

### Preparing for and Responding to Disasters

A global survey in 2013 (by UNISDR) reveals that people with disabilities are rarely consulted about their needs during and after disasters and the recovery efforts fail to take their needs into account. In the event of a sudden disaster, only 20% of respondents could evacuate immediately without difficulty, and 71% of the respondents have no personal preparedness plan. Only 31% answered that they have always someone to help them to evacuate. <http://www.unisdr.org/archive/35032>

The Sendai Framework on Disaster Risk Reduction (March 2015, Third United Nations World Conference on Disaster Risk Reduction) was endorsed by the United Nations in June 2015. The whole document can be downloaded from: <http://www.unisdr.org/we/inform/publications/43291> Paragraph 7 is relevant to the theme of this e-newsletter:

“7. There has to be a broader and a more people-centred preventive approach to disaster risk. Disaster risk reduction practices need to be multi-hazard and multisectoral, inclusive and accessible in order to be efficient and effective. While recognizing their leading, regulatory and coordination role, Governments should engage with relevant stakeholders, including women, children and youth, persons with disabilities, poor people, migrants, indigenous peoples, volunteers, the community of practitioners and older persons in the design and implementation of policies, plans and standards. There is a need for the public and private sectors and civil society organizations, as well as academia and scientific and research institutions, to work more closely together and to create opportunities for collaboration, and for businesses to integrate disaster risk into their management practices.”

This issue shares some of our experiences in preparing for and responding to disasters, in the acute and rebuilding stages, from Japan, China and Indonesia (Australia).

*We bid farewell to Ms Pauline Kleinitz, our regional technical lead in Disability and Rehabilitation. Our communication and work have strengthened in these 4 years, with many thanks for her co-ordination, support and encouragement. Best wishes for the future Pauline, and we look forward to seeing you in future rehabilitation meetings or projects.*

## From Sidney, Australia



### Including People with Disabilities in Disaster Risk Reduction

*Reported by Prof Gwynnyth Llewellyn*

A recently completed two-year Australian Research and Development Award project funded by the Australian Department of Foreign Affairs and Trade focused on building capacity for Disabled Persons Organizations (DPOs) and people with disabilities to be included in community, district and national levels in disaster risk reduction in Indonesia. The collaborative project between the Centre for Disability Research and Policy at the University of Sydney and ASB Indonesia worked in four areas of Indonesia, bringing together the disability community and disaster risk reduction actors and agencies.

An integral part of this project was developing capacity in DPOs to undertake data collection in their communities. The data collected was about functioning and participation of people with disabilities in the community and their disaster knowledge, preparedness and actions in the face of a natural disaster. To do so, the project team developed and trialled the Disaster Risk Resilience Tool. An infographic explaining the DIDR Tool can be accessed at <http://sydney.edu.au/health-sciences/cdrp/Infographic%20DIDR%20Tool%20v2%2009.03.15.pdf>

Fourteen survey teams of people with disabilities and local community workers used the DIDR Tool to interview over 200 people

with disabilities or their carers in four districts. The DIDR tool is the first instrument of its kind, to the best of our knowledge, to provide a framework for assessing the resilience of people with disabilities to natural hazards, and to promote through participation in the interview process and associated workshops, the involvement of people with disabilities in disaster risk reduction. The full report about the DIDR Tool is available at

[http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech\\_Report\\_3\\_DiDR\\_Tool\\_Report\\_FINAL.pdf](http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech_Report_3_DiDR_Tool_Report_FINAL.pdf)

In this project, we also conducted a national survey of agencies involved in disaster risk reduction in Indonesia to understand the barriers and the facilitators that work to include people with disabilities in disaster risk reduction programs and activities. The report of this national survey can be accessed at [http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech\\_Report\\_1\\_MOI\\_DRR\\_Report.pdf](http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech_Report_1_MOI_DRR_Report.pdf)

Five disability- inclusive disaster risk training programs were designed and implemented with DPOs in four Indonesian provinces. The report describing this process of capacity building can be accessed at

[http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech\\_Report\\_2\\_Capacity\\_Building\\_Report.pdf](http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech_Report_2_Capacity_Building_Report.pdf)

To complement this Report we developed Practitioner Guidelines to inform agencies about how to implement the five work training

programs. These Guidelines can be found at [http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech\\_Report\\_2\\_Supplement to Capacity Building Practitioner Guidelines.pdf](http://sydney.edu.au/health-sciences/cdrp/publications/technical-reports/Technical%20Report%20pdfs/Tech_Report_2_Supplement_to_Capacity_Building_Practitioner_Guidelines.pdf)

