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EXECUTIVE SUMMARY

This report, submitted by AIFO, highlights the state of implementation of the Convention on the Rights of Persons with Disabilities (CRPD) in Liberia, drawing on multi-sectoral interventions and lessons learned from various activities. The report identifies progress in awareness-raising, accessibility, independent living, health and employment, while noting persistent structural, legal, and institutional gaps. It underscores the need for sustained national ownership, institutionalized consultation, reliable disability data, and dedicated domestic financing to ensure the full realization of CRPD rights. Recommendations emphasize strengthened coordination, legislative reform, enforcement of accessibility standards, and empowerment of PwDs as central actors in Liberia's development.

AIFO - Italian Association of Friends of Raoul Follereau ETS is an Italian non-profit organization committed to promoting the rights, dignity, and social inclusion of persons affected by disability and other forms of marginalization. Its mission is to advance community-based inclusive development, strengthen inclusive health systems, and promote equal opportunities in education, livelihoods, and social participation, in line with international human rights standards. Since 1999, AIFO has maintained official relations with the World Health Organization supporting the Rehabilitation 2030 initiative and the dissemination of the WHO Disability Guide for Action. AIFO is also a member of the Italian Network for Disability and Development and the International Disability and Development Consortium, contributing to international advocacy and policy dialogue on disability inclusion.

Active in Liberia since 1997, AIFO works in close partnership with government institutions, including the Ministry of Health and its Neglected Tropical Diseases, Family Health, and Mental Health divisions, as well as with civil society and Organizations of Persons with Disabilities (OPDs). Through its Community-Based Inclusive Development approach, AIFO integrates health, education, protection, and economic empowerment, with particular attention to women, girls, and youth with disabilities. The organization has implemented major initiatives such as the EU-funded VOICE project (2021–2023), the Swedish International Development Agency (SIDA)-funded Coordinated Actions on Disabilities in Liberia - CAD-L project (2021–2025), and the AICS-funded Disability and Startups - DASU project (2018–2021), which strengthened OPDs' institutional capacity, improved access to inclusive services, and promoted economic and social inclusion. Persons with disabilities play a central role in AIFO's programming at both strategic and operational levels. OPDs are key partners in project design, implementation, monitoring, and advocacy efforts, ensuring that interventions reflect lived experiences and priorities. The present submission was developed through consultation with national DPOs representatives and disability stakeholders, ensuring meaningful participation and alignment with the perspectives of persons with disabilities.

A. PURPOSE AND GENERAL OBLIGATIONS (Arts. 1–4)

(a) National Commission on Disabilities (NCD), which has initiated the drafting of a revised Disability Rights Bill to address gaps in the 2005 Act and better align national law with the CRPD and the human rights model of disability. County-level and regional consultations with OPDs and stakeholders have been conducted, though comprehensive nationwide consultations are still pending. The process has received technical and financial support through the CAD-L project. However, the revised bill has not yet been enacted, and key details, including the draft text, implementation framework, timelines, and budget allocations, remain unclear. The delay in adoption continues to limit enforceable protections, particularly regarding reasonable accommodation, accessibility standards, and sanctions against discrimination.

(b) No concrete steps have yet been taken to repeal or amend Article 64 of the Constitution, which allows for the removal of elected officials on grounds of mental or physical incapacity and raises concerns regarding compliance with the CRPD. Although President Boakai, in his 2025 Annual Message, reaffirmed his commitment to constitutional reform and proposed revisions to Articles 63 and 64 to better protect persons with disabilities, these changes have not yet been enacted. As a result, Article 64 remains in force, continuing to pose potential compatibility concerns with Article 29 of the CRPD due to the absence of explicit safeguards against discriminatory interpretation.

(c) The NCD has involved OPDs in consultations on the proposed Disability Bill, including county-level meetings with the Alliance on Disability in Liberia. However, participation remains uneven, with limited inclusion of rural OPDs and organizations representing persons with intellectual and psychosocial disabilities. Engagement is largely project-based and dependent on external funding, as no dedicated budget supports systematic consultation. In February 2026, concerns were raised that the Bill had been introduced without comprehensive consultation, prompting the NCD to seek its recall for broader engagement, though this had not yet occurred. Overall, while consultation efforts exist, structural gaps persist in ensuring sustained and meaningful participation in line with Article 4(3) of the Convention.

