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2021 High-level Political Forum Theme:

“Sustainable and resilient recovery from the Covid-19 pandemic that promotes the economic, social and environmental dimensions of sustainable development: building an inclusive and effective path for the achievement of the 2030 Agenda in the context of the decade of action and delivery for sustainable development”

Introduction

The Covid-19 pandemic is more than a health crisis, it is a crisis of economies and of social justice. Persons with disabilities are disproportionately negatively affected by the Covid-19 pandemic, as well as by discriminatory healthcare systems and policies. Persons with disabilities faced barriers to their equal to access services, information, education, and employment before the pandemic. These barriers have only been magnified.

States party to the Convention on the Rights of Persons with Disabilities (the CRPD) must “ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability.” This

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year's High-level Political Forum theme on recovery from the Covid-19 pandemic, focusing on nine of the 17 Sustainable Development Goals (Goals 1, 2, 3, 8, 10, 12, 13, 16, and 17), emphasizing inclusivity, is an important opportunity to create a more equitable world for persons with disabilities.

The Stakeholder Group of Persons with Disabilities highlights the urgency of ensuring no one is left behind. Persons with disabilities have rights on an equal basis with others, and their access to social protection, health care, food, employment and justice, along with many other facets of the Goals currently under review, cannot be ignored in the context of the pandemic and beyond. To achieve the Sustainable Development Goals, persons with disabilities cannot be left behind.

Goal 1 on No Poverty

1. Background and Current Situation

Persons with disabilities are disproportionately affected by multidimensional poverty and are more economically insecure.¹ There are an estimated 1 billion persons with disabilities globally, 80 percent of whom lives in poverty.² Both the 2030 Agenda for Sustainable Development and the UN Convention on the Rights of Persons with Disabilities (the CRPD) acknowledge the link between poverty and disability. Persons with disabilities often face barriers to access services, education, and employment. These barriers result in being less likely to participate economically in society, leading to poverty.³ CRPD Article 28 recognizes the need to ensure access to social protection and poverty reduction programs. And that persons with disabilities living in poverty should have assistance from the government to offset the cost of disability-related expenses.⁴

Many government poverty-reduction programs underestimate the barriers faced by persons with disabilities. Data collection for these programs often do not consider the diversity of persons with disabilities, including women and girls, persons living in rural or remote areas, those with higher support needs, persons with intellectual disabilities, or persons with psychosocial disabilities. Eligibility for certain benefits is often based on the criteria of incapacity to work, so those who are able to work are unable to obtain those benefits.⁵ Another challenge to receiving benefits can be the requirements for opening a bank account and identity papers.

¹ Transforming our world: the 2030 Agenda for Sustainable Development', UN General Assembly Resolution, 25 September 2015, [A/RES/70/1](#) para 23

² Ibid.

³ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals NO POVERTY*. 2020.

<https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/policy-guideline-no-poverty.pdf>

⁴ *Convention on the Rights of Persons with Disabilities: resolution / adopted by the General Assembly*, 24 January 2007, A/RES/61/106 <https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

⁵ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals NO POVERTY*. 2020.

<https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/policy-guideline-no-poverty.pdf>

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Physical, legal, and attitudinal barriers often stand between persons with disabilities and being able to access financial institutions. One example of these barriers are regulations or policies that require a guardian or witness to monitor transactions.

The global Covid-19 pandemic has worsened these inequalities and exposed deep preexisting fault lines of exclusion.⁶ Recognition of the disproportionate and harmful impacts of Covid-19 and its fallout on persons with disabilities is necessary to an inclusive recovery.⁷ The loss of independence by many persons with disabilities around the world during the Covid-19 pandemic has led to dependency on family members, charities, or NGOs for survival. Many persons with disabilities have lost their homes due to families' inability to provide support.⁸ And while some governments have taken measures to provide shelter for persons with disabilities without a home, there are concerns about shelters exclusively for persons with disabilities, and this correspondent increase in institutionalization.⁹

2. Recommendations

- Governments should take a human rights-based approach to assessing the inclusivity of their current social protection programs and policies.¹⁰ When completing the assessment, governments should focus on support requirements for participation of persons with disabilities rather than the disability.
- To create a more sustainable path out of poverty, governments need to make structural changes and ensure social protection systems are inclusive of persons with disabilities. This includes taking into consideration disability-related costs when measuring and monitoring poverty reduction. Those same social protection programs need to ensure the accessibility of information, basic services, assistive technologies, and financial services.
- Adopt a twin-track approach to implement a cohesive social protection system, through accessible and inclusive mainstream benefits and disability-specific schemes, to ensure both basic income security and coverage of disability-related extra costs for all persons with disabilities.¹¹
- Provide immediate financial assistance to persons with disabilities to cover the additional costs of living and the rise in the cost of food, medications, and other essential supplies.¹²

⁶ World Bank: *A More Accessible and Sustainable World: A Disability-inclusive Response to Covid-19*, December 1, 2020 <https://www.worldbank.org/en/news/feature/2020/12/01/a-more-accessible-and-sustainable-world-a-disability-inclusive-response-to-covid-19>

⁷ Ibid.

