Ms. Laura-Maria Crăciunean-Tatu
Chair, Committee on Economic, Social and Cultural Rights
Office of the United Nations High Commissioner for Human Rights (OHCHR)
8-14 Avenue de la Paix CH-1211 Geneva (Switzerland)

Gaps in Employment, Education, Healthcare, Mental Health, and Housing for Persons with Disabilities in Colombia

Submitted by AccessibilityAtlas
an organization of young persons advancing disability rights throughout the world

for the

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Introduction

AccessibilityAtlas presents this report to the United Nations Committee on Economic, Social and Cultural Rights ahead of the 78th session for the review of the Republic of Colombia. AccessibilityAtlas is a global non-profit organization based in the United States, committed to creating a world where persons of all abilities can fully participate in their communities.

AccessibilityAtlas collaborates with civil society, international mechanisms, institutions of higher education, and local governments to catalyze change around the thematic issues of accessibility in civic life, education, healthcare, housing, and employment for persons with disabilities worldwide. We actively engage with the United Nations human rights mechanisms in Geneva and beyond to address accessibility gaps and advocate for systemic solutions grounded in the lived experiences of persons with disabilities.

This petition focuses on five main issues as they relate to persons with disabilities in Colombia: (1) barriers to inclusive employment and systemic discrimination in the labor market; (2) exclusion from quality and inclusive education; (3) obstacles in accessing healthcare and rehabilitation services; (4) persistent stigma and inadequate provision of mental health services; and (5) lack of accessible, adequate housing and structural causes of poverty.

We offer our findings and recommendations with the goal of supporting the Committee's work in holding State Parties accountable for their obligations under the International Covenant on Economic, Social and Cultural Rights, and in advancing disability-inclusive development throughout Colombia.

Labor Market Inclusion of Persons with Disabilities

Due to social and economic exclusion, persons with disabilities (PWDs) in Colombia experience disproportionately higher rates of unemployment and underemployment than their

non-disabled counterparts.[1] Current national legal frameworks enable practical barriers to persist, as 39% of PWDs live in poverty, compared to those without disabilities, standing at 18%.[2]

In Colombia, approximately 27.6% of Colombian working-age PWDs are employed.[3] Most employed PWDs hold low-wage, unstable jobs due to limited access to education. Due to a lack of comprehensive and up-to-date statistics, the scope of the issue is unclear. According to the 2015 National Demographic and Health Survey, disabled adults (38%) are more likely to have less than a primary school level of education than adults with no difficulty (13%). The unemployment and underemployment of PWDs is a multifaceted issue that perpetuates a cycle of poverty that continues intergenerational challenges as PWDs are unable to provide adequate support for their families.

The Colombian government under President Gustavo Petro's administration has taken steps to combat these gaps, specifically through the "Work towards Change," a landmark law reform enacted in June 2025.[4] The bill's broad labor legislation featured key changes: expanding worker protections, formalizing informal and gig work, and creating mandatory inclusion quotas to support vulnerable groups,[5] explicitly citing PWDs.[6] The law was pushed through with the efforts of unions and the progressive government. Historically, Colombia's average employment rate has been low, ranging between 55% and 58%, and hitting an all-time low of 42.5% in April 2020 due to the pandemic. The reform mandates inclusion quotas, requiring larger companies to employ a set minimum of PWDs, as well as introducing incentives for hiring them[7]. It also

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[1] *Revista:*
https://revista.drclas.harvard.edu/disability-care-and-support-in-colombia-and-beyond-challenges-and-hopes-for-change/

[2] *Borgen Project:*
https://borgenproject.org/facts-about-disability-and-poverty-in-colombia/

[3] *BMJ Journals:*
https://bmjopen.bmj.com/content/14/10/e088605

[4] *KPMG:*
https://kpmg.com/xx/en/our-insights/gms-flash-alert/flash-alert-2025-125.html

