persons with disabilities are able to exercise their labour and trade union rights on an equal basis with others;

(d) Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training;

(e) Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;

(f) Promote opportunities for self-employment, entrepreneurship, the development of cooperatives and starting one's own business;

(g) Employ persons with disabilities in the public sector;

(h) Promote the employment of persons with disabilities in the private sector through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;

(i) Ensure that reasonable accommodation is provided to persons with disabilities in the workplace;

(j) Promote the acquisition by persons with disabilities of work experience in the open labour market;

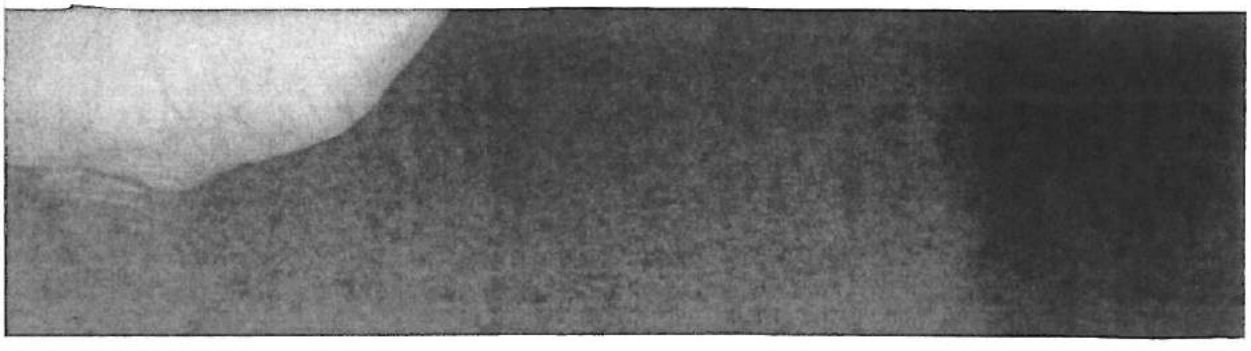
(k) Promote vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities.

Article 27 expressly provides that states have positive and negative obligations to ensure persons with disabilities right to work. Prior to the CRPD there was uncertainty about how the right to work for persons should be implemented. Following the adoption of the CRPD this uncertainty has been substantially reduced.

While the state obligations under CRPD Article 27 could have been drawn through a disability friendly interpretation of the right to work, the CRPD provides a list of obligations that states have agreed to uphold. When states ratify a convention, then those states are bound to uphold rights in that convention according to that convention (Vienna Convention on the Law of Treaties 1980, Articles 2(b), 11, 12, 13, 14 and 15). The existence of the CRPD therefore provides disability rights advocates a powerful tool to critique state conduct against.

The official role of disability rights advocacy under the CRPD

It is critical for persons with disabilities to be involved in research and advocacy (Beazley, Moore, and Benzie 1997). Disability rights advocates have a powerful opportunity to lobby for reforms through their official role under the CRPD. Similar to most international human rights conventions, the CRPD involves state reporting



and an oversight committee (CRPD, Articles 33, 34, 35 and 36). The Committee on the CRPD has been created under Articles 34 and 35. The CRPD requires State Parties to submit periodic comprehensive reports on measures taken to give effect to the CRPD to the Committee.

Article 36 requires the Committee on the CRPD to consider state reports and empowers the Committee to make such suggestions and general recommendations on the report as it may consider appropriate. The state reports will be made available to other state members by the United Nations and domestically within signatory states by the state itself (CRPD Article 36). Professor Ron McCallum AO, chairman of the Committee on the CRPD has explained:

> It has always seemed to me that while the CRPD Committee has an important role to play, the success of the CRPD will depend much more on the manner in which ratifying countries both monitor and implement the CRPD. If article 33 is able to encourage these activities in states parties, then it will have played a crucial role in grounding the CRPD into the policies, laws and customs of ratifying nations. (McCallum 2010a, 15)

The exciting opportunity for disability rights advocates is created by their official role in the reporting process. In addition to state reports, Article 33(4) requires states to involve disabled people's organizations fully in the monitoring process. The requirement to interact with disabled people's organizations provides an opportunity to ensure that the voices of persons with disabilities are heard by governments, the community of nations and domestic stakeholders. The challenge is for disability organizations to maximize this new political significance to achieve positive results on the ground.

