



ACE Communication Ireland

A Summary of the Submissions Received by the DCEDIY on the Draft Initial State Report UNCRPD

Short Version

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Section 1: Introduction

The Minister of State with responsibility for Disability, Ms. Anne Rabbitte T.D. published the Draft Initial State Report under the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in December 2020. The Draft Initial State Report was published for consultation and submissions invited from interested parties.

In total, the Department of Children, Equality, Disability, Integration and Youth (DCEDIY) received 72 submissions with over 1000 pages of commentary. These came from individuals and a wide range of stakeholder groups, including Disabled Person's Organisations (DPOs), representative organisations, law departments, sporting bodies, and advocacy organisations.

Submissions were reviewed and analysed. This report briefly summarises their main content.

It should be noted that the submissions received included substantial submissions by:

- The Coalition of Disabled Persons Organisations (DPO Coalition);
- Individual DPOs; and
- The Disability Participation and Consultation Network.

The DPO Coalition is an alliance of disabled people and their organisations that formed a coalition specifically to engage in the reporting process on the UNCRPD.

The Disability Participation and Consultation Network is a grouping of disabled people, disability organisations and DPOs that was formed in 2020 in order to ensure that disabled people can participate fully in the development of policy and legislation.

Key principles

Across the various submissions, a number of key principles or values emerged. These were considered crucial to the implementation and monitoring of the CRPD:

- A vision of a more inclusive, diverse, and equal society.
- A vision of a society where the value and uniqueness of each individual is accepted and appreciated, and they can achieve their potential.
- A recognition that DPOs should be intrinsic to all decision-making and governance of issues relating to the lives of persons with disabilities. A commitment from the State to provide the necessary funding and supports to ensure this can happen.

- A commitment to the delivery of person-centred services and supports as opposed to a one-size-fits-all design.
- A rights-based approach. An understanding that persons with disabilities have the right to participate in all aspects of society on an equal basis to their non-disabled peers.
- A recognition that Ireland must do more to promote the rights of persons with disabilities and other marginalised groups.
- An understanding that the principles of ‘will and preference’ must be the guiding framework for listening and responding to the voice of the persons with a disability.
- A commitment to putting the views of persons with disabilities at the centre of the monitoring and review of the CRPD. Respect for persons with disabilities as experts with living experience. A willingness to listen to the living realities, barriers, and challenges that exist for persons with disabilities in Ireland, and to make changes.
- Processes built on the fundamental principle of ‘Nothing about us without us’. A commitment to ensuring that persons with disabilities **participate fully from the outset** in the planning, design, management, and monitoring of any initiative, strategy, policy, or law that impacts on their lives.
- Greater partnership and a wider ‘shared responsibility’ going forward to implement the CRPD and reflect on our progress.
- An acknowledgement of the role of Irish civil society in the implementation of the CRPD and in ensuring all citizens can lead meaningful lives. A commitment to building inclusive communities where the needs of persons with disabilities are considered as part of mainstream policies and legislation.
- An acknowledgement of the shift required in thinking, practice, and provision to make real progress in the realisation of rights for persons with disabilities in Ireland. A commitment to removing institutional and attitudinal barriers that exist in society.
- A recognition that the provision of accessible information is crucial to enable persons with disabilities to assert their rights and participate fully in society.

Section 2: General Feedback

Views on the Initial Draft State Report ranged from ‘comprehensive’ and ‘clear’ to ‘aspirational’, ‘lacking detail’ or ‘too focused on the future’. Submissions commented that the Draft Report shows how far Ireland has come in recent years, particularly with regards to the development of policies and legislation, but also highlights how much work remains to be done if a real difference is to be made. A number of submissions expressed concern that the perspectives of persons with disabilities were absent from the Draft Report.

Collaborative working

There was a strong consensus that a more co-ordinated approach to the implementation of the CRPD was needed at local and national level. Presently, services and supports are considered to be fragmented, with too many departments, providers, agencies, and charities involved. Government departments and agencies need to work together to support the implementation of the CRPD and address the barriers faced by persons with disabilities.

Optional Protocol

Most submissions called for Ireland to ratify the Optional Protocol without delay. This would promote accountability and transparency in the implementation of the CRPD.

Feedback on the development, purpose, and structure of the Draft Report

The lack of involvement of persons with disabilities in the design, development, and delivery of the consultation process and the Draft Report was noted in some submissions, as was the lack of accessible consultation methods.

The State Report was identified as an opportunity to show that the implementation of the CRPD is a priority area for Government and to emphasise the importance of a rights-based approach to disability. It should clearly communicate progress to date and reflect shortcomings. It must outline resources and funding available to current and future projects, and establish clear lines of accountability.

Many submissions agreed that the Draft Report does not set out the realities of underfunding and the chronic shortage of resources. Concern was expressed by individuals and groups about a lack of investment which has resulted in high levels of unmet needs across the country, and which has prevented persons with disabilities from realising their rights. It was pointed out that funding and resources may need to be reoriented to ensure the full participation of disabled people in decision-making and in Irish society. Service provider organisations requested further discussion on future service models.

The Draft Report sets out the current position in respect to each article of the Convention. A number of submissions suggested the State Report should highlight cross-cutting themes, relevant to a number of articles and essential to the implementation of the Convention.

Comments on the content of the State Report

The Assisted Decision Making (Capacity) Act 2015 (ADMC 2015)

There was widespread agreement that the ADCM 2015 and the establishment of the Decision Support Service is central to CRPD compliance, and significant to many articles in the Convention. However, the Draft Report is not clear that this legislation has not been fully commenced to date and does not give a clear timeframe for when this will happen.