⁸ *Disability Rights During the Pandemic*. <https://covid-drm.org/assets/documents/Disability-Rights-During-the-Pandemic-report-web.pdf>

⁹ Ibid.

¹⁰ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals NO POVERTY*. 2020.

<https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/policy-guideline-no-poverty.pdf>

¹¹ Ibid.

¹² *Disability Rights During the Pandemic*. <https://covid-drm.org/assets/documents/Disability-Rights-During-the-Pandemic-report-web.pdf>

Goal 2 on Zero Hunger

1. Background and Current Situation

More than 820 million persons worldwide do not have enough food to eat and about 2 billion persons experience moderate or severe levels of food insecurity.¹³ Among these populations, persons with disabilities experience a greater risk of malnutrition and food insecurity.¹⁴ Article 28 of the CRPD guarantees the right of access to an adequate standard of living and social protection, including access to food.¹⁵

Persons with disabilities and their households are among the populations with the least access to food and nutrition. Higher rates of unemployment, lower earnings when employed, and extra costs due to societal barriers means that there is less available income for persons with disabilities to spend on food.

When persons with disabilities are able to access social protection measures, they are often insufficient and do not cover extra disability-related costs, leaving households further behind. Accessibility of food assistance programs may not be adequate for persons with disabilities, or someone may be deemed ineligible because of benefiting from disability-specific services. Infants, children and youth with disabilities are less likely to benefit from school-based nutrition programs because they are less likely to attend school.¹⁶

Some Covid-19 public health measures have created new barriers for persons with disabilities to access food. In Uganda, a survey among 10,000 persons with disabilities and family members in late April 2020 showed that 45 percent of persons with disabilities worried about how they would feed their family compared to 14 percent who worried that they might get infected with Covid-19.¹⁷ The Disability Rights Monitor (DRM) has also highlighted that persons with disabilities have not had access to food and adequate nutrition during the Covid-19 pandemic. It reported a significant proportion of persons with disabilities without access to food, across different levels of income. These specific findings indicate that governments should take appropriate steps to safeguard and promote the

¹³ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals FOOD AND NUTRITION*. 2020. <https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/ThematicBriefs/thematic-brief-food.pdf>

¹⁴ Ibid.

¹⁵ Convention on the Rights of Persons with Disabilities <https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

¹⁶ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals FOOD AND NUTRITION*. 2020. <https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/ThematicBriefs/thematic-brief-food.pdf>

¹⁷ International Labour Organization; Policy Brief: *Covid-19 and the World of Work: Ensuring the inclusion of persons with disabilities at all stages of the response*. June, 2020. https://www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_746909.pdf

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right to access food for persons with disabilities, and correct policies creating barriers to food for persons with disabilities.¹⁸

2. Recommendations

- When creating food programs, training should be included to address the requirements of persons with disabilities concerning food and nutrition. These trainings should be directed to:
 1. Policymakers and staff/volunteers of food assistance and distribution (or related) programs;
 2. The private sector working in the food system and industry;
 3. Planning and response staff and other humanitarian actors;
 4. Healthcare professionals, including nutrition workers and those working in schools, prisons, and residential institutions (where such institutions remain).¹⁹
- In the context of the Covid-19 pandemic, provide immediate financial assistance to persons with disabilities to cover the additional cost of living and the rise in the cost of food, medications, and other essential supplies.²⁰
- When necessary, including during pandemics, governments should enact emergency measures to ensure adequate and affordable food and medication distribution, including rural and remote areas, that fully takes account of the rights of persons with disabilities.²¹

Goal 3 on Good Health and Well-being

1. Background and Current Situation

The 2011 World Report on Disability²² indicates that around half of persons with disabilities living in poverty cannot afford healthcare services, including essential medicines, compared to one-third of persons without disabilities.²³ On average, persons with disabilities require more healthcare services, as they need access to the same services as persons without disabilities and may need disability-specific services.²⁴

¹⁸ *Disability Rights During the Pandemic*. <https://covid-drm.org/assets/documents/Disability-Rights-During-the-Pandemic-report-web.pdf>

¹⁹ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals FOOD AND NUTRITION*. 2020. <https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/ThematicBriefs/thematic-brief-food.pdf>

²⁰ Ibid.

²¹ *Disability Rights During the Pandemic*. <https://covid-drm.org/assets/documents/Disability-Rights-During-the-Pandemic-report-web.pdf>

²² World Health Organization [and] The World Bank. *World Report on Disability* https://www.who.int/disabilities/world_report/2011/report.pdf

²³ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals GOOD HEALTH AND WELL-BEING*. 2020. <https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/policy-guideline-good-health.pdf>

²⁴ Ibid.