(d) Liberia has not yet ratified the Optional Protocol to the Convention on the Rights of Persons with Disabilities, nor the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Persons with Disabilities in Africa. No official roadmap or timeframe for ratification has been publicly communicated. Advocacy by OPDs and the NCD has emphasized the importance of ratification as a demonstration of commitment to accountability and regional and international human rights mechanisms; however, concrete steps toward ratification remain pending. The absence of ratification of the Optional Protocol limits access to international remedies for persons with disabilities who have exhausted domestic remedies, thereby weakening accountability mechanisms.

(e) Progress has been made in strengthening OPDs through advocacy and financial support initiatives led by the NCD and partners, including projects such as Empower Her, CAD-L, and Ministry of Health interventions. These efforts have enhanced leadership capacity and promoted greater self-representation in policy processes. However, organizations representing persons affected by leprosy, intellectual disabilities, and psychosocial disabilities continue to receive limited targeted support and face barriers to meaningful participation due to resource constraints, limited institutional backing, and stigma. Further dedicated measures are needed to ensure equitable and inclusive representation across all disability groups.

B. SPECIFIC RIGHTS (arts. 5–30)

ART 5 - EQUALITY AND NON DISCRIMINATION

(a) Despite multiple disability awareness trainings and sensitization initiatives conducted by national and international civil society organizations, NGOs and INGOs, no comprehensive legal measures have yet been adopted to prohibit all forms of disability-based discrimination in accordance with the Convention. The existing legal framework does not explicitly define disability-based discrimination in line with article 5 of the CRPD, nor does it recognize the denial of reasonable accommodation as a form of discrimination. While advocacy efforts have increased awareness among policymakers and public institutions, these efforts have not yet translated into binding legislative reform establishing enforceable anti-discrimination protections. The ongoing drafting of a revised Disability Bill presents an opportunity to address these gaps. Stakeholders, including OPDs, continue to advocate for the inclusion of clear anti-discrimination provisions, explicit recognition of reasonable accommodation, and alignment with the human rights model of disability. However, at the time of reporting, such provisions have not yet been enacted.

(b) Although general complaint mechanisms exist through the courts and the Independent National Commission on Human Rights, they are not disability-sensitive and lack procedural accommodations, limiting their practical accessibility. There is no specialized, accessible mechanism to address disability-based discrimination, and existing legal frameworks do not clearly define sanctions or establish an independent enforcement body. As a result, cases of discrimination are often underreported and inadequately addressed. While the Ministry of Justice, through its Human Rights Division, has engaged in consultations organized by disability-focused organizations, participated to the Alliance on Disability meetings and shown openness to dialogue, these efforts remain largely consultative and have not yet led to structured investigative procedures or effective, disability-sensitive enforcement mechanisms.

(c) Persons with disabilities in Liberia continue to face multiple and intersecting forms of discrimination, particularly women and girls with disabilities, persons with disabilities living in poverty, and those residing in rural and remote areas. Although numerous awareness-raising initiatives have sought to address stigma and discriminatory attitudes, no formal measures have been established to systematically investigate or monitor cases of multiple and intersecting discrimination. There is limited disaggregated data available to assess the scope and nature of such discrimination, and no structured mechanism to ensure accountability. County-level dialogues and advocacy initiatives under programmes such as CAD-L have documented barriers related to poverty, gender inequality, geographic isolation, and limited access to education, vocational training and employment. Women and girls with disabilities, in particular, experience compounded marginalization, including exclusion from decision-making spaces and limited access to economic opportunities. These challenges are not yet addressed through targeted legislative or policy measures specifically designed to combat intersectional discrimination.

ART 6 - WOMEN WITH DISABILITIES

(a) Targeted initiatives have contributed to increasing the visibility and recognition of women with disabilities. The organization of the first National Conference on the Status of Women with Disabilities in Liberia, led by the Office of the Second Lady under the Group of 77 (G-77), marked an important step in challenging stigma and promoting dialogue on intersectional discrimination faced by women and girls with disabilities.