The Disability Participation and Consultation Network (DPCN)

Many submissions welcomed the establishment of the DPCN, noted its importance to the implementation of the CRPD, and looked forward to its involvement in the monitoring of the CRPD into the future. The DPCN was viewed as essential to ensuring the voice of persons with disabilities is heard, and further information was sought on its function and funding.

Language use

There were diverse opinions on language use in the State Report. There was an acceptance that the language used presently reflects the ‘person-first’ approach in the CRPD. However, DPOs and other representative organisations highlighted the importance of recognising and responding to the different ways that people choose to identify themselves.

Understanding the social model of disability

Some submissions expressed concern that the Draft Report was too ‘medical’ and reflected a poor understanding of the social model of disability. They expressed the view that the Draft Report did not reflect the true understanding of disability promoted by the CRPD.

Reflecting the living realities for persons with disabilities

There was a strong consensus that the Draft Report does not portray the living experiences of persons with disabilities in Ireland. DPOs and representative organisations felt the Report did not adequately address the key issues for persons with disabilities in Ireland or highlight the barriers and challenges they face on a daily basis.

Implementation of Programmes, Policies, Strategies and Legislation

There was agreement that the Draft Report identifies an impressive range of programmes, policies, strategies, and legislation that have been developed in recent years. However, there was much concern about:

- a) the lack of detail of implementation – there is a sense that the implementation of many of the policies, strategies, and legislation has been extremely slow
- b) the listing of and over-reliance on developments and actions which have not actually happened or been fully enacted
- c) a lack of commitment to fully implementing policies and programmes and to addressing gaps in legislation which hinder the implementation of the CRPD.

There was a request for the State Report to include data and follow-up information on programmes, policies, strategies, and legislation. This should include measurable actions and outcomes, implementation plans and timelines, assessments of effectiveness and barriers, evidence of monitoring and evaluation mechanisms, and clarification on how persons with disabilities would be involved.

Representing the full range of disabilities

Several submissions suggested that some disability types are under-represented in the Draft Report. These included sensory disabilities, Autism, intellectual disabilities, psychosocial disabilities, and hidden disabilities.

Reference to EU and international laws and policies

It was suggested that the finalised State Report could better highlight EU disability law and policy and provide additional information on how Ireland plans to implement Directives such as the Employment Equality Directive, the EU Web Accessibility Drive, and the Audiovisual Media Services Directive. The Report should refer to the EU Charter, the Strategy for the Rights of Persons with Disabilities 2021-2030, and the European Pillar of Social Rights. There was a call for further detail on specific projects supported or co-funded by the EU. The Joint Committee for Disability Matters identified the need to ensure that all international funding is assessed to ensure alignment with the CRPD.

Section 3: Specific feedback on each article in the Convention

3.1. Articles 1 to 5

- The State Report should discuss the extent to which Irish policies have embraced, and will embrace in the future, a human rights approach to disability.
- The Report must reflect the UN Committee's new model of inclusive equality and intersectionality, and this must be considered when planning for inclusion to ensure truly inclusive societies.
- The State should outline effective and appropriate measures to raise awareness throughout society of the rights, dignity, capabilities, and contributions of disabled people, and combat stereotypes and prejudice.
- DPOs are the only recognised representative organisations for disabled persons. The State should clearly differentiate between DPOs and non-DPOs, and outline how it will provide recognition, prioritisation, supports, and resources to DPOs.
- Different definitions of disability are given in the Report. Some are outdated and should be revised to reflect the social model of disability and a rights-based approach. All policies and laws should align with revised definitions.
- Legal recognition for the practice of independent advocacy is central to CRPD compliance. An independent advocacy service with statutory rights and provision for more proactive investigative mechanisms is necessary.
- It was noted that there is insufficient information in the Draft Report on progress in relation to the National Disability Inclusion Strategy 2017-2021 (NDIS), and the Comprehensive Employment Strategy for People with Disabilities 2015 – 2024 (CES).

- There is no mention of asylum seekers with disabilities in Direct Provision. This particular group of disabled people are one of the most marginalised and potentially most vulnerable population groups of disabled persons in Ireland who require specific and targeted attention in the State Report.
- A number of changes are required to bring about a legislative shift to an enhanced rights-based focus, including changes to the Equal Status Acts and the Disability Act.

3.2. Article 6 - Women with disabilities

- Disabled women face additional discrimination because of their gender. All strategies, policies, and legislation relevant to the lives of disabled women must be gender, ethnicity, and disability proofed.
- The discourse on disabled women has often been limited to discussion of health needs rather than the right to participate in the civil, political, economic, social, and cultural life of our communities and corresponding barriers to this.
- Full implementation of the Women's Health Taskforce which focuses on improving women's health outcomes and their experiences of healthcare, is essential.
- An urgent review of maternity and gynaecological services is required, along with further research on the specific needs of women with disabilities.
- There should be a commitment to supporting women with disabilities around their general sexual health and the unique challenges they face in accessing support.
- The State must ensure that national health measures are targeted at women with a disability. The National Cancer Screening Programmes should be inclusive and customised to the needs of women with a disability.
- There should be specific policy development and provision of services to combat violence against disabled women.

3.3. Article 7 - Children with disabilities

- The Draft Report should provide information on the concrete measures adopted to raise awareness of the rights of children with disabilities among children with disabilities, parents and relatives, staff working with children, and the community.
- The State Report must provide information on the legislative provisions and any additional measures in place which allow or limit the participation of children and young people with disabilities and say how the voices of children with disabilities will be included in implementation of the CRPD and in any decisions which affect them.
- The State Report must provide information on measures to prevent the institutionalisation of children with disabilities.