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Many health policies and legislation insufficiently respect, protect, and fulfill the right to the highest attainable standard of health of persons with disabilities. Healthcare facilities' failure to meet accessibility requirements of information, physical access, interpretation, and any other needed accommodations has led to deepening barriers of access to health for persons with disabilities. Additionally, persons with disabilities face a wide range of human rights violations in healthcare settings, including forced treatment, deprivation of liberty, denial of legal capacity, as well as other forms of exploitation, violence, and abuse.²⁵

Persons with disabilities are disproportionately and negatively affected by the Covid-19 pandemic as well as the healthcare systems and policies that have been implemented by governments. A study in England and Wales from 2 March to 14 July 2020 compared the risk of Covid-19 related death according to a person's disability status on a 2011 census.²⁶ This study showed that persons with disabilities as defined by the census made up almost 6 out of 10 deaths involving Covid-19 during that time period; women with disabilities' Covid-19 mortality rate was about 2.4 times that of women without disabilities; and men with disabilities had a Covid-19 related mortality rate 2 times higher than men without a disability.²⁷

The Covid-19 pandemic has put tremendous pressure on health systems. This added pressure has caused reduced capacity or unavailability of services and medicines, including rehabilitation and assistive technologies, resulting in reduced levels of functioning and increased morbidity and mortality for persons with disabilities relying on these services.

Even more worryingly, some pandemic triage and other protocols have specific decision-making criteria that use "probable clinical outcome- the likelihood that the treatment will save the life of a person who would otherwise not recover."²⁸ Categorical discrimination on the basis of disability is always prohibited, even in times of crisis.²⁹ Both "bioethics and medical ethics have dismal track records for oversimplifying the diversity hidden under the label of disability."³⁰ Many organizations of persons with disabilities and their allies have fought against these discriminatory policies.

²⁵ Special Rapporteur on the rights of persons with disabilities: *Report on the Rights of Persons with Disabilities* <https://undocs.org/en/A/73/161>

²⁶ Office for National Statistics; *Coronavirus (Covid-19) related deaths by disability status, England and Wales: 2 March to 14 July 2020*. September 18, 2020. <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronaviruscovid19relateddeathsbydisabilitystatusenglandandwales/2marchto14july2020>

²⁷ Ibid.

²⁸ Scully, J.L. Disability, Disablism, and Covid-19 Pandemic Triage. *Bioethical Inquiry* 17, 601–605 (2020). <https://doi.org/10.1007/s11673-020-10005-y>

²⁹ The Siracusa Principles on the Limitation and Derogation Provisions in the ICCPR, <https://www.icj.org/wp-content/uploads/1984/07/Siracusa-principles-ICCPR-legal-submission-1985-eng.pdf>

³⁰ Scully, J.L. Disability, Disablism, and Covid-19 Pandemic Triage. *Bioethical Inquiry* 17, 601–605 (2020). <https://doi.org/10.1007/s11673-020-10005-y>

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Covid-19 vaccine distribution must ensure that “no person, no country should be left behind.”³¹ Persons with disabilities should be prioritized to receive vaccinations due to the increased risks persons with disabilities face, as well as having been left behind both before and during Covid-19 response. This is essential to ensure they will not be left further behind, “experiencing disproportionate loss of lives and livelihoods, inaccessible healthcare services, and undignified lives and aggravated disconnection from ... society.”³²

2. Recommendations

- Ensure that health laws and policies include non-discrimination provisions and enable better access to quality health services. Legislative and policy frameworks on health are key to the prevention of, and protection from, discrimination in accessing healthcare and health-related information, goods, and services.³³
- Include persons with disabilities in the creation accessible programs and campaigns. Ensuring that all health information and practices are available in a range of accessible formats, including braille and large print, national sign languages, and compatible with screen readers and other assistive technologies.
- Policymakers in health systems should adopt measures for capacity-building of health workers to remove attitudinal barriers and enhance skills, allowing them to address the health requirements of persons with disabilities, and in particular women and girls with disabilities.³⁴
- When collecting data, health systems should disaggregate information by age, gender, disability, race, ethnicity, income, migratory status, geographic location and other relevant characteristics.³⁵
- Critical care decisions should be based on knowledge of an individual’s medical history, not assumptions or quality of life.

Goal 8 on Decent Work and Economic Growth

1. Background and Current Situation

Prior to the Covid-19 pandemic, persons with disabilities were already facing widespread exclusion from the labor market, which has been exacerbated by the pandemic.

³¹IDA Recommendations on Accessing Covid-19 Vaccinations
https://www.internationaldisabilityalliance.org/sites/default/files/ida_recommendations_on_accessing_covid-19_vaccinations_final_01.12.20.pdf

³² Ibid.

³³ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals GOOD HEALTH AND WELL-BEING*. 2020.
<https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/policy-guideline-good-health.pdf>

³⁴ Ibid.

³⁵ Ibid.

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Additionally, persons with disabilities are and now even less likely to be employed through formal-sector employment.³⁶

This is particularly true of underrepresented groups within the disability movement, including persons with intellectual disabilities, persons with psychosocial disabilities, and persons with deafblindness, who face more significant barriers to employment. The employment gap is also larger between women with disabilities and women without disabilities.³⁷ While there is a lack of reliable and comparable data, available information shows persistent lower rates of employment for persons with disabilities.