(b) Progress has been made in integrating the rights of women with disabilities into broader policy discussions through coordinated efforts under CAD-L Project (2021–2025), implemented by AIFO in collaboration with the National Commission on Disabilities (NCD) and NUOD with SIDA support. At the

national level, the launch of the “Empower Her” initiative in 2025 by the Office of the Second Lady further signaled growing institutional recognition of the need to promote inclusive policies targeting women across the country.

(c) Concrete advances have been recorded in economic and educational empowerment. Through CAD-L, 33 startups fully managed by persons with disabilities were supported, with women constituting the majority of beneficiaries. Additionally, 30 students received educational assistance, including 15 young women enrolled in Technical and Vocational Education and Training (TVET), among them a visually impaired student pursuing plumbing study. These measures contribute to expanding women’s participation in education, entrepreneurship, and non-traditional sectors, although sustained investment remains necessary to ensure long-term impact.

ART 8 - AWARENESS RAISING

(a) Over recent years, awareness-raising has been a central pillar in promoting the rights, visibility, and socio-economic inclusion of persons with disabilities. Through trainings and dialogues led by AIFO, the Alliance on Disabilities, and international partners, efforts focused on combating stigma and harmful stereotypes, strengthening duty bearers’ accountability, and empowering OPDs to advocate for their rights. Initiatives addressed inclusive education, employment, Sexual and Reproductive Health and Rights (SRHR), accessibility, governance participation, and assistive technologies, engaging county authorities, policymakers, media, civil society, and service providers. These actions contributed to increased participation of persons with disabilities in local governance, appointments to development councils, improved accessibility infrastructure, and greater recognition of disability inclusion as a development priority. Under the CAD-L Project, the SIDA-funded “Play It for Change” video campaign further advanced awareness and empowerment by training persons with disabilities in storytelling and media production, producing 13 videos addressing inclusive education, employment rights, accessibility barriers, myths and misconceptions about disability, SRHR among others. Community screenings were organized across counties, often aligned with public events such as International Day of Persons with Disabilities celebrations. These events combined screenings with public discussions, performances and stakeholder engagement, creating safe spaces for dialogue and attitude change. Beyond awareness, the initiative strengthened leadership, communication and technical skills among participants, contributing to empowerment and potential livelihood pathways.

(b) Efforts to promote rights-based and ethical disability reporting led to the creation of a journalists’ network on Disability Reporting with the support of CAD-L project and through the partnership with Internews, the Press Union of Liberia, ALICOR, RePAL, NCD, and NUOD. Journalists were trained on the CRPD, disability rights, ethical reporting, and avoiding stigmatizing language, resulting in numerous positive stories highlighting the contributions of persons with disabilities and fostering stronger collaboration between media and OPDs.

Under the same CAD-L support, the “We Are One” radio programme was launched across five counties (Lofa, Nimba, Bong, Bomi, and Montserrado County) on ten radio stations, featuring 20 persons with disabilities as hosts, interactive call-in segments, and broadcasts in English and local languages. Focusing on inclusive education, employment, SRHR, accessibility, and governance, the programme achieved high public engagement and proved especially effective in reaching rural and low-resource communities, promoting awareness and civic participation among persons with disabilities.

ART 9 - ACCESSIBILITY

(a) Accessibility in public infrastructure is gradually gaining attention, with efforts underway to strengthen monitoring and enforcement mechanisms at both national and subnational levels. While dedicated budget allocations for accessibility are still limited, initiatives are emerging to build the technical and institutional capacity necessary for sustainable progress.

In 2023, AIFO accessibility experts conducted specialized training on accessibility audits to address widespread inaccessibility in public and private buildings across Liberia. Sixteen participants, including NCD staff and community workers, were trained on international accessibility standards, universal design principles, relevant laws, and structured auditing methodologies. The training aimed to equip NCD with the expertise to conduct accessibility audits, promote the adoption of national accessibility standards, and foster institutional ownership of monitoring processes. Following the training, NCD auditors carried out accessibility assessments in partner TVET institutions using a standardized checklist covering infrastructure, sanitation, ICT services, inclusiveness of training resources, staff composition, and organizational structures. These audits represent an important step toward operationalizing systematic monitoring of accessibility and establishing a foundation for broader compliance.