- The State should say how it will move from a diagnostic-led model with statutory entitlement to assessment only, to a rights-based intervention-focused model of provision.
- Lack of progress with the implementation of Progressing Disability Services (PDS), and the corresponding issues, are not referenced in the Draft Report. There must be specific HSE investment in specialist children's services as part of PDS.
- The State Report must recognise that early intervention is crucial for all children with disabilities and ensure equal access. The Draft Report fails to highlight the delays that children and their families experience in accessing time critical medical, educational, or therapy services. It fails to acknowledge that a lack of access means children can have enduring needs into adulthood and less opportunities in life.
- The Report does not highlight the lack of supports for children, young people, and their families during key transitional stages, or outline plans to introduce supports.
- The State Report should outline actions for the development of Child and Adolescent Mental Health Services, under Sharing the Vision. Reforms to the 2001 Mental Health Act are required and should be referenced.
- Children should have the opportunity to be involved in the Personalised Budgets project and should have access to Personal Assistance (PA) Services.

3.4. Article 8 - Awareness-raising

- There should be more clarity on measures to combat stigmas, stereotypes, and harmful attitudes towards persons with disabilities. This includes information on anti-bullying and the reduction of hate crimes.
- The Draft Report does not say how it will ensure that the Public Sector Duty is implemented so staff are aware of their obligations to treat people equally.
- Disability Awareness Training must be designed and delivered by persons with disabilities and underpinned by human rights and the social model of disability. There must be a plan and timeline for all public sector employees to receive Disability Awareness Training.
- More information should be provided on the active participation of disabled people and their representative organisations in awareness-raising campaigns, for example, Make Way Day or #Purplelights.
- There should be a plan for awareness-raising in relation to the ADMC Act 2015. For example, most Wards of Court and their families are totally unaware of how the Wardship system and the proposed Decision Support Service will work.

- The Draft Report fails to identify any approach to ensure that media portrayals of persons with disabilities are in line with a human rights based approach to persons with disabilities.
- The Government has failed to take cognisance of the fact that many people are not computer literate, do not have access to broadband, and cannot engage with much public information as it is currently presented.

3.5. Article 9 - Accessibility

- There is a lack of joined up thinking in how systems are developed in terms of accessibility and the Draft Report did not capture this.
- There is little evidence of extension beyond Part M regulations to Universal Design. The regulations must be revised to incorporate design guidance improvements which deliver buildings and environments that are fully accessible to everyone.
- Disability Audits should be undertaken of all public buildings and institutions, including healthcare, judicial, and educational establishments.
- The State Report should discuss further the role of access officers. The Draft Report does not explain how the role of access officers will be monitored and co-ordinated.
- The CRPD supports the right to travel independently. While urban areas are served relatively well, in many rural areas, there is no public transport available. The shared space planning concept does not work for many persons with disabilities, and they are finding their streetscape is becoming more threatening.
- Multiple barriers regarding the accessibility of transport were identified. These ranged from bus stop design impacting on persons with reduced vision to the requirement of advanced notice to book a train.
- There is a need for guides and sign language interpreters in public buildings. Some services are not available to persons with disabilities because staff do not have Irish Sign Language (ISL) and cannot communicate with ISL users, and vice versa.
- The closure of bank branches and post offices and the inaccessibility of on-line services for many people with disabilities or and/or those with underdeveloped digital skills is a significant factor in financial exclusion.
- There is no data in the State Report on the numbers of people affected by the lack of Changing Places, the impact on their lives, and their enjoyment of other rights vital to living a life with dignity and equality.

3.6. Article 10 - Right to life

- An important question that needs to be asked is whether or not the lives of some older persons and persons with disabilities were put at greater risk by virtue of the fact that they were living in nursing homes during the Covid 19 pandemic.
- In order to ensure people’s human rights are promoted and protected, there is a need for a stronger regulatory framework for people in long-term residential care.
- Persons with disabilities, their family members, human rights bodies, and other advocates have expressed significant concerns about the Dying with Dignity Bill, and euthanasia and assisted suicide laws. The Draft Report does not address concerns about the policy consequences and implications for people with disabilities.

3.7. Article 11 - Situations of risk and humanitarian emergencies

- The Draft Report fails to recognise that persons with disabilities were more significantly impacted than others during the Covid-19 pandemic.
- The State must examine the impact of the Covid-19 response on the rights of disabled people and outline the measures taken to protect the totality of the rights of persons with disabilities throughout the Covid-19 pandemic. More information on the ‘ethical framework for decision making in a pandemic’ is required.
- The move to remote and blended learning left some students with disabilities behind in their education. Some do not have access to the necessary IT equipment or assistive technologies at home, and public library services are not an option for them. The Draft Report does not give detail on the impact of school closures on these students, or the measures (or lack of) put in place to support them.
- Disability day and respite services were slow to be re-established after the initial lockdown. Many people still attend day services on a part-time basis and little respite has been available. Access to PA support, transport, and home help was limited during the pandemic. The risk of isolation, loss of contact with friends, loss of work or day service activities, together with the increased dependence of family support has had a significant impact on the lives of persons with disabilities.
- Since the Covid crisis began, GP, local services, and hospital clinical services have been curtailed. The cost of this in terms of further disability caused is unknown but will be significant. Covid-19 has impacted specific services such as mental health, neurorehabilitation, dental, and ophthalmology.
- During the pandemic, access had been granted to requirements previously denied to persons with disabilities including remote work, remote education, telemedicine, and online events. There is concern that as we recover from the pandemic, these gains for access will be lost. The State must ensure that we “build back better” and

the State Report should outline all measures which will be taken to ensure that disabled people and their full rights are included in this process.