[5] *International Labour Organization:*
https://www.ilo.org/media/381851/download
[6] *The Independent Advisory Group on Country Information (IAGCI):*
https://assets.publishing.service.gov.uk/media/67aca5f74fd41c3a24cd2197/COL+CPIN+Internal+relocation.pdf

[7] *Baker Mckenzie:*
https://insightplus.bakermckenzie.com/bm/employment-compensation/colombia-labor-reform-in-colombia-what-changed-what-actions-should-be-taken

introduced nondiscriminatory and accessibility requirements for employers,[8] along with inclusive employment programs aiming to improve job training, access, and placement for PWDs.[9]

We urge the Committee to ask: **What specific measures will the Colombian government take to ensure full and effective implementation of the 2025 "Work towards Change" labor reform's inclusion quotas for persons with disabilities, including transparent monitoring, enforcement mechanisms, and expansion of accessible job training programs?**

Persons with disabilities in Colombia face persistent barriers to securing stable and meaningful employment. Many are excluded from the labor market or relegated to informal, low-paying jobs due to limited access to education, workplace accommodations, and vocational training. While the 2025 "Work towards Change" reform introduced mandatory inclusion quotas, strengthened worker protections, and required employers to adopt nondiscriminatory and accessibility measures, the absence of robust enforcement mechanisms risks undermining these commitments. The Committee should urge the government to create a national monitoring and compliance framework, provide targeted employment support services, and incentivize employers to establish inclusive, accessible, and sustainable workplaces.

Barriers to Education for Persons with Disabilities

PWDs in Colombia continue to face social and economic isolation due to a lack of accessible education. Adolescent PWDs aged 6 to 11 have access to school at a rate of 27.4%,[10] which is significantly lower than the 85%[11] rate for the general population. Alarmingly, 90% of children with disabilities do not attend mainstream schooling,[12] and only 1.7% complete university studies.[13]

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[8] *Disability:IN:*
https://disabilityin.org/country/colombia/

[9] *Reliefweb:*
https://reliefweb.int/report/colombia/colombia-launches-inclusive-employment-program-facilitate-access-jobs

[10] *Opportunity International Education Finance:*
https://edufinance.org/latest/blog/2020/inclusive-education-learning-from-colombia-educators

[11] CEPS Journal:
https://www.cepsj.si/index.php/cepsj/article/view/1441

[12] CEPS Journal:
https://www.cepsj.si/index.php/cepsj/article/view/1441

[13] *Opportunity International Education Finance:*
https://edufinance.org/latest/blog/2020/inclusive-education-learning-from-colombia-educators

90% of adolescent PWDs do not attend mainstream schooling; 27.4% of disabled children ages 6-11 have access to education, and 5.4% of the population has reached higher education.[14] Data from the Integrated Enrollment System (SIMAT) of the Ministry of Education reported PWDs represented only 1.21% of enrolled students in state education; the statistic was lower for private (1.72%) and higher for (.77%) state education.[15] In 2014, out of the 10.3 million Colombians enrolled in state education, approximately 156,030 were PWDs.[16]

The Special Plan on Rural Education (PEER), incorporated into Colombia's 2016 peace accord, aims to close educational disparities between rural and urban areas by 2031.[17] The Colombian government is taking steps to educate a larger number of PWDs by providing accommodations such as accessible rural infrastructure, inclusive educational models, and community-led inclusion initiatives.[18]

We urge the Committee to ask: **What concrete actions will the Colombian government take to ensure equal access to quality, inclusive education for children and youth with disabilities, including full implementation of the Special Plan on Rural Education (PEER) and mandatory accessibility standards for all educational institutions?**

Children and youth with disabilities in Colombia continue to face significant exclusion from mainstream education, limiting their opportunities for social participation and future employment. Barriers include inaccessible infrastructure, a shortage of trained teachers, and the absence of adequate learning accommodations. The Special Plan on Rural Education (PEER), introduced under the 2016 peace accord, commits to closing educational gaps between rural and urban areas and includes measures for more inclusive learning environments. However, implementation has been uneven, and many students remain excluded. The Committee should call on the government to enforce accessibility requirements for all schools, expand teacher training in inclusive education, and establish mechanisms to