While audits are currently project-based, the experience demonstrates the potential for scaling up and institutionalizing accessibility monitoring. Strengthening NCD's ownership, formalizing enforcement mechanisms, and ensuring continuity despite staff turnover are key priorities to sustain and expand these gains, creating a more inclusive built environment across Liberia.

(b) Efforts to strengthen accessibility standards have included structured consultations with OPDs, ensuring their input in the development and application of audit criteria. The 2023 accessibility audit training contributed to aligning national practices with international standards and supported the gradual establishment of minimum accessibility benchmarks.

South-South cooperation has further enhanced knowledge exchange within the Mano River Sub-Region. In 2023, representatives of the NCD, AIFO and NUOD conducted a study visit to Sierra Leone to learn from the experience of the National Commission for Persons with Disabilities (NCPD), which has developed and implemented an accessibility checklist for public and private buildings. The delegation also engaged with the Sierra Leone Union on Disability Issues (SLUDI), the Deputy Minister of Social Welfare, international NGOs, and national OPDs. This exchange strengthened regional collaboration and underscored the value of formal cooperation mechanisms, including a potential Memorandum of Understanding and regional dialogue to harmonize standards.

While these initiatives represent important progress toward a subregional framework for disability-inclusive development, Liberia has yet to formally adopt comprehensive, legally binding accessibility standards across all sectors or fully institutionalize systematic consultation mechanisms to ensure the consistent involvement of OPDs, including organizations of women and girls with disabilities, in standard-setting processes.

(c) Accessibility audits carried out in selected TVET centers assessed infrastructure, ICT services, and training resources, revealing limited availability of accessible digital tools and minimal adaptation of learning materials to accommodate diverse communication needs. While disability awareness trainings have been provided to instructors to strengthen understanding of inclusive education principles, a comprehensive national strategy ensuring equal access to ICT for persons with disabilities is not yet in place.

SRHR messaging, developed in coordination with the Ministry of Health, has been disseminated in selected health facilities, including content addressing sexual and reproductive health and gender-based violence. However, accessible information formats, such as Braille, Easy Read, sign language, and alternative and augmentative communication, remain largely unavailable across public institutions, including health, education, and government offices. Sign language interpretation services are rarely provided, and standardized national guidelines on inclusive communication and accessible events are still lacking. In this context, AIFO and its partners have consistently applied the Bridging the Gap II Checklist for Inclusive and Accessible Communication and Events, developed in partnership with OHCHR in 2020, as a practical reference to promote inclusive standards in project activities and public engagements.

(d) Accessibility barriers continue to affect public and private infrastructure, goods, and services in both urban and rural areas. Assessments conducted in selected institutions, though limited in scope, identified

significant gaps, including inaccessible classrooms and sanitation facilities, with serious concerns regarding bathroom safety and usability. Accessibility improvements remain largely dependent on project-based funding rather than systematic public investment. Institutions also reported low representation of persons with disabilities among staff and trainees, highlighting persistent structural barriers to participation in education and employment. Access to transport, media, banking, and other public-facing services remains inconsistent, particularly outside Monrovia.

While capacity-building initiatives, audit efforts, and regional cooperation have laid important groundwork, accessibility interventions are still fragmented and not yet fully embedded within a coordinated, adequately resourced national framework.

ART. 19 – LIVING INDEPENDENTLY AND BEING INCLUDED IN THE COMMUNITY

The State Party has promoted economic empowerment and community inclusion of persons with disabilities, including women and rural populations, mainly through entrepreneurship and livelihood initiatives such as CAD-L, which supported disability-led enterprises across five counties and strengthened institutional sustainability mechanisms. Additional initiatives by the NCD and the Office of the Second Lady have further enhanced income generation, skills development, and local economic participation. However, progress under Article 19 remains limited. Liberia lacks a comprehensive national framework for personal assistance and community-based support services, which are largely donor-dependent. Disability-responsive social protection, accessible housing, supported decision-making, and structured community support systems are not yet systematically developed or adequately financed, constraining the full realization of independent living.

ART 25 – HEALTH

(a) There is currently no specific legal framework in Liberia explicitly guaranteeing the right to free and informed consent of persons with disabilities in relation to medical treatment, in line with article 25 of the Convention. In practice, persons with disabilities, particularly deaf persons and persons with intellectual or psychosocial disabilities, face significant communication and procedural barriers when accessing health services. Public health facilities across the country lack qualified sign language interpreters, often requiring deaf persons to rely on family members during medical consultations. This practice compromises confidentiality, autonomy and informed decision-making.

