

REPORT

Monitoring the Implementation of the UN Convention on the Rights of Persons with Disabilities

The UK Independent mechanism
list of issues interim report



Contents

Foreword	3
Introduction	4
Submission, by Article	6
Articles 3 and 4: General principles and obligations	6
Article 5: Equality and non-discrimination	8
Article 6: Women with disabilities	9
Article 7: Children with disabilities	10
Article 8: Awareness-raising	11
Article 9: Accessibility and Article 21: Freedom of expression and opinion and access to information	12
Article 10: Right to life	14
Article 12: Equal recognition before the law	15
Article 13: Access to justice	16
Article 14: Liberty and security of person	18
Article 15: Freedom from torture or cruel, inhuman or degrading treatment or punishment	18
Article 16: Freedom from exploitation, violence and abuse and Article 17: Protecting the integrity of the person	19
Article 19: Living independently and being included in the community	20
Article 23: Respect for home and the family	24
Article 24: Education	24
Article 25: Right to the highest attainable standard of physical and mental health	26
Article 27: Work and employment	29
Article 28: Adequate standard of living and social protection	30
Article 29: Participation in political and public life	33
Article 30: Participation in cultural life, recreation, leisure and sport	33
Article 31: Statistics and data collection	34
Article 33: National implementation and monitoring	35
Article 46: Reservations	37
Annex	39
Contacts	46

Introduction

The UK Independent Mechanism (UKIM)

The Equality and Human Rights Commission (EHRC), the Equality Commission for Northern Ireland (ECNI), the Northern Ireland Human Rights Commission (NIHRC) and the Scottish Human Rights Commission (SHRC) are designated, by Article 33(2), as the UK Independent Mechanism (UKIM) to promote, protect and monitor the implementation of the UN Convention on the Rights of Persons with Disabilities (UNCRPD) in the UK.

Scope

The organisational structure of UKIM reflects the constitutional make up of the UK. This report covers matters which are the responsibility of the UK Government as well as those which have been devolved to the Northern Ireland Executive, the Scottish Government and the Welsh Government (the devolved governments). For clarity, we explain in the main report and the endnotes where a policy, the law, evidence and data or an issue is specific to or differs significantly in one or more of the four nations.

The report

The report is largely structured to reflect that adopted by the UK in its Initial Report on UNCRPD. It draws on the significant work done in relation to the Convention by each of the Commissions since the UK ratified the UNCRPD in 2009. UKIM has been actively involved in engaging civil society, and in particular disabled people and disabled people's organisations (DPOs) with the monitoring process. This has included events to raise awareness of the Convention rights and obligations; capacity building events to build practical knowledge of and to discuss how best DPOs can engage with the UN reporting process and using new technologies to reach disabled people in remote and rural areas. Disabled people were involved in the development of this submission through a series of events and a call for evidence to capture their views, experiences and priority issues.

The report has also drawn on our internal sources, such as legal casework and enforcement, treaty monitoring, research, responses to government consultations and policy work. We have also relied on many external sources such as reports from DPOs, academic research and reports of other regulators and Ombudsmen.

Submission, by Article

Articles 3 and 4: General principles and obligations

Taking into account the protection and promotion of the human rights of disabled people in all policies and programmes

In its Initial Report, the UK Government states that ‘new and reformed policies that might affect disabled people are considered in the light of Convention obligations’.¹ It is not clear, however, what mechanisms are in place to carry out this assessment and how the assessment is co-ordinated across the four nations which make up the UK.

The UK Parliament’s Joint Committee on Human Rights’ (JCHR) inquiry into Article 19 recently concluded that ‘the UNCRPD, and Article 19 in particular, does not appear to have played a central role in the development of policy. Inadequate attention has been paid to the impact of relevant policy on the implementation of the UNCRPD, in contravention of Article 4(1) and 4(3).’²

UKIM recommends that the CRPD Committee ask the UK:

1. To explain how the UK and devolved governments take into account the UNCRPD in the development and implementation of all new and existing policies, programmes, and legislation and how this action is co-ordinated at national and UK-wide level

The UK and devolved governments have each taken measures to embed the UN Convention on the Rights of the Child (UNCRC) into the development of new policy and legislation. The JCHR has called for an equivalent commitment that the UK ‘will give due consideration to the articles in the UN Disability Convention when making new policy and legislation’.³

UKIM recommends that the CRPD Committee ask the UK:

2. Do the UK and devolved governments intend to implement the JCHR's recommendation and, if so, when?

Ensuring public authorities and institutions act in conformity with the UNCRPD

In the UK, decisions about some of the most important aspects of disabled people's lives rest in the hands of regional, local and other national bodies. For example, local authorities arrange or provide adult social care services and decide whether a disabled person has to pay for these services.⁴ The UK Initial Report does not provide information about the measures taken to ensure that such bodies recognise and implement the rights in the Convention.