Newsletters from this project include stories and photos of people with disabilities engaging in training and collecting data out in the field. The newsletters can all be accessed via <http://sydney.edu.au/health-sciences/cdrp/projects/pipddmi.shtml>

People with disabilities have been excluded at all levels - national, provincial/ district and in their local communities - from disaster risk reduction policy, planning and programming in many countries around the world. In the Western Pacific Region there are many countries at substantially higher risk of natural disasters. We also know from the more recent data being released about the situation of people with disabilities in natural disasters that they are between twice and four times more likely to lose their lives than those without disabilities.

At the recent Third United Nations World Conference on Disaster Risk Reduction held in Sendai, Japan in March 2015, the Sendai Declaration was endorsed. This Declaration recognises the critical importance of building resilient communities including people with disabilities in the face of 'increasing impact of disasters and their complexity in many parts of the world'. (The Sendai Declaration can be downloaded at <http://www.unisdr.org/we/inform/publications/43300>)

A very useful awareness raising product developed in this project is a YouTube DVD available at

[https://www.youtube.com/watch?v=4z4Ifn\\_D92I](https://www.youtube.com/watch?v=4z4Ifn_D92I).

This was produced in Indonesia by the DPOs and people with disabilities involved in all aspects of the research and development project. Please watch this to hear firsthand about the experiences of people with disabilities and their motivation and capacity to participate meaningfully in policy, planning and programming in disaster risk reduction.



*Survey team mates climbing up hill during the research (Acknowledgment to ASB Indonesia)*

We are keen to share our experiences in this capacity building project with others working in the field of disability inclusive disaster risk

reduction and would welcome enquiries to Professor Gwynnyth Llewellyn at [gwynnyth.llewellyn@sydney.edu.au](mailto:gwynnyth.llewellyn@sydney.edu.au).



## From NRCD, Japan



### A Research Paper on Disaster Preparedness

*Reported by Dr Yayoi Kitamura, Mr Hiroshi Kawamura, and Dr Kozo Nakamura*

#### Background

At the time of the Hanshin Awaji Great Earthquake Disaster of 1995, a wheelchair user came to an evacuation shelter in a school gymnasium. He found 4 steps at the entrance, no corridor in the hall, and no bathroom for wheelchair users.

The Cabinet Office created a guideline for evacuation of persons with disabilities for the local government. The Ministry of Health, Labor, and Welfare created a manual for the establishment and administration of welfare shelters. However, they were not really utilized by local governments and community organizations. Once again, persons with disabilities suffered from the same difficulties during the Great East Japan Earthquake in 2011.

In the early 2000's, there were disaster preparedness manuals for persons with physical disabilities. However, disaster preparedness manuals for persons with intellectual disabilities, mental illnesses, and autism spectrum disorder were not found at all. Persons with intellectual disabilities were not expected to read such manuals and were left to take care of themselves.

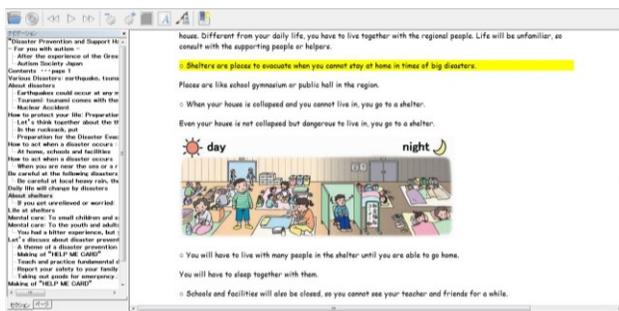
#### Accessible Information on Disaster Preparedness: Collaboration with Persons with Mental Illness

We collaborated with persons with mental illness at Urakawa Bethel's House in Hokkaido, who have experienced a number of earthquakes and tsunamis, to run evacuation drills and to edit evacuation manual using the multimedia DAISY (Digital Accessible Information System) format. The evacuation manual was selected as Innovative Practices 2014 on Accessibility of Zero Project which finds and shares models that improve the daily lives and legal rights of persons with disabilities. <http://zeroproject.org/practice/evacuation-manual-in-daisy-multimedia-format/>

Members who did not participate in the drill were surprised to see that the DAISY manual

contains photos and narrations of their friends, and they joined the following drills.