[14] *Saldarriaga-Concha Foundation:* https://www.saldarriagaconcha.org/wp-content/uploads/2019/01/pcd_disability_social_inclusion.pdf

[15] *Saldarriaga-Concha Foundation:* https://www.saldarriagaconcha.org/wp-content/uploads/2019/01/pcd_disability_social_inclusion.pdf

[16] *Saldarriaga-Concha Foundation:* https://www.saldarriagaconcha.org/wp-content/uploads/2019/01/pcd_disability_social_inclusion.pdf

[17] *MINISTERIO DE EDUCACIÓN NACIONAL:* https://www.mineducacion.gov.co/1759/articles-385568_recurso_1.pdf

[18] *University of Cambridge:* https://escuelanueva.org/wp-content/uploads/2024/02/Tesis_Julia_Hayes_Including-children-with-disabilities-in-Colombian-Escuela-Nueva-schools.pdf

monitor and evaluate the integration of students with disabilities into the education system.

Access to Medical and Rehabilitation Services for Persons with Disabilities

PWDs in Colombia are hindered by significant barriers in accessing healthcare, further exacerbating already worsened health disparities. Data shows that PWDs are twice as likely to report unmet health needs in comparison to the general population.[19] 70% of PWDs have difficulty accessing rehabilitation, specialists, and preventative services; this is worsened in rural areas.[20]

Colombia lacks comprehensive, official disability statistics, meaning the full scope of health inequality remains unclear. One study found that only 22% of PWDs are fully covered by their health services, while the general population is at over 80%.[21] But, rural PWDs are worse off as more than 50% report an inability to access medical services because of inaccessible infrastructure, lack of services, and transportation to distant services.[22] These gaps were made larger by COVID-19, lessening access to emergency care for PWDs; similarly, fundamental visits, like dental care, fell by 15% more among PWDs than the general population.[23]

The Colombian government countered this by integrating universal care coverage, mandating non-discriminatory and inclusionary reforms in the 2016-2026 National Policy for Disability and Social Inclusion.[24] Additionally, the Colombian government responded by implementing universal care coverage and enacting non-discriminatory and inclusive reforms in the 2016-2026 National Policy for Disability and Social Inclusion. Additionally, the government implemented the National Plan for Rural Health (2023), which enhanced accessibility for PWDs, lessening gaps in localized care. The plan was disability-friendly and improved localized access

[19] *National Library of Medicine:* https://pubmed.ncbi.nlm.nih.gov/39448222/

[20] *National Library of Medicine:* https://pubmed.ncbi.nlm.nih.gov/39448222/

[21] *National Library of Medicine:* https://pubmed.ncbi.nlm.nih.gov/39448222/

[22] *National Library of Medicine:* https://pmc.ncbi.nlm.nih.gov/articles/PMC10606581/

[23] *National Library of Medicine:* https://pmc.ncbi.nlm.nih.gov/articles/PMC11499852/

[24] *National Library of Medicine:* https://pmc.ncbi.nlm.nih.gov/articles/PMC8842957/

to healthcare needs. During the COVID-19 pandemic, the government implemented the "Ingreso Solidario," a financial support system that nearly 3 million low-income households relied on in combination with telehealth services that expanded with tailored outreach to PWDs.[25]

Despite the government's advancements, major obstacles still prevent PWDs from accessing healthcare. The government's weak enforcement of disability rights in healthcare, lack of official disability statistics, and the underfunding of rural and rehabilitating services worsen already existing healthcare barriers. With studies showing that nearly 60% of rural clinics are physically inaccessible to PWDs,[26] inequalities persist.