Over the past four years, AIFO, NUOD, the NCD and DKT International, in collaboration with the Ministry of Health and County Health Teams, have conducted disability awareness and rights-based trainings promoting non-discrimination, dignity and respect for autonomy. However, standardized protocols to ensure supported decision-making and accessible informed consent procedures are not yet fully institutionalized within the national health system.

(b) Under the SIDA-funded CAD-L project, targeted efforts were undertaken to improve access to Sexual and Reproductive Health and Rights (SRHR) services for persons with disabilities. In 2023, CAD-L partners, together with the Ministry of Health, carried out a mapping exercise across five counties (Lofa, Nimba, Bong, Bomi and Montserrado County) identifying 74 health facilities and assessing their physical accessibility and service readiness. The assessment highlighted widespread infrastructural barriers and limited provision of disability-sensitive services. In response, disability awareness trainings were rolled out, reaching 157 health workers in 2024 and 192 healthcare professionals and county policymakers in 2025. Follow-up rapid clinic assessments indicated gradual improvements in staff attitudes and greater awareness of disability inclusion. Some facilities also introduced informal financial accommodations or limited free services for persons with disabilities as a measure to ease access.

Nevertheless, significant structural barriers persist. Most health facilities do not yet meet universal design standards, facing challenges such as inadequate ramps, narrow doorways, and inaccessible sanitation facilities, particularly in rural areas. Beyond physical barriers, access to health information in accessible

formats remains limited, and there is still a need for more systematically trained healthcare professionals equipped to respond appropriately to the specific needs and rights of persons with disabilities. Comprehensive health insurance coverage also remains insufficient, further increasing vulnerability to financial hardship when accessing services.

(c) NCD, NUOD and have prioritized the expansion of disability-inclusive SRHR education and services. In collaboration with the Ministry of Health and the support of DKT International, two SRHR training manuals were developed, one tailored for healthcare providers on disability awareness and another designed specifically for persons with disabilities on SRH services. These materials were produced in accessible formats, including Braille, to ensure broader reach and usability.

Between 2022 and 2025, 50 persons with disabilities, many of them women, were trained as SRHR Trainers of Trainers (ToT). These peer educators conducted structured community outreach sessions, reaching approximately 3,500 people in 2024 and 2,100 in 2025. The sessions addressed key issues such as family planning, prevention of sexually transmitted infections, sexual violence reporting mechanisms, and reproductive rights and bodily autonomy. The active leadership of women with disabilities within this peer education model strengthened their visibility as rights-holders and advocates, contributing to reducing stigma surrounding sexuality and disability.

At the national level, SRHR peer educators, promoted through the CAD-L framework, participated in the National SRHR Conferences held in 2023 and 2025 at the Ellen Johnson Sirleaf Ministerial Complex in Monrovia. The 2025 conference included a dedicated panel discussion on SRHR for persons with disabilities and minority groups, focusing on accessibility, inclusive health systems, and policy reform. Peer educators from Montserrado and other counties shared lived experiences and advocated for more inclusive services, marking an important step toward greater participation of persons with disabilities in national health policymaking.

Despite these advances, access to SRHR services remains uneven across the country, and sign language interpretation services are largely unavailable in public health facilities, limiting equal access to information and care. The inclusion of people with disabilities at national level and in policy-making remain a project-based initiatives rather than an institutional engagement.

(d) Training assessments show clear improvements in healthcare workers' knowledge and attitudes toward disability inclusion. However, the limited geographical coverage of project interventions, combined with weak coordination among organizations working on health and disability, has constrained the broader dissemination and institutionalization of acquired knowledge. Across much of the country, key systemic gaps remain evident: sign language interpreters are largely unavailable, disability status is not systematically captured in patient registration systems, and physical accessibility in health facilities is often partial or inadequate. While recent advocacy efforts have encouraged some County Health Teams to introduce disability identifiers in registration ledgers to support disaggregated data collection and evidence-based planning, this practice is not yet institutionalized nationwide. Full compliance with accessibility standards, particularly in patient-centered services such as accessible information and informed consent procedures, has not yet been achieved. The continued absence of reliable disability-disaggregated data further limits effective planning, monitoring, and delivery of inclusive health services.