This project has continued from 2005 through 2015, with the help of town officers and neighborhood agencies. During the Great East Japan Earthquake, when Urakawa harbor was hit by a 2.7 meter-high tsunami, members of Bethel's House succeeded in evacuating to their assigned shelter in only 20 minutes. They then wrote about their experiences and shared them on Twitter.



The multimedia DAISY manual of disaster evacuation drill

## Accessible Information on Disaster Preparedness: Collaboration with Persons with Autism Spectrum Disorder (ASD)

Many institutions for persons with ASD have been located in rural areas that are at risk of harmful landslides and floods. One of these institutions runs evacuation drills every month after experiencing a flood. We reported how successfully persons with severe autism came to learn evacuation behavior through repeated drills. The Japan Autism Society was inspired by our research to edit a handbook on disaster preparedness for persons with ASD and their families in 2009.

This handbook was downloaded up to 20,000 times a day and worked effectively during the Great East Japan Earthquake. We transferred the manual to multimedia DAISY format in both Japanese and English.

Several manuals were created and can be downloaded from the NRCD website: “Disaster and ASD” which contains the experience of mothers of children with ASD in the affected areas of the Great East Japan Earthquake; and the “Disaster Preparedness Book” which was created for students with ASD. Three types of leaflets were created for persons with disabilities and community residents to use. The iPad application “Mamoru Pack” was also developed and distributed for free through the Apple Store.

[http://www.rehab.go.jp/ri/fukushi/ykitamura/kitamurayayoi\\_e.html](http://www.rehab.go.jp/ri/fukushi/ykitamura/kitamurayayoi_e.html)  
<https://itunes.apple.com/app/mamoru-pack/id983651026>

## Participation in Community Disaster Prevention Drills

We have been helping persons with disabilities to participate in community disaster prevention drills for the past three years. In the first year, research staff members lifted a young man in a wheelchair with CP up and down the stairs of a shelter's entrance.



In the second year, members of the community agency were requested to lift the wheelchair themselves. In the third year, the city office purchased a ramp for the stairs and the community agency helped set it up.

We also found a few reasonable and effective ways to make the shelter environment accessible as shown in the photos below:



Sign board to display announcements for deaf residents. Previously, it took two months for sign language interpreters to arrive at the affected areas of the Great East Japan Earthquake.



Commode chair and camp tent which can be used by wheelchair users



Portable camp bed and air mattress

### International Achievements

Mr Hiroshi Kawamura presented on disaster preparedness for persons with disabilities at the UN World Summit on the Information Society 2003 in Geneva and 2005 in Tunis. He lobbied the UN to include the issue of disaster preparedness for persons with disabilities in Article 11 of the UN Convention on the Rights

of Persons with Disabilities, the Incheon Strategies and the Sendai framework 2015-2030 for Disaster Risk Reduction.

The Urakawa Team staged a short play in the Disability Working Session of the World Conference on Disaster Risk Reduction. The play demonstrated the unique difficulties people with schizophrenia experienced during the earthquake. Coping strategies were discussed with the members in social skill training sessions. The actor, who experienced visual hallucination during the earthquake, felt great sense of achievement in evacuating, after practicing the role-playing technique.



*Bethel' House members at the World Conference on Disaster Risk Reduction*

### Challenges

Our research is not yet complete. We know people love to keep manuals - rather than to read them carefully and change their behaviors. We are continuing to develop educational

programs for persons with disabilities and service providers to prepare for emergencies. We also do not know enough about the safest and most effective course for all evacuation scenarios. The disclosure of a person's disability to his/her neighbors is another big issue, since their help may be needed in an emergency.

Internationally, we continue to collaborate with the Pacific Regional Network on Disaster Preparedness for Persons with Disabilities.

## From CRRC, Beijing, China



### Disaster Prevention and Rehabilitation Session Report

*Reported by Ms Zhao Di and Ms Fei Liu*

The 10<sup>th</sup> Beijing International Rehabilitation Forum was held by CRRC at the China National Convention Centre in September, 2015. We took the opportunity to co-operate with The Hong Kong Society for Rehabilitation to organize a session on Disaster Prevention and Rehabilitation.

Delegates from six countries and regions had productive discussions on the participation of persons with disabilities in all stages of disaster and the integration of rehabilitation personnel in emergency and disaster response teams.