We urge the Committee to ask: **What steps will the Colombian government take to ensure equal access to quality healthcare for persons with disabilities, including the enforcement of accessibility standards in rural areas, the collection of disaggregated health data, and the expansion of rehabilitation and preventative services?**

Persons with disabilities in Colombia face persistent barriers to healthcare, ranging from inaccessible facilities and transportation challenges to shortages in rehabilitation and specialist services. These barriers are particularly acute in rural areas, where limited infrastructure and service availability further restrict access. Although government initiatives such as the National Policy for Disability and Social Inclusion and the National Plan for Rural Health have aimed to improve accessibility and inclusion, weak enforcement and insufficient funding continue to undermine their effectiveness. The absence of comprehensive disability-related health data also hinders the ability to identify and address systemic inequalities. The Committee should urge the government to adopt binding accessibility requirements for all healthcare facilities, strengthen enforcement mechanisms, ensure targeted investment in rural and rehabilitation services, and establish a comprehensive system for collecting and monitoring health data disaggregated by disability.

Barriers to Mental Health Services for Persons with Disabilities

Colombia's population of 4.5 million PWDs citizens face significant barriers in accessing physical and mental services, facilitating poorer health outcomes.[27] Mental health care among PWDs is severely under-addressed, and studies have shown that these barriers have been worsened by stigmas and poor integration of mental health into primary care[28].

[25] *Better Than Cash Alliance:*
https://www.betterthancash.org/explore-resources/colombias-ingreso-solidario

[26] *National Library of Medicine:*
https://pmc.ncbi.nlm.nih.gov/articles/PMC10606581/
[27] *Saldarriaga-Concha Foundation:*
https://www.saldarriagaconcha.org/wp-content/uploads/2019/01/pcd_disability_social_inclusion.pdf

[28] *BMJ Open:*

The lack of official disability statistics hinders the scope of what can be understood about mental health discrepancies among PWDs. The prevalence of mental health disorders among PWDs in comparison to the general population is exceedingly high.[29] Colombia's legislative advances include incorporating mental health into national health policy frameworks while ratifying policies that emphasized community-based care.[30] These efforts eliminated guardianship and created comprehensive care systems for PWDs. But, inconsistencies within implementation remain significant barriers still remain.

Despite the government's reformation of legal frameworks, persistent stigma regarding mental health impedes the full inclusion of PWDs in health, education, employment, and political participation. But, with the lack of disaggregated data, solutions will remain inconsistent with the scope of the situation.

We urge the Committee to ask: **What concrete measures will the Colombian government take to ensure accessible, stigma-free, and community-based mental health services for persons with disabilities, including nationwide integration of mental health into primary care and the collection of disaggregated mental health data?**

Persons with disabilities in Colombia face significant and persistent barriers to accessing mental health services, which are compounded by stigma, underfunded programs, and inadequate integration of mental health into primary care. While recent legal reforms have incorporated mental health into national health policies, emphasized community-based care, and eliminated guardianship, implementation remains inconsistent across regions. Stigma surrounding mental health continues to limit access to education, employment, and civic participation for PWDs. Without reliable, disaggregated data, policymakers cannot fully address the scope of these disparities. The Committee should urge the government to adopt a national strategy to combat stigma, expand mental health services within primary care, ensure trained mental health professionals are available in all regions, and establish a comprehensive data collection system to inform evidence-based policy.

Adequate Housing and Poverty Among Persons with Disabilities

Colombian PWDs face significant barriers preventing an adequate standard of living, causing many to be confined to cycles of poverty. As of 2024, around 4.5 million PWDs live in

https://bmjopen.bmj.com/content/14/10/e088605

[29] *Health Cluster:*
https://healthcluster.who.int/countries-and-regions/colombia

[30] *Health Cluster:*
https://healthcluster.who.int/countries-and-regions/colombia

poverty.[31] PWDs face challenges in finding accessible housing, especially in rural areas where housing shortages exist.