UKIM recommends that the CRPD Committee ask the UK:

3. To describe the measures in place to ensure that public authorities, including councils, are aware of and act in conformity with the Convention and the outcomes of those measures.

Involving disabled people in the development and implementation of legislation and policies

The UK Initial Report affirms the UK's support for the requirement under Article 4(3) that disabled people should be involved in the implementation of the Convention and other decision-making processes. However, it does not provide information about how the views of disabled people are actively sought and incorporated into the development and implementation of policy- and law-making across the UK.

UKIM recommends that the CRPD Committee ask the UK:

4. To detail, with examples, how the UK and devolved governments ensure the active involvement of disabled people and children in the development and implementation of legislation and policies and the effect of this involvement.

Article 5: Equality and non-discrimination

Disability discrimination law in Northern Ireland

As a result of the implementation of the Equality Act 2010 (EA 2010) disability equality legislation in Britain has been harmonised and strengthened providing a greater level of protection for disabled people in England, Scotland and Wales.

The UK Initial Report claims the Disability Discrimination Act 1995 (DDA), extant in Northern Ireland (NI), offers 'similar protection' for disabled people as the EA (2010). This is inaccurate as the EA (2010) provides for redress against perceived and associative discrimination; indirect discrimination; discrimination arising out of a disability; establishes the reasonable adjustment duty to provide auxiliary aids and services for disabled pupils and prohibits asking questions about disability and health during the recruitment process, except in limited circumstances.

The DDA does not provide these protections. Therefore, there is a significantly lower level of protection from disability discrimination in Northern Ireland compared to the rest of the UK.⁵

UKIM recommends that the CRPD Committee ask the UK:

5. What measures the Northern Ireland Executive has taken to ensure that the legislative protections for disabled people in Britain are available in Northern Ireland.

Damages for disability discrimination in school education

Discrimination cases in the provision of school education, which do not involve disability, are dealt with in the Sheriff or County Court; they are empowered to award all remedies available in the Court of Session and High Court, which includes damages for any loss and compensation for injury to feelings.

However, disability cases go to the Special Educational Needs Tribunal (SENDIST) in England, Wales and Northern Ireland and the Additional Support Needs Tribunal Scotland (ASNTS) in Scotland, which are not empowered to award compensation for discrimination or harassment. Neither do they have the power to provide injunctive relief (interdicts or specific implements in Scotland).

This means that there can be situations where one child could be harassed because of race and one because of disability and the first child can seek compensation and injunctive relief, whilst the second child cannot.

UKIM recommends that the CRPD Committee ask the UK:

6. What steps has the UK taken to monitor and remedy the different treatment of disabled children seeking redress against discrimination or harassment in schools with regard to access to compensation and injunctive relief?

The issues above are also relevant to Article 13, access to justice.

Article 6: Women with disabilities

Violence against disabled women and girls

Disabled women experience disproportionate levels of all forms of violence and abuse at the hands of carers and partners as well as in the community. In particular, disabled women are more likely than non-disabled women to have been a recent victim of crime⁶ and they feel less safe and more at risk of violent attack when out after dark than non-disabled women and men.⁷ Recent research from England suggests that rape allegations involving adult complainants with recorded mental health impairments are less likely to be referred to the Crown Prosecution Service by the police.⁸

Studies throughout the UK have identified a higher incidence of domestic violence amongst disabled women compared with non-disabled women.⁹ Evidence from England concluded that 'cutbacks in national budgets have led to reductions in the provision of local services and the loss of specialised expertise'.¹⁰ Recent public health guidance recommends that more needs to be done to help people, including disabled women, who find domestic violence and abuse services inaccessible or difficult to use.¹¹ Similar evidence on the inconsistent provision of accessible domestic abuse support services is available in relation to Wales.¹²

UKIM recommends that the CRPD Committee ask the UK:

7. To outline the availability of specialist services that are accessible to disabled women who experience sexual or domestic abuse. Where these services are provided locally, how do the national governments meet their responsibilities by collating information on service availability and adequacy?
8. To evidence how local and national domestic violence strategies, policies and programmes identify the needs of disabled women and ensure disabled women are able to use domestic abuse services.