Practical steps to achieve change

I argue that scholars, disability rights organizations and persons with disabilities need to maximize the potential created by the CRPD. According to Hill and Blanck (2009, 33), the challenge following the ratification of the CRPD is to ensure the CRPD is implemented as a roadmap for transformation and not just as a technical standard. Across the world, hundreds of disabled people's organizations are engaging with the CRPD and calling on states to ratify and implement the convention. It is beyond this paper to analyse these important efforts in detail. This paper will note the operation of two organizations and will then draw from literature and from the United Nations to provide practical suggestions.

The two disability people's organizations mentioned in this paper are the Disability Awareness in Action (DAA) and the Harvard Project on Disabilities (HPOD). The DAA is a partnership between numerous disability people's organizations working on a public education campaign to promote the rights of persons with disabilities (DAA n.d.). The DAA provides support to foster partnerships between governments, policy-makers, non-governmental organizations, industry, the media and disabled people. It achieves these objectives by directly promoting, supporting and coordinating national action campaigns. The DAA draws from a large member base, with 91 participating organizations including well-known organizations such as Disabled Peoples' International, Rehabilitation International, International League of Societies of Persons with Mental Handicap, World Federation of the Deaf and many local organizations across the developed and majority world. The HPOD is a Harvard University-funded project to support the implementation of the CRPD

(HPOD n.d.). To achieve this end, the HPOD assists people to network with disabled people's organizations by providing an international database, provides advice to governments and provides free fact sheets, practice manuals and policy material in areas including development in the majority world, on humanitarian relief, in education on employment and on human rights generally.

To achieve the benefits on the ground, disabled people's organizations need to ensure that the dynamic paradigm change in disability policies filters through to government, industry and persons with disabilities (Quinn 2009a, 2009b). To achieve this change, people exposed to the CRPD need to be encouraged to champion the human rights paradigm.

This championing of the human rights paradigm needs to occur inside and outside government. Quinn calls upon institutional champions to come forward to promote the CRPD. These institutional champions may or may not have prior links to disability rights advocacy. Quinn noted that many state delegates involved with the drafting and implementation of the CRPD have become socialized about the human rights paradigm. when these civil servants and public officials return back to their home countries they need to champion the human rights paradigm within government institutions. The CRPD is generally encouraging people to become more aware of the rights of persons with disabilities. A good example of how involvement with the CRPD can encourage people to become disability rights advocates is Professor Ron McCallum. Professor McCallum is one of Australia's most acclaimed academics who just happens to be blind. His involvement with the CRPD has altered his approach to disability advocacy. McCallum explains:

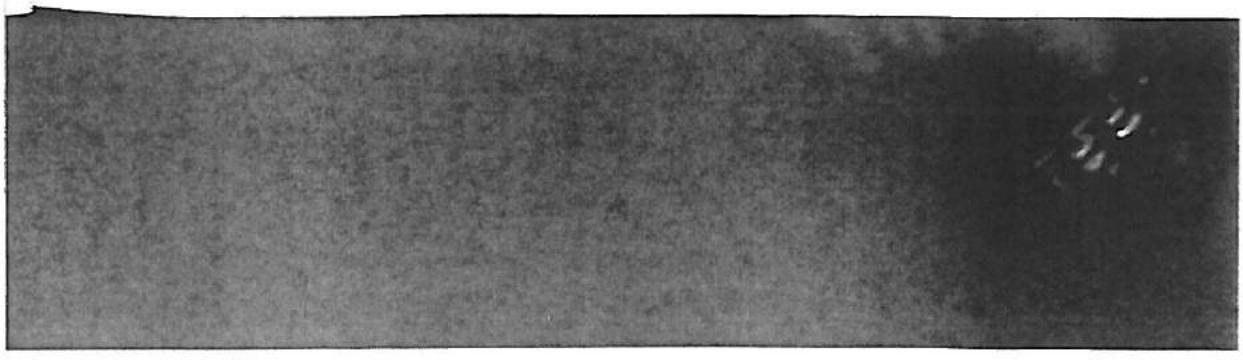
> My election in November 2008 as an inaugural member of the United Nations Committee on the Rights of Persons with Disabilities was an unexpected turning point in my career. ... Being exposed to disability issues throughout our world has been a life changing experience, and it has caused me to think more deeply about my own blindness. (2010b, 27)

Through his involvement with the CRPD, McCallum has worked with the community and with government to advance the rights of persons with disabilities.