The government of Colombia created and implemented several plans concerning the eradication of poverty, social housing, and rural development to benefit marginalized groups, especially PWDs. More specifically, the National Plan for the Elimination of Poverty, the "Decent House, Decent Life" housing program, and rural housing upgrading initiative targeted the lack of housing for marginalized communities.[32] Cities such as Barranquilla developed inclusive and comprehensive care systems, which had been designated by UNICEF as a regional model for disability inclusion in 2024.[33]

Despite the actions of the Colombian government, PWDs still face barriers in accessing adequate housing due to poverty. Barriers such as ableism, insufficient housing, limited economic opportunity, and inadequate healthcare perpetuate multidimensional poverty significantly among PWDs.[34] The pandemic had worsened the situations of many PWDs, making basic human necessities inaccessible.[35]

We urge the Committee to ask: **What measures will the Colombian government take to ensure accessible, affordable, and adequate housing for persons with disabilities, particularly in rural areas, and to address the structural causes of poverty that prevent PWDs from achieving an adequate standard of living?**

Persons with disabilities in Colombia face persistent barriers to securing adequate housing, which contributes to cycles of poverty and social exclusion. While national initiatives such as the National Plan for the Elimination of Poverty, the "Decent House, Decent Life" program,

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[31] *Saldarriaga-Concha Foundation:* https://www.saldarriagaconcha.org/wp-content/uploads/2019/01/pcd_disability_social_inclusion.pdf

[32] *United Nations:* https://mptf.undp.org/sites/default/files/documents/2025-04/project_id_140616_colombia_idsf_annual_results_report_2024.pdf

[33] *Revista*: https://revista.drclas.harvard.edu/disability-care-and-support-in-colombia-and-beyond-challenges-and-hopes-for-change/

[34] *Revista*: https://revista.drclas.harvard.edu/disability-care-and-support-in-colombia-and-beyond-challenges-and-hopes-for-change/

[35] *United Nations:* https://www.ohchr.org/en/press-releases/2025/07/despite-legal-progress-full-inclusion-persons-disabilities-colombia-remains

and rural housing upgrades have aimed to improve living conditions for marginalized groups, implementation gaps remain. Discrimination, insufficient housing stock, and lack of economic opportunity continue to limit PWDs' access to safe and affordable homes, with these challenges compounded in rural areas. The pandemic further exacerbated these inequities, making even basic necessities harder to access. The Committee should urge the government to adopt binding accessibility requirements for all new housing projects, prioritize PWDs in social housing allocations, strengthen rural housing programs, and address the broader economic and social barriers that hinder PWDs' ability to maintain an adequate standard of living.

Conclusion

Colombia's treatment of persons with disabilities in areas such as employment, education, healthcare, mental health, and housing reveals persistent gaps in fulfilling its obligations under the International Covenant on Economic, Social and Cultural Rights. While recent reforms—such as the "Work towards Change" labor law, the Special Plan on Rural Education, and the National Plan for Rural Health—reflect important commitments, enforcement remains uneven, and systemic barriers continue to exclude persons with disabilities from full participation in society.

Persons with disabilities in Colombia face structural exclusion from the labor market, limited access to quality and inclusive education, inadequate and inaccessible healthcare and mental health services, and significant challenges in securing adequate housing. These barriers perpetuate cycles of poverty and social isolation, undermining their rights to work, education, health, and an adequate standard of living.

We urge the Committee to call upon Colombia to implement meaningful reforms, including the robust enforcement of labor inclusion quotas, nationwide implementation of accessible and inclusive education models, expansion of healthcare and mental health services with a focus on rural access, and binding accessibility requirements for housing. These actions are essential to ensuring that persons with disabilities in Colombia can fully enjoy their rights under the Covenant and participate equally in all aspects of life.

This report may be published on the CESCR webpage to the general public. Direct enquiries to admin@accessibilityatlas.org. This report was authored by Manasa-Reddy Sanivarapu and Dinu Antonescu.