Government responses must address barriers to employment for persons with disabilities that existed before the pandemic which have been amplified by the crisis, to guarantee that responses will be sustainable and resilient. The rights of persons with disabilities to employment, including in remote work during the pandemic includes: the right to be paid on an equal basis with others,³⁸ the right to reasonable accommodation within the workplace,³⁹ the prohibition of discrimination on the basis of disability in the workplace,⁴⁰ and the assurance that persons with disabilities are equally protected by labour rights, among others.

Persons with disabilities are also more likely to work in in the informal sector, and lockdowns have disrupted informal income sources. It is expected that relative poverty among informal sector workers will increase by approximately 34 percent as a result of Covid-19.⁴¹ As persons with disabilities are more likely to be precariously employed, the Covid-19 pandemic has left them more likely to be furloughed and less likely to have access

³⁶ International Labor Organization; Policy Brief: *Covid-19 and the World of Work: Ensuring the inclusion of persons with disabilities at all stages of the response*. June 2020. https://www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_746909.pdf

³⁷ Ibid.

³⁸ Persons with disabilities are routinely discriminated against in the recruitment and selection process and are liable to exploitation at work, often earning less than other employees without disabilities. Persons with intellectual disabilities are often expected to work unpaid for a period of time first to prove themselves and it is common for them to earn less than half a full salary - Inclusion International (Rohwerder, B. (2020). Uganda Situational Analysis. Inclusion Works. https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/15481/Uganda_IW_SITAN_June%202020_updated.pdf?sequence=5&isAllowed=y

³⁹ Reasonable accommodation has also been lacking at various workplaces, meaning persons with disabilities are not getting the required basics to enable them to communicate with fellow colleagues and facilitate their working which can result in persons with disabilities feeling isolated and opting to leave work (Rohwerder, B. (2020). Kenya Situational Analysis. Inclusion Works. https://opendocs.ids.ac.uk/opendocs/bitstream/handle/20.500.12413/15484/Kenya%20IW%20SITAN_June%202020_for%20opendocs.pdf?sequence=1&isAllowed=y

⁴⁰ Abuse and discrimination at work has been noted as an issue. Persons with disabilities cited high levels of negative jokes toward them, others had been assigned more difficult duties; while others were made to do unpleasant or hazardous jobs with others citing cases of threats and verbal abuse toward them by their employers, supervisors and fellow employees (ibid).

⁴¹ International Labor Organization; Policy Brief: *Covid-19 and the world of work: Ensuring no one is left behind in the response and recovery*. June 2020. https://www.ilo.org/wcmsp5/groups/public/---dgreports/---gender/documents/publication/wcms_750309.pdf

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to social protection systems.⁴² This will disproportionately affect persons with disabilities, and persons with disabilities from underrepresented groups in particular.

For persons with disabilities who have retained their jobs throughout the pandemic, changing work environments may impact the right to reasonable accommodation under Article 27 of the CRPD. An ILO Global Business and Disability Network (GBDN) survey identified telework for employees as one of the most frequent business responses to Covid-19,⁴³ and while for some persons with disabilities, telework is a form of reasonable accommodation, for others, such as employees with intellectual disabilities who benefit from in-person support from their colleagues and others in the workplace, the transition to telework may result in loss of essential workplace supports.

For family members of persons with disabilities who act as carers, national lockdowns and the loss of personal support services have also impacted the ability of these family carers to work.⁴⁴ Family members of persons with high support needs have often become the sole carer for their family member, impacting their own ability to work. In many countries, leaving work to care for a family member is considered voluntarily leaving the labor market, which limits access social protection schemes for these carers who are unable to engage in formal work.

The provision of social protection systems is closely linked with access to work, with accessible social protection systems becoming even more important during the pandemic as a result of increased unemployment. Persons with disabilities and their families face significant disability-related costs, yet among the 181 countries that adopted new social protection measures in response to Covid-19, only 60 countries have specifically referenced or targeted persons with disabilities and their families.⁴⁵ These families are more likely to be poor and less likely to be participating in the labour market.⁴⁶ In many cases, these social protection programs were also inaccessible – 42 percent of Inclusion International members reported that families of persons with intellectual disabilities were unable to access these Covid-19 social protection systems.⁴⁷ In countries where additional benefits were made available to persons out of work as a result of the pandemic, persons with disabilities who did not meet the minimum work hours requirement in the previous year were unable to access emergency social protection schemes and were left without a safety net during national lockdowns.⁴⁸

2. Recommendations

⁴² International Labor Organization; Policy Brief: *Covid-19 and the World of Work: Ensuring the inclusion of persons with disabilities at all stages of the response*. June 2020. https://www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_746909.pdf

⁴³ Ibid.

⁴⁴ Inclusion International. *Persons with Intellectual Disabilities Disproportionately Impacted by COVID 19*. November 2020.

⁴⁵ Centre for Inclusive Policy for UNPRPD; Policy Brief: *Initial overview of specific social protection measures for persons with disabilities and their families in response to COVID 19 crisis*. May 2020. https://socialprotection.org/sites/default/files/publications_files/Overview%20response_disability_SP_2005.pdf

⁴⁶ Ibid.