Article 7: Children with disabilities

Inclusion of disabled children (also relevant to Article 4)

The UN Committee on the Rights of the Child (the UNCRC) has voiced their concern that in the UK there is no comprehensive national strategy for the inclusion of disabled children.¹³

The UK Government's disability strategy and action plan, *Fulfilling Potential – Making it Happen*,¹⁴ does not set out a comprehensive plan for the inclusion of disabled children in society. It is also unclear whether the needs of disabled children have been included in national disability or children's strategies. Nor is there an indication of how disabled children have been involved in the development of national policies and strategies for disability and children.

UKIM recommends that the CRPD Committee ask the UK:

9. To detail the methods by which the views of disabled children and young people are respected fully and taken into account in the development of UK and devolved government strategies, policies and programmes on disability and children and to evidence the effect this has had.

Poverty (also relevant to Article 28)

In the UK disabled children experience higher levels of poverty and personal and social disadvantage than other groups of children¹⁵ and it was estimated that 4 out of 10 disabled children lived in poverty in 2008/9.¹⁶ Parents of disabled children face

particular barriers to accessing or remaining in employment. An Independent Parliamentary Inquiry concluded that the lack of appropriate or affordable childcare for disabled children and young people means that families with disabled children are more likely to experience poverty.¹⁷ In addition, concerns have been raised that the UK Government's welfare reform programme is having the effect of increasing levels of poverty experienced by disabled children.¹⁸

UKIM recommends that the CRPD Committee ask the UK:

10. To explain the initiatives that have been taken to reduce the number of disabled children living in poverty and the effect these initiatives have had.

In care (this is also relevant to Article 31)

The UN Committee on the Convention on the Rights of the Child (UNCRC) has raised concerns about the increased number of disabled children in alternative care settings. The exact number of disabled children who are looked after is not known because the data is not collected. However, there is evidence across the UK that they are more likely to be looked after, remain in care for longer and have a higher risk of being placed inappropriately and experience a higher turnover of placements in comparison to non-disabled children.¹⁹

UKIM recommends that the CRPD Committee ask the UK:

11. To evidence how the particular needs of looked after disabled children are being addressed, the measures that have been taken to ensure they receive the support and care needed and the outcomes achieved by those measures.

Article 8: Awareness-raising

Prejudice and negative attitudes

There is significant evidence highlighting the continuing existence, nature and extent of prejudice and negative attitudes towards disabled people, including at work, school and in the community.²⁰

This may be reinforced by negative portrayals of disabled people in the media, including an increase in articles in the print media about the 'burden' that disabled

people are alleged to place on the economy.²¹ The National Centre for Social Research (2012) recorded deteriorating attitudes towards disabled people who are benefits recipients.²²

People with mental health conditions and those with 'hidden' impairments were more likely to receive unsympathetic treatment from the press than other groups.²³

UKIM recommends that the CRPD Committee ask the UK:

12. To detail the steps taken and outcomes achieved to initiate and encourage public portrayals of disabled people, including through government communications, that are consistent with the purpose of the Convention.

Article 9: Accessibility *and* Article 21: Freedom of expression and opinion and access to information

Housing

There is a lack of accessible housing across the UK²⁴ and no mechanism that guarantees accessible housing. The problem is likely to become more acute if new house building should slow.

UKIM recommends that the CRPD Committee ask the UK:

13. To provide current data on the extent to which accessible housing is available across the UK and information on how the UK will ensure that new and existing housing is accessible and can be easily adapted when people become disabled.

Access to the built environment and shared space

There are concerns across the UK about the accessibility of the urban and rural environment.²⁵ The most common barriers disabled adults experience when accessing buildings are: stairs; doors or narrow corridors; inadequate lifts or escalators; parking problems; lack of ramps/handrails; footpath design and surfaces; difficulty with transport getting to the building; lack of help or assistance.²⁶

The potential dangers to people with visual impairments and other disabled people of shared space street design, which means that vehicles and pedestrians share the same space without an obvious dividing line between them, was highlighted in a documentary launched in the House of Lords in December 2013.²⁷

UKIM recommends that the CRPD Committee ask the UK:

14. To explain the steps taken to improve access to the built environment including ensuring that public and private organisations comply with accessibility standards and to detail the effectiveness of these steps.
15. To explain the steps taken to ensure that street designs are accessible to and do not put at risk people with visual and other impairments and to detail the effectiveness of these steps.

Transport

UKIM acknowledges the steps put in place to improve accessibility of transport described in the UK Initial Report. However, disabled people continue to experience significant barriers when trying to use transport including the lack of accessible railway stations, difficulties getting in or out of transport, getting to and from bus stops or bus/ train stations, the lack of integration between the different modes of transport, and the attitudes of staff.²⁸ The Parliamentary Select Committee on Transport has voiced its disagreement with the UK government's decision to opt out of EU requirements for bus and coach operators to provide disability awareness training for staff. It also raised concerns about how the implementation of the Department for Transport accessibility action plan is being monitored.