(e) As lead implementer of the CAD-L project, AIFO actively participated in Ministry of Health coordination platforms, including the Reproductive Health Technical Committee (RHTC) and the Maternal and Perinatal Death Surveillance and Response (MPNDSR) meetings. This engagement contributed to strengthening attention to disability inclusion within national SRHR strategies and coordination mechanisms.

Although disability awareness trainings conducted under the CAD-L project have contributed to increased knowledge and improved attitudes among health personnel, consultations during these trainings revealed structural gaps within the health education system. In particular, national medical and nursing curricula do

not include mandatory modules on disability inclusion, accessibility standards, or communication with persons with disabilities.

Advocacy efforts have therefore focused on promoting the integration of disability awareness and basic sign language components into ongoing professional development frameworks under the Ministry of Health. However, these measures have not yet been formally institutionalized at national level.

ART. 26 - HABILITATION AND REHABILITATION

(a) AIFO, in close coordination with the World Health Organization (WHO) and the Non-Communicable Diseases and Injuries Department (NCDJ) of the Ministry of Health (MoH), facilitated Liberia's first systematic assessment of rehabilitation and assistive technology needs using the WHO STARS (Systematic Assessment of Rehabilitation Situation) tool. The assessment was conducted collaboratively with the Rehabilitation and Assistive Technology (RIAT) Technical Working Group and culminated in the development of an official report, currently under validation by the MoH. This process represents the first structured, evidence-based effort to assess national rehabilitation gaps and align services with international standards, including those promoted under the WHO Rehabilitation 2030 initiative. This process laid the foundation for the development of Liberia's first National Rehabilitation and Assistive Technology Strategic Plan. The approach adopted reflects key human rights principles, including participation, accountability, and alignment with international norms. The assessment process emphasized the integration of rehabilitation and assistive technology services into the national health system rather than maintaining them as isolated or charity-based interventions.

Through technical and financial support provided to the Ministry of Health, awareness and technical skills were strengthened within relevant departments to support long-term system integration of rehabilitation services. This contributes to shifting the approach toward recognizing rehabilitation and assistive technology as essential components of health services that enable persons with disabilities to attain and maintain maximum independence, functional ability, and participation in social and economic life.

(b) The STARS assessment identified significant gaps in the availability, accessibility, and geographic distribution of rehabilitation and assistive technology services across Liberia, particularly in rural and hard-to-reach counties. Rehabilitation services remain concentrated in urban areas, with limited specialized personnel, infrastructure, and assistive product supply chains available outside Monrovia and major referral facilities. The development of the forthcoming National Rehabilitation and Assistive Technology Strategic Plan is expected to address these disparities by outlining measures to decentralize services, strengthen referral systems, and integrate rehabilitation into primary health care structures, consistent with WHO Rehabilitation 2030 guidance. The process aims to promote more comprehensive and community-based approaches, ensuring that rehabilitation services are available closer to where persons with disabilities live. Through collaboration with WHO and national stakeholders, efforts have been made to embed rehabilitation within broader health sector planning, including non-communicable disease frameworks. This approach supports sustainability and long-term expansion of services beyond project cycles. Nonetheless, community-based rehabilitation (CBR) programmes remain limited in scale, and service delivery continues to depend in part on external support.

ART. 27 - WORK AND EMPLOYMENT

(a) Although implementation of section 5 of the NCD Act remains uneven, key mechanisms have been strengthened to support monitoring and policy dialogue. A sustained social dialogue platform, institutionalized through the National Tripartite Council, brings together the Ministry of Labour (MoL), Liberia Labor Congress (LLC), Liberia Chamber of Commerce (LCC), and the NCD as technical partner. With international support, regular meetings were held to integrate disability inclusion into national labour discussions and align with international labour standards. Through surveys, sectoral consultations, review meetings, and two national conferences, the social dialogue process culminated in the launch of the National

Roadmap on Decent Work for Persons with Disabilities in September 2025, consolidating 28 recommendations and 101 actions across five priority areas (Accessibility, Employment, Awareness and Advocacy, Public Finance, and Training and Education). Discussions have focused on employment quotas, developing a national database of employable persons with disabilities, and introducing monitoring mechanisms, including a proposed Disability Desk within the Ministry of Labour, though its functionality remains unclear. A technical committee and monitoring framework were established, but operational challenges persist. Capacity-building workshops have trained over 400 stakeholders, resulting in early impacts such as the hiring of persons with disabilities and local commitments to improve accessibility in administrative buildings.