The session was opened with an address from Prof Li Jianjun who noted that this session was an active response to Sendai Framework for

Disaster Risk Reduction 2015 – 2030 which requires all states to include people with disabilities in disaster risk reduction programs and to recognize their special needs along with those of children, elderly and other vulnerable populations. Prof Li pointed out that this session reflects the increasing significance of disability inclusive planning as well as the important role of rehabilitation expertise in disaster management.

The session commenced with an overview of “Disability Inclusive Disaster Management” by Mr Mazedul Haque (Bangladesh) representing Handicap International China. This was followed by two presentations focusing on the emergency medical team response: Prof Bai Xiangjun of Tongji Hospital, Wuhan who described the establishment of an emergency team including simulation-based training for medical personnel, and Dr Luo Lun of Chengdu City Second People's Hospital who focused on the formation of a rehabilitation emergency response team and the roles of rehabilitation team, especially occupational therapy, in the rehabilitation and rebuilding stages.

The second part of the seminar focused on rehabilitation issues, starting with a presentation by Ms Elaine Chan, Hong Kong Red Cross, which highlighted their experience with rehabilitation for earthquake survivors. Ms Chan described the process of putting into practice disability inclusive principles in rebuilding and also talked about community education programs (disaster plans). This was

followed by representatives of two Sichuan NGOs, Mr Xia Liang, Yang Kang Rehabilitation Guidance Centre, who focused on the role of social workers, and Mr. Cai Sheng, You and Me Community, who shared his experience in disaster response and noted the flexibility of NGOs to work together with communities.

Mr. Abner N. Manlapaz, Foundation for These-Abled Persons, Philippines, broadened the discussion, coming from the perspective of a person with disability and a board member of a national Disabled Persons Organization which was deeply involved in a post-disaster reconstruction after Typhoon Yolanda in 2013.



Lastly, Ms Sheila Purves represented Japan National Centre for People with Disability and described their work with people with ASD and mental illness to ensure their disaster and emergency preparedness. To support these programs, they have produced several self-help publications which are available in Japanese and English.

Representatives of institutions and individuals that had made tremendous contribution to

disaster control and prevention participated in this session. It highlighted the areas which need more attention and research to ensure that all people with disabilities are included in disaster management as well as the strategies to include rehabilitation experts in the medical disaster response teams for early rehabilitation interventions.

## From Wuhan, China



### Strengthening Research in Disaster Medicine at Tongji Hospital, Wuhan

*Reported by Prof Bai Xiangjun and Prof Lu Min*

Since the Wenchuan Earthquake in 2008, disaster medicine is an issue of great concern to the government and medical experts. At the initiative of Prof Chen An-min, president of Tongji Hospital, and Prof Bernd Domres, president of the German Medical Association, vice president of the German Air Rescue Society, surgical director of University of Tuebingen, and the Sino-German Medical Association, we established a "Sino-German Institute for Disaster Medicine" on December, 2011, based at Tongji Hospital.

The main objectives of the Sino-German Institute for Disaster Medicine is to strengthen the disaster and emergency medicine system in Hubei Province; to carry out medical treatment, training and research; and to promote the development of this specialty in Hubei Province by learning from the German disaster medical system model.

teaching materials in disaster medicine. In addition, our German partner recommended on basic materials for translation including books on disaster medicine, emergency medicine handbook, mass casualty incident (MCI) management manuals, disaster warning manuals, etc.

(3) Establishment of the “Disaster Medicine Training Base” located at Xianning Branch of Tongji Hospital, Huazhong University of Science & Technology. It is combined with a General Practitioners Training Base and is supported by the National Development and Reform Commission General Practitioner Training Base Construction Project Fund. It is planned to accommodate 60 students.

(4) Construction of Hubei Province Regional Disaster and Emergency Medicine System: the service system, based on the German model, will be established in Hubei Province and Wuhan City. Five units are involved in the establishment of the disaster and emergency prevention center.

(5) Establishment of a trauma database: we have created the Sino-German Trauma Database and began to collect data, mainly from Tongji Hospital in China and Essen University Affiliated Hospital in Germany. The collected data includes demographic data, cause of injury, clinical information, treatment outcomes, quality control, etc. The analysis will support our recommendations for improvements of the Chinese trauma care system, medical treatment process, and quality control approaches.