3.8. Article 12 - Equal recognition before the law

- Many of the substantive provisions of the Assisted Decision-Making Act 2015 (ADMC) have not been commenced. Full commencement of the ADCM Act is a matter of urgency. The Report should say how the State will practically implement capacity legislation that is compliant with the Convention.
- The State Report should outline plans to remove its reservation on Article 12.
- More work is required by the State to address the interface of the ADCM Act and existing legislation and national policies such as the Safeguarding Policy, Consent Policy, Mental Health Act 2001, Nursing Homes Scheme, Persons detained without consent in residential services, Hospitals, and Mental Health services.
- Until the ADCM Act is fully commenced, people with disabilities will continue to be made Wards of Court. This system is wholly outdated and stops persons with disabilities and their families receiving equal recognition before the law.
- Adequate financial and human resources must be given to the Legal Aid Board (LAB) to enable people with disabilities to vindicate their rights in court.
- The concept of consent and choice remains unexplored in the Draft Report. Significant reform of the Mental Health Act 2001 is required to bring it into compliance with international human rights law.
- The State Report should outline the supports that will be provided for all sectors, including the Courts Service, legal and financial service providers, An Garda Síochána, Prison Services, Direct Provision, disability services, and health and social care providers to prepare for the urgent commencement of the 2015 Act.

3.9. Article 13 - Access to Justice

- The State Report should include information on measures to raise awareness among persons with disabilities of their options to access justice and redress.
- The State should provide information on the accommodations available to persons with disabilities who interact with the justice system as complainants, respondents, witnesses, jury members, parties to legal action, or defendants.
- The discussion in the Draft Report on access to the court system is almost exclusively focused on physical accessibility and does not cover other accessibility problems, such as lack of accessible information and communication supports, lack of disability awareness training, negative attitudes, and stigma towards people with disabilities.

- The Draft Report states that ‘draft rules of court to facilitate the operation of the new capacity regime have been prepared by the Courts Service’. It would be useful if these draft rules of court were published so that stakeholders can make comments.
- The bench book entitled ‘The Equal Treatment of Persons in Court’, is provided to judges, and contains the legal framework concerning disability. This should be available to the public, and in accessible formats. It should be reviewed to take account of requirements under the CRPD.
- The Draft Report does not give any details of the programme of training for those involved in the administration of justice, particularly judges and lawyers. The Government should liaise with the new Judicial Studies Committee to ensure that training in human rights and equality law is given priority.

3.10 Article 14 - Liberty and security of person

- The State needs to explain clearly why Ireland will keep its reservation and declarations to this article.
- Specific information on the Bill on Protection of Liberty Safeguards and the reform of the Mental Health Act 2001, timelines for their completion, and efforts to ensure the meaningful participation of DPOs, needs to be provided in the State Report. Any new legislation should be based on the full implementation of the ADMC Act 2015.
- There should be independent monitoring and review of cases of deprivation of liberty.
- Some of the issues relating to deprivation of liberty arise because of fear of risk-taking embedded throughout the health and social care system.
- Examples of violations of Article 13 include young people required to reside in nursing homes, staff intervention in preventing persons from leaving a facility, people who do not have dementia inappropriately placed in a secure dementia unit.
- There is a need to hasten the move from congregated settings for people with disabilities and offer real choice for older people as they become more dependent and try to cope with disabilities of various types.

3.11. Article 15- Freedom from torture or cruel, inhuman or degrading treatment or punishment

- The State should outline its position on the use of restraint and seclusion and other aversive practices in all healthcare, educational, and institutional settings. They should detail the monitoring of their use and identify the regulatory measures in place to ensure that these practices are in full compliance with the UNCRPD.

- A review of the use of disciplinary sanctions in prisons should be undertaken to ensure that no one is punished for behaviours that relate to their disabilities. The Irish Prison Service should further examine the use of restricted regimes to identify whether people with disabilities are disproportionately represented.
- The State Report should detail measures taken to ensure asylum seekers with disabilities have appropriate living conditions, accessibility, and reasonable accommodations to prevent cruel, inhumane, or degrading treatment.
- The State should commit to ratifying the Optional Protocol to the Convention against Torture (OPCAT) to guarantee that people with disabilities are free from torture and cruel, inhuman, or degrading treatment or punishment.

3.12. Article 16 - Freedom from exploitation, violence and abuse

- The Draft Report overstates the protections that are in place currently for persons with disabilities. There is a complete lack of legal safeguards to ensure freedom from exploitation, violence, and abuse.
- There should be a commitment in the State Report to appropriate education and training across sectors, including public services, to ensure concerns of abuse can be recognised, reported, and responded to, and a culture of 'zero tolerance' developed.
- Persons with a disability should be supported, with appropriate training and accessible information, in how to avoid, recognise, and report instances of exploitation, violence, and abuse.
- Persons with disabilities should be able to access mainstream support services, such as shelters. The State should provide resources to domestic, sexual and gender-based violence services to adequately support disabled people.
- There is a need for national safeguarding legislation and an up-to-date, sector-wide policy on same. Appropriate funding must be provided to organisations to ensure they can meet their obligations in relation to adult safeguarding.
- More is required to strengthen safeguards against financial abuse, including alternatives to remote banking, mobile financial services, greater oversight of publicly funded payments such as pensions, and mandatory specific safeguarding training for staff in financial services.
- The State Report should clarify how the State plans to legislate for disability hate crime and disability hate speech.

