

# Charter of Trieste on the accessibility to services for all persons

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In 2017 Federsanità ANCI FVG in collaboration with the Friuli Venezia Giulia Autonomous Region, the Regional FVG Health System, the Italian National Institute of Health (ISS), and with the specific support of the National Centre for Telemedicine and New Healthcare Technologies, launched the project *“Accessibility and Health Safety for All”* to support strategies in ensuring the adequate accessibility to services for all people, considering the digital innovations.

Following the results of that previous study and the scientific debates during the EuroScience Open Forum 2020 at Trieste, they announce with *“EIDD – Design for All Europe”* and *“SCIMPULSE Foundation”* the following text as the *“Charter of Trieste on the accessibility to services for all persons”*.

## Introduction

This Charter is based primarily on the text of the *Charter of Fundamental Rights of the European Union*, with particular reference to its Title III dedicated to equality between men and women (art. 23), as well the rights of child (art. 24), of elderly (art. 25), and the integration of persons with disabilities (art. 26).

The key-points of this Charter are also inspired by the documents developed and published during the project *“Accessibility and Health Safety for All”*:

- *“Charter of San Vito al Tagliamento on the promotion and development of robotics and home automation in the new paradigm of integration between hospital and territory”* (17/11/2017).
- *“Charter of Udine: beyond home automation towards a life without barriers for everyone between now and 2030”* (09/11/2018).
- *“Italian Charter of Trieste: for overcoming barriers and borders in care and living environments with the use of artificial intelligence and technological innovations”* (22/11/2019):

These preparatory documents are focused on the use of home automation and robotics for people with disabilities to complete the offer of innovative technologies at the service of people's mobility and autonomy. They also address the related issues concerning how to properly address and govern applications of Big Data, Artificial Intelligence, Machine Learning, Blockchain, Immersive reality, and drones.

Moreover, the charter transposes the principles stated in the EIDD Stockholm Declaration (09 May 2004), The Berlin Act (2005), The Waterford Convention (2006), and The Milan Charter (2007),

adopted by the corresponding Annual General Meetings of the European Institute for Design and Disability.

### **Scenario and objective**

The world is undergoing a cultural, technological and scientific revolution, accelerated by the COVID-19 pandemic and characterized by the progressive digital transformation of society. New digital technologies are spreading at increasing pace, such as Artificial Intelligence (AI), Blockchain, Home Automation, Drones and others.

Technological innovations offer extraordinary opportunities in different human activities with many potential benefits for all, especially for people with disabilities, or they can reinforce biases and barriers if poorly designed and/or governed. Digital innovation should step up to play an important role in achieving the sustainable development goals by 2030, and during the SARS-CoV-2 pandemic a rapid increase in the adoption of digital systems to provide remote medical services and home care has occurred spontaneously with telemedicine, tele-care and home automation.

The main objective of this Charter is to overcome the barriers that hinder access to services and the enjoyment of people's rights, including the mobility and autonomy of persons with disabilities, and to make the best use of digital technologies in daily life as well as in scientific progress.

To this end, the authors of the present Charter call on policy makers, scientists, professionals and all local authorities to support the development of the following actions and key-points, including through direct active participation in technological innovations:

### **Actions and Key-points**

1. The healthcare systems have to manage change in processes turning the introduction of digital innovations in an opportunity to renegotiate the meaning of work in light of the intended values of care and inclusion.
2. All local health systems must be enabled to benefit from the contribution of technologies available for social and health care, investing in personnel education and inviting stakeholders participation. This development must take place in a sustainable way with respect to the resources available and the conditions of the people to whom it is addressed.
3. Such a transformation of the health sector should improve accessibility to services, addressing the causes of inequalities and removing them towards equitable systems development through the appropriate use of telemedicine services and digital innovations.
4. The governance of service innovation should be evaluated on how it delivers on inclusion, mobility, and overall quality of life, for the most vulnerable citizens and people with disabilities, easing a barrier-free living and working environment.
5. It is necessary to deepen the knowledge of the digital tools and the situational awareness of all stakeholders for the correct governance of their introduction and working. This is not only true in the health sector but also in living and working environments. The sharing of evaluations and best practices in combating disabling diseases or physical and mental disabilities would support the path forward. The same can be said of guidelines to overcome architectural barriers through the optimal availability of technologies.
6. In the meantime, institutional representatives and stakeholders have to make efforts to avoid the risk that the lack of technological skills and economic resources, combined with strong

digitalization of services, would create additional barriers and exclusion factors, especially for elderly or disabled people. Therefore, a strong institutional commitment towards increasing technological skills and funding adequate purchasing and distribution of equipments and infrastructures is highly recommended.

7. The removal of barriers to access to services and the enjoyment of human rights requires a multisectoral and multidisciplinary approach, using the most modern concepts of the *"International Classification of Functioning, Disability and Health"* and in accordance with the *"United Nations Convention for rights of people with disabilities"* (2006) and with the recent *"Next Generation EU"* strategy (presented 27 May 2020).
8. Policies dedicated to the use of digital telecommunication technologies, Artificial Intelligence, and other digital innovations, to improve the mobility and autonomy of citizens and people with disabilities should focus on the following elements:
  - organizing independent centres to monitor and promote the implementation and global dissemination of the *"Convention on the Rights of Persons with Disabilities"* (2006);
  - investing in research and innovation, making available the necessary resources in an equitable way to obtain results that can really be used in daily practice;
  - focus on the results of the interventions, as well as on the quality of the procedures;
  - investing in the total removal of architectural, technological, and bureaucratic barriers (*"Zero Barriers"*), in the transition to a paperless healthcare organization, and in social care projects.
9. Professionals in Research & Development as well as in Research & Innovation fields are encouraged to make available the most advanced digital solutions in a spirit of equity and partnerships with local authorities, public and private health or rehabilitation structures, and the latter should embrace best practices in public-private partnerships, and promote and incentivise fair and public benefit oriented intellectual property management practices. All this should promote and guarantee the rights of all citizens in a fair and inclusive way, giving a fundamental contribution to surpass the current and future barriers.

We announce this *"Charter of Trieste on accessibility to services for all people"* advocating and hoping that it be discussed and challenged in the next two years together with institutional stakeholders and citizens' associations. The aim is to reach a widely shared version of it, which will be presented during the 2022 edition of ESOF in Leiden.