Stein and Stein argue that to realize the human rights paradigm will require state intervention and active advocacy by scholars, disabled people's organizations and their members:

> The disability human rights paradigm applies to both the process and outcome of human rights. It necessitates the participation of people with disabilities (along with other stakeholders) in the process of societal reconstruction so that they may claim their rights. (2007, 1240)

Elsewhere Stein argued, with Lord that to achieve the social change potential advocates must engage in a comprehensive human rights practice (Lord and Stein 2008). This human rights approach needs to encompass a focus upon law reforms, strategic use of litigation to create judge-made law, education on the rights-based nature of the CRPD and empowerment of communities and individuals, strengthening the capacity of disabled people's organizations to engage in advocacy and to strengthen links outside the traditional disability community. Overall, disabled people's organizations and individuals need to embrace the human rights paradigm introduced by the CRPD and to use the momentum for change to strengthen the new disability rights paradigm to resist the discounting of persons with disabilities.



The United Nations has provided practical steps that disabled people's organizations can take to embrace the new disability rights paradigm and engage with the implementation of the CRPD. The United Nations Department of Economic and Social Affairs, the Office of the High Commissioner for Human Rights, the Government of Spain, and Fundación ONCE gathered representatives from disabled people's organizations to clarify how to maximize the potential of the CRPD (UN Enable 2007a). In the meeting 'Making it Work: Civil Society Participation in the Implementation of the Convention on the Rights of Persons with Disabilities', the group of experts published an outcome document that contains valuable recommendations (UN Enable 2007b). The recommendations provide guidance to disabled people's organizations and are divided into four broad categories:

1. Principles;
2. Objectives;
3. Strategy; and
4. Activities.

The categories that are most relevant to this paper are the latter two categories. The recommendation related to principles encouraged disabled people's organizations to embrace the standards of the CRPD and to use the principles therein to guide their operations. The category on objectives encourages disabled people's organizations to position themselves to influence the committee of experts under the CRPD, United Nations agencies and state activities. The experts recommended that disabled peoples organizations adopt a strategic direction that:

- works with other disabled people's organizations and that coordinates operations at the national and international levels;
- provides public agencies guidance as to what disabled people's organizations should be consulted;
- works with and influences the CRPD Committee of Experts; and
- encourages United Nations agencies to consult with disabled people's organizations in their operations.

To realize the principles, objectives and strategic direction, the group of experts recommended that disabled people's organizations engage in the following activities:

- to establish thematic working groups to produce training material on the CRPD;
- to develop resources on how to advocate for the implementation of the CRPD;
- to advocate for and contributing to the translation of the CRPD into local languages; and
- to realize awareness raising and education campaigns around the CRPD.

Overall the CRPD is a powerful tool that can be utilized by people involved in every aspect of promoting the rights of persons with disabilities.

Conclusion

Historically society has discounted persons with disabilities and erroneously regarded them as 'defective' and as in need of charity (Waddington and Diller

2002). Persons with disabilities have been directed towards separate parallel tracks of government policies. The wider community had a policy track that recognized persons without any impairment as being fully functional members of society and focused upon developing the potential of that group. The policy track that pertained to persons with disabilities regarded them as targets of interventions. While welfare and rehabilitation interventions can be positive where some impairments require such support, such policies should form part of a wider campaign to empower persons with disabilities. Simply focusing upon 'fixing' people with disabilities has resulted in inferior and exclusionary policies. For example, persons with disabilities had inferior and separate education (Hehir 2005, 2007), were largely restricted to work in sheltered workshops rather than in the private sector (Gilla 2005), were systematically excluded from accessing public transport (Baker and Godwin 2008; Human Rights Commission 2005) and exercising political rights, and were generally regarded as second-class citizens.