3.13. Article 17 - Protecting the integrity of the person

- The State Report should include a longer discussion of how the ADMC Act 2015, and its full commencement, will affect the way that people with disabilities exercise their right to bodily integrity.
- The State Report should highlight where current law does not require free informed consent of the person receiving treatment. Further information is required on situations where treatment can be given without consent, legal safeguards in place to prohibit coercion in healthcare, and the use of physical and chemical restraint.
- Issues of concern in relation to the Mental Health Act 2001, and work on reform to date, should be outlined in the State Report. For example, discrepancies in relation to consent from young people or progress on advanced health directives.
- The State Report should outline the specific domestic measures which ensure that abortion, contraception, and sterilisation are not forced upon disabled women, trans men or non-binary people without their consent.
- Wards of Court do not have the right to their personal integrity and autonomy on an equal basis with others. They do not have the right to be heard or to object, or have adequate advocacy or supports.

3.14. Article 18 - Liberty of movement and nationality

- The State Report should provide details of policies and guidelines in place to ensure the equal treatment of persons with disabilities in relation to migration, asylum, the issuance of passports and entry and residency permits.
- There is no discussion of Direct Provision, the impact it has on refugees with disabilities, and the plans to change the Direct Provision system.
- The State must outline the measures that it will put in place to ensure that nomadic people's right to movement and equal cultural participation is fully recognised and vindicated. Due recognition should be paid to the cultural significance of access to a nomadic way of living to Gypsy, Roma, and Traveller communities.
- The Department of Health should commission a report on the range of healthcare services not currently available in Ireland, with a view to identifying and addressing potential barriers to their access for people with disabilities who are resident in but not citizens of Ireland, are living in the Direct Provision system, or others who have restricted right of travel outside of the State relative to Irish citizens.

3.16. Article 19 - Living independently and being included in the community

- It is essential that article 19 goes beyond "living in the community" and refers to "being included in the community". Inclusive communities need to be pursued and achieved, ensuring that events, activities, and facilities are accessible and inclusive.
- The State Report should include information on cross-governmental policies and programmes to combat social exclusion and segregation of people with disabilities.
- The Draft Report does not prioritise the development of a Housing and Disability Strategy. Local authorities should have an allocation of social housing for persons with disabilities. There must be statutory effect to the National Guidelines for the Assessment and Allocation Process for Housing Provision for People with Disabilities.
- Many people with disabilities have little or no choice in terms of their living accommodation. There is a need for a range of accommodation options to ensure that people can live independently in their communities, and a path to independent living for people with disabilities who are currently living with family.
- There is no mention of the disproportionate amount of people with disabilities who are homeless, or analysis of the accessibility of homelessness supports.
- The application process for housing adaptation grants is bureaucratic. There is no analysis of the difficulties persons with disabilities experience trying to access the grant, or recognition that the level of the grant falls below current building costs.
- Local authorities must take into consideration the specific needs of persons who are blind or vision impaired when allocating social housing, for example, public transport links, access to community health facilities, secure garden area for a guide dog. These requirements should be part of housing allocation policies.
- Further detail should be provided on the allocation of finance and resources for personal assistance and the demand for personal assistance services. This service is resource led and not demand led, which leaves people with disabilities in a very vulnerable situation and at the mercy of department budgets.
- The Draft Report references the Task Force on Personalised Budgets. The Report does not highlight the low numbers of people currently in receipt of a Personalised Budget or propose a wider implementation to ensure access for as many people as possible. Further data should be provided on numbers included in the pilot project, criteria for participation, the timeline, and operation to date. Clarity is required on the resource allocation model used to determine the funding of personalised budgets, and the involvement of the representative organisations of persons with disabilities in its development.

3.17. Article 20 - Personal mobility

- Mobility aids, devices, and assistive technology (AT) must be available to all persons with disabilities at an affordable cost. Access must not be impeded by age, disability type, or geographic location. Application processes must be simplified. There must be a commitment in the State Report to fund skills training so adults and children can learn how to use these supports.
- The State Report should detail measures to encourage the research, development, and production of accessibility aids and other forms of assistive technology.
- A large cohort of people, not eligible for the medical card, must pay for aids and appliances themselves. This leaves many people without the right equipment. People who have received these items through the medical card are subject to waiting lists and local budgets, which results in them using ill-fitting equipment.
- Persons who are deafblind require a deafblind interpreter to facilitate them to take an active part in their everyday life. Most people who are deafblind do not have sufficient residual sight to be able to travel safely by relying on their eyesight. The State should increase the financial support for technology that utilizes kinaesthetic and tactile senses, including electronic mobility aids and global positioning systems.
- Access to hospital transport services to attend medical appointments must be made available to people with disabilities.
- The Disabled Person's Parking Permits are hard to apply successfully for and the criteria are unclear. The Disabled Drivers and Passengers Scheme should be reviewed to ensure it still provides adequate financial means for disabled drivers and passengers to purchase a vehicle. The Motorised Transport Grant and the Mobility Allowance scheme should be reinstated.
- The Draft Report makes no mention of the use of assistance dogs or other support animals by disabled people. The State should outline its position regarding the use of these animals as personal mobility aids and outline the steps that have been taken, if any, to resource and support their use.