(6) 2013 "Sino-German Emergency and Disaster Medicine" summer class: the class opened in July, 2013 at Tongji Hospital and is co-sponsored by Sino-German Institute for Disaster Medicine and a number of agencies in China and Germany.

2013 “中德急救与急诊医学”暑期学习班  
Summer school 2013-Rescue and Emergency Medicine-VR China



In the future, Tongji Hospital is planning to expand trauma and emergency medical practice, training and research, including in the areas of primary and advanced life support of trauma victims, first aid for sudden mass casualties, leakage of chemical and biological agents and protection from nuclear contamination. We will organize staff to study in Germany the establishment and organization of air ambulance policies and services. It is planned that Wuhan City will be the first site to carry out first aid and air transport, with Tongji Hospital as an air-rescue operation unit. Our goal is to ensure a high-quality, emergency and disaster relief system covering Hubei Province.

## From HKSR, Hong Kong



### The Role of Mutual-Support Groups in the Reconstruction Process after the Wenchuan Earthquake, China

*Reported by Mr Liang Xia, Mr Yuan Gui, Ms Gigi Yeung, and Mr Sai-kit Choi*

During the Wenchuan Earthquake in 2008, about 80,000 people died or were missing, and more than 300,000 persons were injured of whom many became disabled. Whole towns and villages involved in the quake-zones were destroyed and residents who survived had to temporarily move out to neighboring villages/cities and wait for the rebuilding or relocation of their homes. Those people suffered from physical injuries and encountered many barriers to their participation in daily activities, but they also lost their social connections, community networks and their homes in every sense of the word.

#### Responding to Disasters

Through intervention of social workers and therapists, we aimed to improve the abilities of people with disabilities and to enhance the rebuilding of communities and social networks. Through home visits, workshops, gatherings, interest groups, as well as meeting special and individual needs, we encouraged people with disabilities to go out and meet each other. Gradually, social relationships and new bondings were established. This model of forming mutual support groups was mainly initiated by our team of social workers and therapists.

#### Recovery from Disasters

We stressed that the mutual-support group belonged to every group member. They may share health issues, welfare information and neighborhood support through the group platform. This is important for the functional, social and psychological recovery of members. At the same time, the interdisciplinary team worked together with the groups to promote environmental modifications and advocate programs (such as a “barrier-free community awareness day”) which enable people with disabilities to participate in their daily activities and regain a meaningful life. While most of the earthquake response teams and organizations withdrew from the earthquake-zones after two to three years, the mutual-support groups sustained and became rooted in the communities.

Throughout the recovery period, the social workers, together with group members, identified potential group leaders and provided training. The role of the social workers faded out and the groups were empowered to self-run by their core group leaders. Through this capacity building process, people with disabilities developed a stronger platform, realizing their own potential and roles, not only as recipients but also as contributors to rebuilding of their community. People with disabilities were no longer lonely and isolated; they were better equipped and supported by a strong bonding to face future disasters.

## Preparing for Future Disasters

The mutual-support groups were purposefully connected with local government and are promoting activities for people with disabilities hand-in-hand with local authorities, such as the Disabled Persons Federations. This not only enhances the status and impact of the groups, but also arouses public awareness of people with disabilities and their abilities. This enables inclusion of the groups in policy making, education and preparation for future emergencies and response in times of crisis. A stronger community network and higher awareness of the public toward the people with disabilities is crucial for future disasters preparedness.

Some related materials can be found at the sites below (in Chinese). If you are unable to download these, please send an email to [int\\_china@rehab society.org.hk](mailto:int_china@rehab society.org.hk)

A Manual about Forming Self-help Groups (Chinese only):

<https://drive.google.com/file/d/0B7E6uqiPYL2UVVJEUFPXRlhWbW8/view?usp=sharing>

Two videos showing the HKSR “Community Resources Project”, our response to the 2008 Wenchuan Earthquake, documenting the first and second stages of a three year project (2009-2012) (Chinese with Chinese subtitles)

<https://sites.google.com/a/rehab society.org.hk/sichuan/>



## More News and Updates

### From NRCD, Japan

### Exposure Visit to NRCD and Assistive Devices Service Programs, Sept. 4th

NRCD carried out a half-day site visit program in collaboration with WPRO for participants of the 3<sup>rd</sup> Asia-Pacific CBR Congress. The purpose of the visit was to provide the participants with an opportunity to view the comprehensive rehabilitation services and the wide range of assistive device services in Japan.