⁴⁷ Inclusion International. *Persons with Intellectual Disabilities Disproportionately Impacted by COVID 19*. November 2020.

⁴⁸ Inclusion International. *COVID19 Impact on persons with intellectual disabilities and families* (forthcoming).

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- Ensure CRPD compliant, inclusive employment, removing barriers and shifting the way that businesses conduct recruitment, support their employees, and create inclusive environments for all persons with disabilities.⁴⁹
- When remote work, flexible working hours and paid leave are applied, they should be discussed on a case-by-case basis, as not all workers with disabilities face the same risks. Persons with disabilities should be consulted and able to make informed decisions on their work manner and conditions.
- In cases of telework, employers should facilitate reasonable accommodations for the work environment at home, including height-adjustable desks, accessible digital content and applications, and sign language interpretation. The UK Trades Union Congress (TUC) launched a guide on reasonable adjustments in April 2020 to address issues resulting from telework among workers with disabilities.⁵⁰
- Government action toward the achievement of Goal 8 must include specific measures to ensure that the labour market is open and accessible to persons with disabilities during the economic recovery, and that social protection systems are accessible to all and specifically targeted to persons with disabilities who have been disproportionately impacted by the crisis. Persons with disabilities who face the most significant barriers to access must participate in the design of these measures.
- Support for persons with disabilities and their families, including personal assistance and other care and disability-related services must also be deemed essential services and must continue service delivery during the pandemic,⁵¹ which will ensure that persons with disabilities and their careers are able to work.
- As women shoulder the majority of care responsibilities,⁵² these adjustments need to be gender-responsive, to address women's needs as both receivers and providers of care, and to support the redistribution of care.

Goal 10 on Reduced Inequalities

1. Background and current situation

While the pandemic impacted the whole world and many groups have been affected, persons with disabilities are among the most affected. Many policies and programs put in place by governments in response to the pandemic were not inclusive of persons with disabilities and in some cases created even more segregation of persons with disabilities.

⁴⁹ An Introduction to Article 27 and Inclusive Employment Programming (2020) - International Disability Alliance's Inclusive Livelihoods Task Team.

⁵⁰ Trades Union Congress (2020) [Covid-19 and reasonable adjustments - guide for reps](#)

⁵¹ International Labor Organization; Policy Brief: *Covid-19 and the World of Work: Ensuring the inclusion of persons with disabilities at all stages of the response*. June 2020. https://www.ilo.org/wcmsp5/groups/public/---ed_emp/---ifp_skills/documents/publication/wcms_746909.pdf

⁵² ILO (2019) [A quantum leap for gender equality for a better future of work for all](#)

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Family members became the only available support for relatives with a disability due to restrictive measures. This has led them to leave their jobs to provide the support needed by the person with a disability. Parents found themselves as caregivers to their children during online education, which has been implemented in many countries. This situation amplified the gap between families with and without members with a disability.

In many cases, government communications and information sessions were not in accessible formats, such as in the national sign language. Overwhelmingly, there is lack of access to information for persons with disabilities related to COVID-19. This included lack of information in native sign languages, Braille, easy-to-read and other alternative formats. In some places, information did not reach communities in rural and remote settings, which impacted indigenous peoples, refugees, and persons in institutions, impacting older persons and persons with disabilities in these places.⁵³

Social protection measures, such as food distribution and medicine were not inclusive of persons with disabilities or not accessible to them.⁵⁴ Many persons with disabilities found themselves excluded from accessing their basic right to health services because of their disability through the triage systems put in place in many countries.

Data has shown that persons with disabilities were at greater risk of death due to Covid-19 than persons without disabilities. The rates are even higher among the population of persons with intellectual disabilities.⁵⁵ Older persons with disabilities, and persons living in institutions and congregated settings have been highly impacted by the pandemic. While before the pandemic, it was already known that these kinds of facilities are harmful and not human rights-compliant, the pandemic has amplified the situation and shed light on the conditions and impact of such facilities.

Moreover, while expert committees were created in many countries to reflect responses, persons with disabilities and their representative organizations were often excluded from participating in these discussions.

2. Recommendations

- Persons with disabilities and their representative organizations must participate in all disability-related policy design and Covid-19-related responses.

⁵³ Stakeholder Group of Persons with Disabilities; *The experience of persons with disabilities with COVID-19: a case study*. 2020. www.internationaldisabilityalliance.org/sites/default/files/master_sgpwd_covid-19_report_-_repaired_via_365_june_22_2020finalfinal.docx

⁵⁴ International Disability Alliance; *A Report on the Social Protection Response to COVID-19 for Persons with Disabilities, South Asian Region*. February 2021. https://www.internationaldisabilityalliance.org/sites/default/files/ida_south-asian-region-report_02-02-2021_2.pdf

⁵⁵ Office for National Statistics; *Updated estimates of coronavirus (COVID-19) related deaths by disability status, England: 24 January to 20 November 2020*. February 2021. <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/coronaviruscovid19relateddeathsbydisabilitystatusenglandandwales/24januaryto20november2020>

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- Deinstitutionalization processes must be planned and launched by all governments for systemic change to ensure smooth transitions and full inclusion of persons with disabilities in the community.
- Covid-19-related policies, including recovery measures, should be inclusive of persons with disabilities and their families, CRPD-compliant and based on a human rights approach.
- Social protection measures should not discriminate against persons with disabilities based on their disability and should consider disability-related costs in calculations.

