**Contribution to the general debate on persons with disabilities in situations of risk and humanitarian emergencies (article 11 of the Convention on the rights of persons with disabilities)**

The Latin American Network of Psychosocial Diversity is a regional organization made up of people with psychosocial disabilities, Mad people, users, former users and survivors of psychiatry, neurodivergent people, among other identities of "psychosocial diversity". Our main objective is to promote a regional movement with an independent position from direct experience, for the promotion and defense of our human rights and the promotion of a new paradigm of psychosocial diversity as part of human diversity.

In response to the call for contributions for the general comment on article 11 of the Convention on the Rights of Persons with Disabilities, on situations of risk and humanitarian emergencies, we have prepared contributions based on a survey we conducted among members of the network. Here are some of the concerns of our group.

Our community is exposed to different types of emergencies, disaster risks, and humanitarian crises in Latin America, including droughts in rural, desert, and highland areas; floods and landslides caused by rains; the earthquakes; the tsunamis; the fires; forced migration; the conflicts; and also authoritarian and repressive governments.

During an emergency, disaster or conflict, we people with psychosocial disabilities face a series of barriers and obstacles, including stigmatization and lack of visibility of our group; the lack of protocols and information on how to assist people with psychosocial disabilities from a rights perspective; the lack of training in the personnel that responds to emergencies and the population in general; cultural and attitudinal barriers; and, in general, the widespread lack of respect for the laws and rights of our collective. Likewise, the spaces of shelters or rescue areas do not meet the universal accessibility needs and much coordination is still needed to attend to emergency situations from an inclusive approach to psychosocial diversity.

In addition, there are specific situations that put people with psychosocial disabilities at greater risk during emergency, disaster and conflict situations, such as being on the streets, precarious housing, overcrowding, institutionalization or deprivation of liberty. This is unfortunately a reality for many people with psychosocial disabilities in our region. Medicalization can also put people's integrity at risk during an emergency because, due to psychiatric drugs, many people do not wake up or become alert easily and may need assistance to evacuate. In addition, many people with psychosocial disabilities are often exposed to stigma, violence, discrimination and mistreatment in their homes and communities that provide shelter or relief, and public policies do not provide them with adequate protection. In fact, it could be said that we people of psychosocial diversity are experts in crisis situations, emergencies and catastrophes because, due to ableism and sanism, our experiences are socially valued like this, as risk situations.

To ensure the inclusion of people with psychosocial disabilities in the prevention of and responses to emergencies, disasters and conflicts, a human rights-based approach to disability is necessary. For this, it is necessary, among other measures:

* Create protection and prevention policies that consider the specific demands and needs of our group.
* Strengthen first aid and psychosocial support measures from a human rights approach, not a biomedical one.
* Include people with psychosocial disabilities in the delivery of information, including through accessible formats and our own mutual support networks.
* Educate and train response personnel and the general population in the disability approach, with the direct participation of people with lived experience.
* Generate inclusive and participatory mechanisms in disaster risk management decision-making, including binding participation mechanisms, not just advisory ones.
* Prioritize people with psychosocial disabilities in humanitarian aid, particularly those deprived of liberty, including those institutionalized.
* Urgently move forward in deinstitutionalization and the prohibition of forced internment.
* Promote the inclusion in the community of people with psychosocial disabilities, including access to housing, education and work.
* Have better statistical information and data on the situation of people with psychosocial disabilities in the countries.

**Latin American Network of Psychosocial Diversity**

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