3.16. Article 21 - Freedom of expression and opinion and access to information

- The State Report should emphasise the need for all public information to be made available in accessible formats such as Braille, audio, video, Plain English, Easy to Read, sign language, large print, and other electronic formats.
- The State Report should emphasise the need for all public service websites to comply with the standards for web accessibility (W3C).
- The State Report should include information on the policies in place to monitor and address accessibility issues and to improve awareness of information accessibility

among its staff and practitioners. The State should provide detail on the involvement of disabled people in the development and implementation of such policies.

- The Draft Report does not discuss the experience of using sign language in Ireland. There is a shortage of interpreters, they are expensive to hire, and the State only covers the expense in certain cases. There is also a severe lack of deafblind interpreters/interveners who are trained in Tactile Sign Language.
- There is a need for the ongoing promotion of and support for Lámh, a manual sign system to support communication. This system is used by many children and adults with intellectual disabilities and communication needs across Ireland.
- The availability of audio described television programmes enables people with sight loss to participate in cultural and social life, just as their peers do. There should be improved audio description services in broadcasting and streaming services, with specific targets set for both homegrown productions and franchise purchases.

3.17. Article 22 - Respect for Privacy

- The Report does not adequately address the challenges persons with disabilities face in exercising their right to privacy. It fails to acknowledge how inadequate services can have an impact on the right to privacy, for example, lack of private spaces, inaccessible rooms for consultation, inaccessible bathrooms, lack of sign language interpreters, inaccessible letters and reports.
- The State should detail the measures taken to ensure that State bodies and agencies are respectful of disabled people's, and their families', right to privacy and confidentiality on an equal basis with others, and transparent access to the information held on them by the State in line with best practices under GDPR and domestic regulations, principles, and legislation.
- The State should ensure disabled people can access their information and complaints mechanisms on an equal basis with others.
- There is a need for full clarity in relation to the sharing of information/data relating to people with a disability between agencies. There must be clear legal grounds supporting such sharing of data to protect individuals' rights.
- Prisoners with disabilities have equal rights to confidentiality and privacy, including regarding disclosure of a disability or diagnosis. Prison staff do not need to be aware of a prisoner's diagnosis or disability to provide the supports and accommodations required. While prison staff should receive training in forms of communication which are accessible to prisoners with disabilities, this should not be a replacement for professional services when required to protect the privacy of the prisoner.
- The State Report should clarify the measures being taken to improve the respect for privacy of asylum seekers with disabilities and their families living in Direct Provision.

3.18. Article 23 - Respect for home and the family

- There should be a statutory entitlement to homecare with the aim of supporting people to live in dignity and independence in their own homes/communities for as long as possible.
- With regards to relationships, many people with disabilities are unaware of their rights, and the State must ensure that information regarding the rights of people with disabilities is accessible and publicly available.
- There is currently no reference in the Draft Report to sex education for disabled people, or to accessible information about reproductive rights and services and family planning.
- In Section 2 of Article 23, there is a reference to the Health (Regulation of Termination of Pregnancy) Act 2018. The upcoming review of this legislation must include the input of DPOs to ensure that abortion services in Ireland are accessible.
- The State must ensure that contraceptive options laid out under draft plans to introduce free contraception meet the health requirements of disabled women and include contraception decision making.
- The State Report should detail any measures taken to guard against disability discrimination in adoption or fostering processes (relating to both prospective parents and children). There is a need for data to show the number of people with a disability that apply to adopt or foster a child and the success rate of applications. The State Report should provide details of the supports put in place to assist disabled people applying to foster children.
- The Draft Report does not mention statistics on children of parents with disabilities/ and children with disabilities being taken into care, and what this suggests about the current supports for parents with disabilities and children with disabilities. The State must clarify the criteria used in the assessment of parental interventions, and measures taken to guard against disability discrimination in this process.
- The State Report should identify concrete measures to reform parenting support for disabled parents. Disabled parents should be able to access supports such as Personal Assistance Services (PAS). Disabled people are also family members and in the absence of supports such as PAS, are often “dependent” on family supports.
- The State has provided little in the way of tangible supports for carers, such as respite, home support, prioritisation for Covid-19 vaccination.

3.20. Article 24 - Education

- Universal design for learning needs to be more widely implemented. The State Report should detail a comprehensive strategy to transform the education system from a segregated model to a truly inclusive model in line with the Convention.
- The Education for Persons with Special Educational Needs Act 2004 (EPSEN) needs to be reviewed, revised, and implemented.
- The State should provide data on the denial of enrolment or the shortening of school days for disabled children. Discriminative legislation such as the section 29 process should be abolished, and inclusive school admissions policies implemented.
- Adequate SNA provision must be available to support learning and facilitate transitions so students with disabilities have the same opportunities as their peers.
- There is a need to make the education system accessible to those with sensory and multi-sensory disabilities. The communication needs of students with disabilities must be considered when allocating supports. The Department of Education should engage in a meaningful consultation with all stakeholders to develop a new scheme for provision of ISL to D/deaf and Hard of Hearing Children and their families.
- Children with autism may not have the opportunity to have the same educational outcomes as their non-disabled peers due to the many barriers in the system.
- The Draft Report does not identify the low numbers of adults with disabilities at third level, or promote creative thinking and engagement to promote life-long learning and facilitate those with disabilities to be part of this community.
- Specialist Training Provision in education is not on an equal footing with mainstream further education with regards to the funding model. This limits the progress of students with disabilities and those facing mental health challenges.
- The State must revise the funding allocated to ICT equipment for FET students with the aim of meeting student demand and bridging the digital divide.
- Students with disabilities do not have sufficient access to career guidance counsellors. This reflects the low expectations of young persons with disabilities.
- The State should ensure that disabled children are entitled to an Individual Education Plan and that schools collaborate with parents in the development of this plan.
- Supports should be provided to equip schools to deal with mental health difficulties and challenging situations. It is crucial that guidance and CPD are available for all teachers and principals.
- The State should make available data on disabled staff in education services and mainstream schools, and in leadership positions. The recruitment of people with a disability as educators must be supported and encouraged at every level.