Even though persons with disabilities have enjoyed formal protection from existing human rights conventions since 1948, persons with disabilities have rarely enjoyed the full benefits of such rights. In 2006 the United Nations adopted a human rights convention that expressly protects the rights of persons with disabilities. With the rapid ratification and commencement of this convention in 2008, a new disability rights paradigm and scholarship is emerging. The existence of the CRPD means that persons with disabilities do not need to assert they have rights and to argue for an inclusive society. The United Nations and those states that have ratified the CRPD have accepted the non-radical social model and that persons with disabilities are entitled to all the human rights as other members of the community. To ensure the realization of these rights, the CRPD provides a framework for interpreting rights in a way that maximizes social inclusion.

This paper has used the right to work as a case study to show how the CRPD can be used to drive change to increase the ability of persons with disabilities to exercise their rights. Previously, the right to work enabled states to adopt an interpretation of this right in a way that would either maximize or minimize social inclusion. The CRPD has removed this uncertainty through providing specific steps that states need to ensure to enable persons with disabilities to exercise their right to work. The issue moving forward now turns to implementation. Prior to 2006 there were no clear objective criteria to judge policies concerning persons with disabilities. With the advent of the CRPD, scholarship concerning the rights of persons with disabilities and disabled people's organizations can increase the focus upon implementation and use the CRPD as a catalyst for change and a benchmark for good governance. The CRPD re-articulates existing rights, provides clarity on how those rights should be realized for persons with disabilities and provides disabled people's organizations a voice in the implementation of the convention. It now falls to disability rights advocates and scholars to harness the potential of the CRPD and use this resource to agitate for change.

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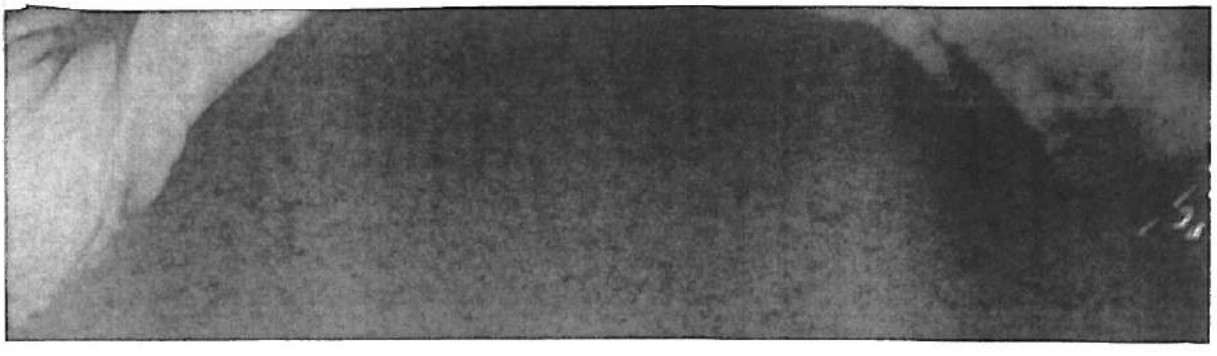

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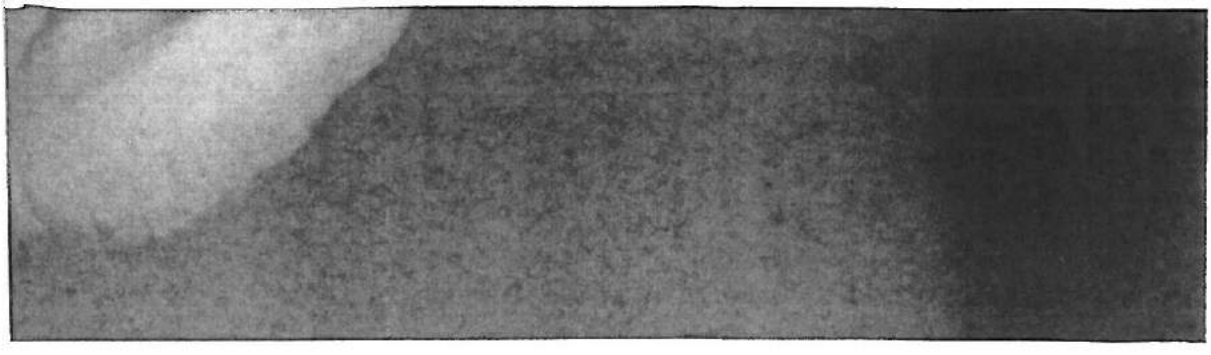

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