Goal 13 on Climate Action

1. Background and current situation

Climate change affects the world's poorest and most marginalized people, with some estimates suggesting that 20 percent among those most vulnerable to climate change are persons with disabilities.⁵⁶ Collectively, persons with disabilities are one of the most resource-poor groups in the world, and often face further marginalization due to intersecting factors such as their gender, sexuality, ethnicity, religious adherence, level of education, and geographical location. The vulnerability of persons with disabilities has been highlighted within international climate change agreements, studies have identified higher mortality rates among persons with disabilities than others during natural disasters and extreme weather events.⁵⁷

In July of 2019, the Human Rights Council recognized that persons with disabilities are among the most adversely-affected in climate emergencies. It noted "the need for ensuring meaningful participation, inclusion and leadership of persons with disabilities and their organizations within disaster risk management and climate-related decision-making at the local, national, regional and global levels."⁵⁸ The adverse impacts of climate change on individuals with intersecting identities, including women and girls with disabilities, compounds the need for governments to support adequate measures to address persons with disabilities' specific needs and ensure participation in disaster response planning.⁵⁹

2. Recommendations

⁵⁶ Keogh M. & Gonzalez M., (2018) Climate Change: This Century's Defining Issue https://cbm-global.org/wp-content/uploads/2020/08/CBMGlobalclimate_change_report.pdf

⁵⁷ Sarah L. Bell, Tammy Tabe & Stephen Bell (2020) Seeking a disability lens within climate change migration discourses, policies and practices, *Disability & Society*, 35:4, 682-687, DOI: 10.1080/09687599.2019.1655856 <https://www.tandfonline.com/doi/pdf/10.1080/09687599.2019.1655856>

⁵⁸ HRC 41st, 09/07/2019, A/HRC/41/L.24, Human rights and climate change <https://documents-dds-ny.un.org/doc/UNDOC/LTD/G19/208/58/PDF/G1920858.pdf?OpenElement>

⁵⁹ Ibid.

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- Solutions to climate change must address the root causes of social injustice, discrimination and inequality affecting persons with disabilities.⁶⁰
- The CRPD as a whole must be applied to the 2030 Agenda and the SDGs in a cross-cutting manner. To achieve Goal 13, the following CRPD Articles must be upheld: 4, 9, 10, 11, 21 and 24.⁶¹
- The inclusion of persons with disabilities must be systematically taken up across all phases of the disaster management cycle and provision made for disability awareness and inclusion training of personnel, involving local organizations of persons with disabilities and disability NGOs (see CRPD Articles 11 and 32).
- As part of climate programs, ensure persons with disabilities meaningfully contribute to and benefit from activities designed to strengthen security in: food and nutrition; water, sanitation & hygiene (WASH); energy (cooking, lighting, heating, cooling); resilient, accessible shelter and other infrastructure; livelihoods and human security.
- Collect and use disaggregated data by disability to inform climate-related policymaking.
- Governments should adopt a comprehensive, integrated, gender-responsive and disability-inclusive approach to climate change adaptation and mitigation policies, consistent with the United Nations Framework Convention on Climate Change.⁶²

Goal 16 on Peace, Justice and Strong Institutions

1. Background and Current Situation

Persons with disabilities and their representative organizations worldwide are advocating against discriminatory policies and programs in the response to Covid-19. Persons with disabilities must have full and meaningful participation in policy processes for the pandemic, including monitoring and evaluation.

Discrimination magnifies barriers for persons with disabilities to access justice, and is further amplified by restrictions on the exercise of legal capacity, lack of physical access to justice facilities, and stigma.⁶³ Even rights such as the right to remain silent and the presumption of innocence may be denied either directly in law or policy, or indirectly in custom and

⁶⁰Human Rights Council: *Panel discussion on the rights of persons with disabilities in the context of climate change.* <https://www.ohchr.org/EN/HRBodies/HRC/Pages/NewsDetail.aspx?NewsID=26055>

⁶¹ International Disability Alliance, Stakeholder Group of Persons with Disabilities, and The Danish Institute for Human Rights. (2018). *The Rights of Persons with Disabilities and the Sustainable Development Goals: A Matrix mapping the links between the SDGs and the Convention on the Rights of Persons with Disabilities.* https://www.humanrights.dk/sites/humanrights.dk/files/media/migrated/the_rights_of_persons_with_disabilities_and_the_2030_agenda_for_sustainable_development_-_eng.ver.pdf

⁶² HRC 41st, 09/07/2019, A/HRC/41/L.24, Human rights and climate change <https://documents-dds-ny.un.org/doc/UNDOC/LTD/G19/208/58/PDF/G1920858.pdf?OpenElement>