3.20 Article 25 - Health

- There is no discussion in the Draft Report of the issues that exist in resourcing healthcare or analysis of the resource gaps in disability-specific health and social care services, particularly community-based services. The State Report needs to give a better sense of the levels of unmet need and plans to remedy this.
- The Draft Report does not reflect the need for health and social services to be person-centred rather than system-centred.
- The Draft Report does not acknowledge the lack of communication supports and accessible information in many healthcare settings.
- The Draft Report does not refer to the cost of healthcare for people with disabilities, or systems in place to reduce the cost of healthcare. The State must recognise that the unaffordability of healthcare for people with disabilities limits their access to the same range, quality, and standards of healthcare as others.
- According to the Convention, health services must be provided “as close as possible to people’s own communities, including rural areas”. The State Report has not addressed this paragraph of Article 25.
- The Draft Report fails to highlight the difficulties that persons with disabilities can experience in getting an appointment with a GP. There are no GPs in some areas and persons with disabilities may need to travel long distances to access a service.
- Mainstream health services can be inaccessible to people with physical disabilities, as they may lack equipment such as hoists.
- The State Report should outline how recommendations from the Irish Society for Disability and Oral Health will be implemented to ensure the needs of people with disabilities are prioritised in the State’s oral health care delivery.
- The Draft Report does not acknowledge the extremely long waiting times for treatments and services, in particular, waiting times for ophthalmology appointments, physiotherapy, psychology, occupational therapy, and counselling.
- The Draft Report does not recognise the need for increased spending on mental health so a wider range of supports and therapies can be offered. Treatments need to be extended beyond medication, and should include, for example, counselling, occupational therapy, or music therapy. More funding is needed for Recovery focused organisations and the knowledge, attitudes and skills learned through these groups need to be respected by mental health professionals.

3.21. Article 26 - Habilitation and Rehabilitation

- There is little discussion in the Draft Report of the implementation of programmes and services, the experiences of people with disabilities using these services, or

statistics on how many people can access these services. There is no discussion of the resourcing of these services, and whether current resources meet demand. There are gaps in services that are not reflected. These include lack of services in rural areas, transport issues, lack of choice, lack of personalised supports.

- The content of the Draft Report fails to convey the lack of progress to date on implementation of existing policy in neurorehabilitation services.
- Investment in community neuro-rehabilitation services and long term supports for people with neurological conditions are critical to providing effective integrated care at every stage of the neuro-rehabilitation pathway.
- Many people who require Assistive Technology find it extremely challenging to know what they need and to secure it in a timely manner. Furthermore, many who would benefit from Assistive Technology are not even aware of what is available. Assistive Technology equipment is “owned” by the school or employer, rather than the student/employee, which hinders communication, educational progression, and job mobility. We would urge the State to ensure that equipment which is sanctioned for a person should remain with them.
- Access to timely diagnosis and rehabilitation can greatly improve outcomes for patients with conditions such as Age-Related Macular Degeneration and many other vision impairment disorders. Maintaining independence, self-care and social connection must be included in any rehabilitation plan.
- The Draft Report references ‘New Directions’ but the data is weak. The Report does not give an update on progress on New Directions and whether it is having a positive impact on disabled people’s lives.

3.22. Article 27 - Work and Employment

- Disabled people experience multiple barriers to employment including lack of workplace flexibility, cost of disability, additional long-term healthcare costs, discrimination, negative attitudes, and stereotypes.
- The Draft Report does not analyse how essential policies link together to ensure that persons with disabilities can maximise their employment opportunities.
- The State must address low pay by increasing the minimum wage to the living wage. Persons with disabilities should not be expected to work voluntarily, in a ‘work experience’ capacity, or on CE schemes on an ongoing basis.
- There is a need for the State to ensure that employment is supported, meaning supports such as a person’s medical card is not removed from them because of employment. Disabled people who begin to earn above certain thresholds can lose secondary benefits which they rely on, such as a free travel pass, blind pension. The ‘Make Work Pay’ report was universally welcomed but has not been implemented.

- The Draft Report does not outline clear implementation of reasonable accommodations to support disabled people in employment. The Wage Subsidy Scheme needs a major review. The Workplace Adaptation Grant should be standardised and must be rolled out to those working remotely without delay.
- The public sector employment target of persons with disabilities is an exceptionally low quota for disabled people. There is little evidence on the ground of the quota for persons with disabilities employed in the public sector having a positive impact on people with a significant disability. The Part 5 monitoring is insufficient.
- Employers should be encouraged to attend and provide disability awareness training. The “Disability Awareness Training Scheme” needs to be open to all employers, not just those who have an employee who has disclosed a disability. The State should roll out without delay an awareness campaign that proactively promotes the Employee Retention Grant Scheme and Workplace Adaptation Grant to employers.
- The absence of committed multi-year ongoing funding to maintain initiatives, such as the Ability Project, compromises the potential to deliver effective change as the issues being encountered require significant time to be addressed.
- Ireland has entered a reservation under Article 27. The State should outline any plans to withdraw this reservation which restricts disabled people’s opportunity to work in a number of frontline roles in the public sector.
- Enterprise and start-up support should ensure that persons with a disability can access opportunities to create new businesses and become employers themselves.