Presentations on service provision systems of assistive devices in Japan and on research projects at NRCDC were given. Afterward, the participants toured the medical rehabilitation services in the hospital and assistive products of Research Institute.

We had 16 participants from China, Hong Kong, Philippines, Fiji, and Nepal, including Ms Pauline Kleinitz, WPRO. It was our pleasure that delegates from 2 WHOCCs: Hong-Kong Society for Rehabilitation and Sun-Yat Sen University First Affiliated Hospital participated in our visit.



We would like to express our gratitude to Ms Pauline Kleinitz for facilitating such a good opportunity for meeting people from Asia Pacific region and share experiences.



## From Guangzhou, China



### News from Sun-yat Sen University First Affiliated Hospital, Guangzhou

*Reported by Prof Huang Dongfeng and Dr Le Li*

#### Forum on Changing Practices of CBR: Mar 26-27, 2015, Guangzhou

CBR is a well-established approach in China that has been employed by government and non-government organizations for many years. China's WHO CCs have played important roles in translating and disseminating the Joint Position Paper (2004), the WHO CBR Guidelines, World Report on Disability and other documents advocating CBR.

Led by Prof Zhuo Dahong, Guangzhou and Hong Kong WHO CCs organized this international seminar in Guangzhou, with the support of Wuhan and Beijing's centres. The purpose of the seminar was to explore the current status of CBR in China in light of other regional experiences shared by experts from Australia, Malaysia and Thailand.



Ms Ros Madden, University of Sydney, led a workshop on the Monitoring Manual and Menu recently produced by University of Sydney team. The manual can be accessed at <http://sydney.edu.au/health-sciences/cdrp/cbr-monitoring-manual.pdf>

This was followed by a discussion forum on the status of CBR in China. On the second day, experiences from the region and China were shared followed with good discussion.

### **2015 Three-Minute Economically Developing Countries (EDCs) Micro-Grant Competition**

This summer, the International Society of Biomechanics (ISB) held its 25<sup>th</sup> Annual Conference, Glasgow, Scotland. Recognizing that sustainable solutions to challenges in EDCs are initiated by local researchers, a three-minute micro-grant competition was held. The purpose of this competition was to support initiatives ideas that promote research, education, and the provision of healthcare in the field of biomechanics in developing countries while raising awareness to related challenges within the ISB community.

The micro-grant was awarded to the team that presented in three minutes the best proposal for a project that: employs biomechanics to address challenges in an underrepresented community; provides biomechanics training and education in EDCs; and fosters biomechanics growth in EDCs.

Our Sun Yat-sen team, led by Dr. Le Li, received the highest score and won the first prize of the

competition. We received a 1000 GBP grant to complete the project “Free Your Body”.

The project will provide free 3D motion analysis to low-income people with disabilities who wish to assemble a prosthesis and/or orthosis in a teaching hospital in Guangzhou, China.

The objectives of this project are to apply biomechanical analysis for people in need and to provide education and training to Undergraduate prosthetists/orthotists. The budget is 44 USD for each examination and administration fee, which is supported by the awarded EDC grant. The selection of clients is based on their socioeconomic status. In addition, we will disseminate posters or leaflets to foster biomechanics in the communities.

Dear Friends and Colleagues,

**Professor Zhuo Dahong**, who was Director of the WHO Collaborating Centre, First Affiliated Hospital, Sun-yat Sen University, Guangzhou, since 1987, passed away on 27 May 2015, after a brief illness. Professor Zhuo was an amazing teacher, who took up the responsibility of communicating and disseminating international trends throughout China, while presenting China's experiences at WHO and other conferences.

Dr David Fang (Director, Hong Kong WHO CC) writes:

In memory of our colleague and good friend, Professor Zhuo Dahong

Professor Zhuo Dahong was a most diligent, committed, pleasant and learned academic, and always our staunch ally. Through the years, whenever we called on him to assist, he never failed to give us his best. His contributions to the development of rehabilitation in China, will go down in history, and will be remembered by countless beneficiaries. His many books and papers in Chinese and in English promoting traditional exercise, rehabilitation and music therapy will continue to inspire the young professionals. His work was very broad, and his impact deep, but in particular we remember how consistently he promoted the education of therapists and supported the development of community-based rehabilitation programmes from the very initial stages.



We will surely miss his warm friendship, lingering smile and illuminating lectures. We will always cherish and be inspired by our memories of Professor Zhuo.