(b) Recent progress in Liberia demonstrates a structured and increasingly institutionalized effort to improve access to decent work for persons with disabilities (PwDs), particularly through a national social dialogue process supported under the recent projects. However, the social dialogue consultations consistently identified discrimination, inaccessible infrastructure, and lack of reasonable accommodation as primary barriers to employment.

Concrete recommendations adopted within the National Roadmap on Decent Work for Persons with Disability include the adoption and enforcement of universal design standards in public infrastructure and digital services, regular workplace accessibility audits conducted with the participation of PwDs where NCD should be the leading institution, dedicated budget allocations for reasonable accommodation, revision of HR policies to focus on skills and essential job functions, mandatory disability awareness training for managers and staff, advocacy for equal pay for equal work in line with constitutional and international standards. The sectoral consultations (including agriculture, education, health, tertiary, security, HR, private sector and NGO sectors) also addressed attitudinal barriers, highlighting the need for sustained media campaigns, documentation of discrimination cases, and integration of disability into national labour policies. Notably, legal gaps were identified. The Decent Work Act does not explicitly include comprehensive disability provisions, and existing anti-discrimination clauses in broader legislation do not consistently reference disability. Participants recommended reviewing and amending the NCD Act and Decent Work Act to strengthen explicit prohibitions of disability-based discrimination, including denial of reasonable accommodation.

(d) The most significant strategic advancement has been the formalization of a National Roadmap on Decent Work for persons with disabilities, launched by the Ministry of Labour in Monrovia in September 2025. The roadmap clearly assigns roles and responsibilities across ministries, employer organizations, trade unions, OPDs, and partners, defines timelines and sectoral obligations, integrates disability inclusion into the National Labour Plan, and proposes a structured monitoring and evaluation framework. It also institutionalizes social dialogue at both county and national levels, creating a platform for sustained engagement on disability inclusion. The establishment of a dedicated Disability Desk within the Ministry of Labour provides a concrete institutional mechanism to ensure ongoing coordination, accountability, and the mainstreaming of disability inclusion within national labour governance.

Repeated engagement with human resources professionals has revealed practical employer concerns, such as the costs of workplace accommodations, performance expectations, and legal uncertainty. Through continued dialogue and the provision of evidence-based solutions, these concerns have been addressed, contributing to gradual shifts in attitudes and a growing willingness among employers to adopt inclusive hiring practices.

C. SPECIFIC OBLIGATIONS (Arts. 31–33)

ART. 31 – STATISTICS AND DATA COLLECTION

Efforts to strengthen disability data collection and coordination in Liberia are progressing but remain at an early stage of institutional development. The Alliance on Disability in Liberia has played a central role in coordinating organizations working on disability inclusion. Its Strategic Action Plan 2024–2029 prioritizes the collection and generation of reliable disability data, with the National Commission on Disabilities (NCD) designated as the lead institution to advance a more systematic and coordinated approach. The recent launch of the NCD Strategic Plan further emphasized that improving the collection, management, and use of data on persons with disabilities is a national priority, reflecting growing recognition that disaggregated and reliable data is essential for policy development, budgeting, monitoring of employment quotas, accessibility standards, and overall implementation of the Convention.

According to the 2022 Population and Housing Census conducted by the Liberia Institute of Statistics and Geo-Information Services (LISGIS), 2.2% of the population was reported to have a disability. This figure has been informally questioned within the disability community and among stakeholders, particularly regarding whether the Washington Group Short Set was fully and correctly applied. Greater transparency in methodology, question design, enumerator training, and data validation would help address these concerns. While LISGIS has indicated plans to produce a detailed thematic analysis of disability data, limited information is publicly available on its drafting, validation, or dissemination.