3.23. Article 28 - Adequate standard of living and social protection

- People with a disability living in Ireland have a high “at risk of poverty” rate. This is not acknowledged in the Draft Report. There are no specific targets in the Road Map for Social Inclusion to address high levels of poverty experienced by disabled people.
- The additional expenses to living with a disability are not recognised by the State which means that persons with disabilities are caught in a poverty trap. Social welfare rates do not factor in the additional costs faced by people with disabilities. The State must implement a cost of disability payment as a matter of priority.
- The Disability Allowance, and other social welfare payments for people with disabilities, are insufficient.
- The income of the family is severely impacted by their caring duties. One or both parents may have to give up work. Some families cannot afford the basics. Parents need to be supported so they can access work to support their family.
- Persons with disabilities often have to pay for private health insurance or pay privately for therapies, treatments, medical equipment, aids and appliances, and

personal assistance hours. The Draft Report does not acknowledge the additional financial pressure this puts on individuals and families.

- Persons with disabilities consistently report the struggles they face with application forms and processes for welfare, grants, and other financial supports. There needs to be a range of application options available including paper and online.

3.24. Article 29 - Participation in political and public life

- There should be a commitment to increased funds for DPOs to build the capacity of disabled people to participate in political and public life.
- The State Report should identify actions, practical supports, and resources to increase the number of persons with disabilities joining political parties and standing for election, and to remove barriers to participation in politics and public life.
- The State Report should identify actions to make persons with disabilities more aware of their right to vote. It should commit to improved voting access including ensuring all polling stations are accessible, training for Returning Officers and polling station staff, accessible voting formats and technologies, recognising voting support needs, and simplifying the postal vote system.
- The Draft Report does not emphasise the importance of political parties providing campaign materials in accessible formats so persons with disabilities can make an informed choice when voting.
- The State should outline a plan to reform electoral laws to ensure they are accessible and in keeping with the UNCRPD.
- There is no discussion in the Draft Report of supporting people with disabilities to join or form advocacy organisations and other NGOs. The State should ensure disabled people can participate in community organising endeavours also.

3.25. Article 30 - Participation in cultural life, recreation, leisure and sport

- The State should ensure that cultural and leisure sites are accessible to all, including providing access to cultural materials and experiences in accessible formats. The Report should identify the extent to which disabled people are involved in developing, overseeing, and monitoring such initiatives.
- Enforcement of reasonable access accommodations such as captioning, assistive listening devices, and ISL interpretation in venues in receipt of public monies, such as theatres and other public performance venues, should be introduced.
- Some programmes seem to be in danger of setting up a separate space for cultural life for people with disabilities, rather than integrating people with disabilities into mainstream cultural life.

- The final report should outline measures to support persons with disabilities to participate in sport, the arts, and recreation and the funding allocated by the State to disability-specific sporting activities as a percentage of the total public funding. Particular mention should be made of funding allocated for activities which are led, developed, and organised by persons with disabilities.
- There is no reference to Deaf culture or to the identity of Deaf people in the Draft Report. The State should outline how it will value and support Deaf culture.
- The State should outline measures in place to ensure the accessibility of television programmes, films, theatre etc. for persons with disabilities, including the funding and training provided to broadcasters or producers and the involvement of disabled people in the implementation or monitoring of such processes.
- All funded Irish sporting bodies should have a 'Policy on Participation in Sport by People with Disabilities' and should provide meaningful evidence of this across a range of areas including participation programmes, performance programmes, and education and training.

3.26. Article 31 - Statistics and Data Collection

- There should be a legislative requirement for the State to develop a state-wide, publicly available dataset related to disability. This dataset should be available in accessible formats and provide disaggregated data on the numbers of people in Ireland with disabilities. This should include the numbers of children and adults, the services they use, and if they are in education, training, or employment. The data should give a geographical breakdown, as well as information on gender, disability type, and ethnicity. It should also give information on the numbers of persons with disabilities in settings such as Direct Provision or the Prison Service.
- This section of the Draft Report details sources of statistics but does not discuss how accurate the sources might be, or what is done with this data to inform policy.
- The State should ensure that disabled people have access to information about their data rights and support to understand and exercise them.

3.27. Article 32 - International cooperation

- Further detail should be provided in the State Report on Ireland's participation and leadership in any international networks and collaborations on inclusive development aid.
- The Ireland-Scotland Joint Bilateral Review: Report and Recommendations 2021–25, and The Wales- Ireland Shared Statement and Joint Action Plan should be referenced in the State Report.

- The UN Committee recommends that information be provided on actions toward facilitating and supporting capacity-building. Irish led projects from the UNESCO Chair are contributing significantly in this regard and could be referenced in the State Report under Article 32.

3.28. Article 33 - National implementation and monitoring

- The Draft Report currently refers only to the intention to designate the Irish Human Rights and Equality Commission as the Independent Mechanism. The Government has not passed the Disability (Miscellaneous Provisions) Bill 2016 that would officially appoint IHREC as the monitoring mechanism. The Draft Report fails to acknowledge the work that IHREC has already done in anticipation of this appointment.
- The Draft Report completely fails to address the role of civil society in monitoring the implementation of the CRPD.
- Stronger implementation frameworks are required across all relevant strategies, with a particular focus on the outcomes and impact for persons with disabilities.