⁶³ SR on the rights of persons with disabilities, 15 August 2019 *International Principles and Guidelines on Access to Justice for Persons with Disabilities*, https://www.ohchr.org/Documents/Issues/Disability/SR_Disability/GoodPractices/Access-to-Justice-EN.pdf

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practice.⁶⁴ Persons with disabilities who live in institutions have been left behind by programs and information on Covid-19 response. According to the Disability Rights Monitor (DRM), persons with disabilities have not been uniformly included in developing policies and programs on Covid-19, including the prioritization of vaccines.⁶⁵

Article 13 of the CRPD stipulates that State Parties shall provide training to law enforcement officers and prison staff on best practices and approaches with persons with disabilities.⁶⁶ However, the reality of attitudes and practices during the pandemic runs counter to this. Criminalization for breaking the lockdown measures has led to increased targeting of persons with disabilities and mistreatment by law enforcement actors.⁶⁷

Even before the pandemic, barriers to equal legal access for persons with disabilities were extensive. If arrested, many persons with disabilities find that courts are not accessible to various disabilities, such as court systems not offering sign language interpreters when needed, or providing wheelchair access.⁶⁸ Inaccessibility excludes persons with disabilities from processes and from seeking legal recourse. During the pandemic, court sessions have been held virtually, with little regard for the basic accessibility requirements of persons with disabilities. When faced with uneven access to justice, persons with disabilities are more likely to be convicted and overrepresented in prisons. With poor facilities and minimal social distancing, the risk of contracting the virus for institutionalized persons with disabilities has been high.⁶⁹

The availability of disaggregated and reliable data on how many persons with disabilities have been affected by Covid-19 at all levels will support inclusive policies and programs responding to Covid-19. This data is crucial to building resilience and an inclusive society during the pandemic. Yet a lack of data on situation of persons with disabilities and Covid-19 remains.⁷⁰

Access to justice is fundamental for the enjoyment and fulfillment of all human rights and has become more challenging for women and girls with disabilities who are survivors of gender-based violence during the pandemic. Studies and research during the pandemic have shown an increase in gender-based violence cases against women and children, including women and girls with disabilities. The UN Secretary-General urged governments to

⁶⁴ Ibid.

⁶⁵ *Disability Rights During the Pandemic*, <https://covid-drm.org/assets/documents/Disability-Rights-During-the-Pandemic-report-web.pdf>

⁶⁶ *Convention on the Rights of Persons with Disabilities: resolution / adopted by the General Assembly*, 24 January 2007, A/RES/61/106 <https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

⁶⁷ Covid-19 Disability Rights Monitor (covid-drm.org)

⁶⁸ Ibid.

⁶⁹ Human Rights Watch, *Human Rights Dimensions of Covid-19 Response*. https://www.hrw.org/news/2020/03/19/human-rights-dimensions-covid-19-response#_Toc35446581

⁷⁰ Stakeholder Group of Persons with Disabilities; *The experience of persons with disabilities with COVID-19: a case study*. 2020. www.internationaldisabilityalliance.org/sites/default/files/master_sgpwd_covid-19_report_-_repaired_via_365_june_22_2020finalfinal.docx

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prioritize preventing and ending gender-based violence in their response plans for Covid-19.⁷¹

2. Recommendations

- Adopt or modify information laws and regulations so that accessibility of information for persons with disabilities is ensured in official publications and events.
- Ensure that any requests of public information by persons with disabilities are provided in the accessible format without additional cost,⁷² including government websites and publications.
- Ensure that the design and implementation of any public policy or program for Covid-19 reflects the following five core pillars necessary to construct an inclusive policy framework. The five core pillars are: non-discrimination; accessibility by addressing and preventing barriers; support to persons with disabilities to benefit from the policy and programs; full participation and awareness-raising for and about persons with disabilities; and combating negative stereotypes and promotes knowledge about and respect for, their rights and dignity.⁷³
- Develop national targets and indicators for tackling the specific barriers women and girls with disabilities face to access the justice system, particularly for children and women with disabilities who are survivors of domestic and gender-based violence.
- Include women and girls with disabilities in plans to address gender-based violence and eliminate harmful traditional practices and involve them in planning monitoring and evaluating programs designed to eliminate these practices during the pandemic and beyond.
- Train officers of the law on disability, making courtrooms accessible for diverse disability needs, and creating inclusive strategies for future disruptions like the pandemic.
- Ensure clear monitoring mechanisms and policies reach children with disabilities living in institutions, including access to information on Covid-19 and how to protect themselves from Covid-19, as is relevant to Articles 7, 13, 14, 15, 16, and 21 of CRPD and to meet target 16.2.
- Governments should ensure that policies and laws at national and local levels promote and provide access to justice for all persons with disabilities who are victims of gender-based violence during the pandemic by ensuring accessibility

⁷¹Secretary-General's Policy Brief on the Impact of Covid-19 on Women, <https://www.unwomen.org/-/media/headquarters/attachments/sections/library/publications/2020/policy-brief-the-impact-of-covid-19-on-women-en.pdf?la=en&vs=1406>

⁷² OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals FOUNDATIONS*. 2020 <https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/policy-guideline-foundations.pdf>

⁷³ Ibid.