Overall, despite recognition of the strategic importance of disability data, Liberia continues to face significant gaps in systematic collection, inter-agency coordination, public reporting, and methodological transparency, highlighting the need for stronger institutionalization and reliable data to inform inclusive policies and programs.

ART. 32 – INTERNATIONAL COOPERATION

(a) Efforts to include persons with disabilities (PwDs) in international cooperation have largely relied on awareness campaigns, consultations, and donor-supported social dialogue platforms. Organizations such as the NCD, NUOD, OPDs and the Alliance on Disability in Liberia have participated in national and sectoral development processes, including the 2022 review of the National Action Plan for the Inclusion of Persons with Disabilities (2023–2027), endorsed by President George M. Weah with the support of UNDP and UNESCO. While the Plan sets ambitious inclusion goals, implementation remains limited and coordination among disability actors is fragmented. PwDs' voices are often heard through campaigns rather than structured engagement in high-level planning or donor coordination. The withdrawal of major donors, including USAID and SIDA, heightens the risk of deprioritizing disability inclusion, underscoring the need to mainstream these rights within national development and budgetary frameworks.

(b) Persons with disabilities and their representative organizations have participated in sectoral consultations and national conferences connected to Sustainable Development Goal (SDG) priorities, particularly in areas such as decent work, education, accessibility, and public finance. Initiatives like the National Roadmap on Decent Work for PwDs demonstrate alignment with SDG 8 (decent work and economic growth) and SDG 10 (reduced inequalities), while the revision of the National Action Plan 2023–2027 reflects the NCD's commitment to advancing the 2030 Agenda. However, implementation remains constrained by limited budgets and a reliance on international partners.

Despite these efforts, there is no formal, cross-sectoral mechanism to ensure the systematic consultation of OPDs in the broader national implementation and monitoring of the 2030 Agenda. Engagement has mostly taken place through project-based or thematic initiatives rather than through permanent institutional structures embedded in national SDG coordination processes.

RECOMMENDATIONS

Liberia has made progress in advancing the rights of persons with disabilities, particularly in dialogue, economic empowerment, and legislative reforms. Ensuring sustainability now requires consolidating these gains into stable national systems. Disability inclusion must be fully institutionalized within governance frameworks, supported by predictable domestic financing, strengthened coordination, and robust accountability. The State Party should prioritize inter-ministerial coordination under the NCD, establish dedicated budget lines, institutionalize consultation with OPDs, and operationalize disability-disaggregated data systems. Enforcement mechanisms, public reporting, and accessible complaints procedures are essential to translate commitments into measurable outcomes and reduce dependence on external funding.

Concluding observations section A

Despite positive initiatives, structural constraints persist at national and county levels. The NCD operates with limited staff and budget, restricting coordination, monitoring, and enforcement. Weak county-level capacity and absent budget allocations limit engagement with OPDs. Liberia should strengthen institutional stability within the NCD through adequate staffing, protected budgets, and knowledge management. Disability focal points across ministries and counties would enhance continuity, while increased domestic financing and clear coordination mandates would secure long-term ownership and effective implementation of the Convention.

Concluding observations section B

Progress in awareness, economic empowerment, health, rehabilitation, and social dialogue contrasts with incomplete legal and enforcement frameworks, gaps in anti-discrimination protections, accessibility, independent living, and inclusive health services. Many initiatives remain project-based and donor-dependent, with consultation mechanisms not fully institutionalized. The State Party should accelerate legal reform, adopt and enforce accessibility and reasonable accommodation standards, and ensure anti-discrimination safeguards. Domestic financing must support the National Roadmap on Decent Work for Persons with Disability, expand rehabilitation and community services, and embed disability inclusion in national plans with structured consultation, particularly for organizations representing women and girls with disabilities.

Concluding observations section C

Methodological concerns regarding census data, limited dissemination of disability-disaggregated findings, and weak data systems hinder evidence-based policy. International cooperation remains project-based, with reliance on external funding posing sustainability risks. The State Party should institutionalize transparent, disability-disaggregated data systems aligned with international standards, strengthen inter-agency coordination, and ensure public reporting. Embedding disability inclusion in national planning and financing, and advancing ratification of regional instruments, will consolidate national ownership and long-term sustainability.