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and reasonable accommodation in the judicial process in line with articles 12, 13, and 16 aligning with Goal 16 indicator 3: “Promote the rule of law at the national and international levels and ensure equal access to justice for all.”

- Involve persons with disabilities and their representative organizations in decision-making processes at all levels when discussing policies and programs on Covid-19 response, including involving them in monitoring and evaluation of Covid-19 programs, including social safety nets, and food aid, to align with CRPD articles 4 and 29 and to meet Goal 16 indicator 6.

Goal 17 on Partnerships

1. Background and Current Situation

Governments often partner with stakeholders to provide goods and services to their populations, including companies, universities, and civil society organizations. Public and private partnerships have become a common model in funding and implementing development programs. Medical and charity-based, rather than human rights-based models of disability services are pervasive and often dominate multi-stakeholder partnerships. Setting objectives that align with the CRPD will ensure persons with disabilities enjoyment of rights and benefits of development.

When it comes to multi-stakeholder implementation of Covid-19 related policies and programs, it is crucial for these partners to keep in mind Goal 17 target 16 to ensure that they are mobilizing and sharing knowledge, expertise, technology, and financial resources.

Goal 17 target 18 also encourages the enhancement of capacity-building support to developing countries, including for least-developed countries and Small Island Developing States, to significantly increase the availability of high-quality, timely and reliable data disaggregated by income, gender, age, race, ethnicity, migratory status, disability, geographic location and other characteristics relevant in national contexts.⁷⁴

2. Recommendations

- Collect and disaggregate Covid-19 data by disability, age, and other factors to learn about barriers and to measure disability-inclusive response and recovery actions and to adequately assess the impact of programs and projects.
- Involve persons with disabilities and their representative organizations in planning, implementation and monitoring of Covid-19 response and recovery efforts in line with the CRPD and SDGs.

⁷⁴ OHCHR. *Policy Guidelines for Inclusive Sustainable Development Goals FOUNDATIONS*. 2020 <https://www.ohchr.org/Documents/Issues/Disability/SDG-CRPD-Resource/policy-guideline-foundations.pdf>

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- Invest in data for disability-inclusive development and to build capacity in stakeholders, especially organizations of persons with disabilities, to be better prepared to survey their communities in future emergencies.
- Support communities in gathering citizen-generated data to complement traditional data sources and highlight information that cannot be captured in other ways.⁷⁵
- Ensure a human rights-based approach to disability in the design, implementation, monitoring and evaluation of all efforts and refrain from funding or implementing projects that are contrary to the rights of persons with disabilities.
- Promote, develop, and strengthen the capacity and competence of international cooperation agencies and multilateral financial organizations on rights-based disability inclusion.
- Support research and access to scientific and technical knowledge on inclusion of persons with disabilities and facilitate access to and sharing of accessible and assistive technologies.⁷⁶

Conclusion

In closing, governments must redouble their efforts to reach the most marginalized and furthest behind to implement policies and programs to address the discrimination and disadvantage faced by persons with disabilities.

Governments should uphold the CRPD's standards on the right to access to social protection and poverty reduction programs, including assistance to offset the cost of disability-related expenses for persons with disabilities living in poverty.⁷⁷ Disability data should be collected to inform policymakers, who, in collaboration with organizations of persons with disabilities and in line with the CRPD, must enact new evidence-based regulations and laws to ensure the inclusion and equal participation of persons with disabilities in society. As vaccinations are being disseminated, persons with disabilities should be prioritized because they face increased risks in the pandemic and have been left behind both before and during the COVID-19 response. This is essential to ensure they will not be left further behind, "experiencing disproportionate loss of lives and livelihoods, inaccessible healthcare services, and undignified lives and aggravated disconnection from...society."⁷⁸

The Sustainable Development Goals are interrelated, and governments should address all facets of inequality with a sense of urgency. Dismantling barriers to employment,

⁷⁵ [COVID-19 Disability Rights Monitor \(covid-drm.org\)](https://covid-drm.org)

⁷⁶ UNGA. *Report of the Special Rapporteur on the rights of persons with disabilities, Catalina Devandas-Aguilar*. 20 July 2020. <https://undocs.org/en/A/75/186>

⁷⁷ *Convention on the Rights of Persons with Disabilities: resolution / adopted by the General Assembly, 24 January 2007, A/RES/61/106* <https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>

⁷⁸ *Recommendations on Accessing Covid-19 Vaccinations* https://www.internationaldisabilityalliance.org/sites/default/files/ida_recommendations_on_accessing_covid-19_vaccinations_final_01.12.20.pdf

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healthcare, education, and other aspects of systemic infrastructure for persons with disabilities must be central to government responses to guarantee that they will be sustainable and resilient. Governments and the United Nations system should act to ensure the rights of persons with disabilities in COVID-19 response and recovery. In effort to 'Build Back Better' and build a resilient and sustainable recovery from the pandemic it is vital to ensure no one is left behind.