UKIM recommends that the CRPD Committee ask the UK:

16. To provide evidence of the effectiveness of legislation and public initiatives aimed at improving transport accessibility (including bus, rail, taxi and transport by air and sea); and to explain how monitoring is undertaken to ensure compliance with and improvements to meet its obligations under the Convention.

Information in accessible formats

There are concerns about the availability of accessible information about government services and, in particular, information about health and social care

services not being provided in a way that is easily understandable to people with learning disabilities.²⁹ Across the UK there is a shortage of appropriately qualified Sign Language Interpreters, lip speakers and palantypists.^{30 31} These concerns are particularly apparent in Northern Ireland.³²

UKIM recommends that the CRPD Committee ask the UK:

17. To provide an update on the steps taken to ensure the provision of information in accessible and appropriate formats, including Easy Read, and how the effectiveness of these measures is monitored.
18. To provide information on the availability of sign language interpreters, lip speakers and palantypists and the steps being taken to increase availability and ensure disabled people can access appropriate communication support in a timely and cost-effective manner.

Article 10: Right to life

Suicide

Suicide rates continue to be a concern across the UK, with particularly high rates in Northern Ireland and Scotland.^{33 34} Strategic responses to suicide vary across the UK.

UKIM recommends that the CRPD Committee ask the UK:

19. To explain how current suicide prevention strategies take account of the needs and circumstances of disabled people, in particular those with mental health problems, and to evidence the effectiveness of these steps in reducing suicide rates.

Deaths in mental health detention

There is no single person or agency automatically responsible for investigating non-natural deaths in mental health settings.³⁵ The Mental Welfare Commission for Scotland has also highlighted that people leaving detention are at greater risk of suicide.³⁶ In Scotland, a review of Fatal Accident Inquiry legislation recommended a mandatory fatal accident inquiry into the death of any person who is subject at the

time of death to compulsory detention by a public authority.³⁷ The Scottish Government has not confirmed whether it intends to implement this recommendation in full and is currently consulting on alternative options.

The Equality and Human Rights Commission (EHRC) has recently launched an inquiry into non-natural deaths in detention of adults with mental health conditions³⁸. While there have been previous inquiries into this issue by other organisations, the EHRC is concerned that not all lessons appear to be learnt, and every year deaths occur that are later deemed to have been preventable.

UKIM recommends that the CRPD Committee ask the UK:

20. To explain the steps taken to ensure that the UK carries out full and independent investigations into deaths in mental health care settings and to evidence the effectiveness of these steps.

Article 12: Equal recognition before the law

The law governing mental capacity is different across the three legal jurisdictions of the UK.

However, each of the legal frameworks provide that, in certain circumstances, where an individual is functionally incapable of making a decision, an authorised individual may intervene and make a decision on their behalf either in their 'best interests'³⁹ (in England, Wales and Northern Ireland) or for their 'benefit' (in Scotland). Such an intervention can only be made once an attempt has been made to support the person to take the decision themselves.

A Parliamentary Committee considering the implementation of the law governing mental capacity in England and Wales found that 'best interests' decision-making is often not undertaken in the way set out in the Act: the wishes, thoughts and feelings (of the individual deemed to lack capacity) are not routinely prioritised.⁴⁰ Evidence presented to the Committee highlights that paternalistic attitudes have persisted.⁴¹

Each of the frameworks makes provision for an individual to appoint an attorney to make decisions on their behalf should they become mentally incapable. There are concerns that the current and proposed frameworks do not provide sufficient protection against abuse, and in particular, financial abuse.⁴²

UKIM recommends that the CRPD Committee ask the UK:

21. To explain how the effectiveness of the frameworks governing mental capacity in each nation is being monitored, what actions have been taken to improve the availability of support in decision-making and the outcome of such action.
22. To explain how the effectiveness of the safeguards, which are in place to protect disabled people from abuse, in particular financial abuse, are monitored, to detail the steps taken to eradicate such abuse and to evidence the effectiveness of such steps.

Article 13: Access to justice

Effective participation in legal proceedings

Many disabled people experience particular disadvantage in relation to both the civil and criminal justice systems. Prosecution authorities may determine that people with learning disabilities who are victims of crime may not be competent or reliable witnesses.⁴³ The conviction rate for cases where the victim has a mental health condition or learning disability is often lower than for cases involving those without.⁴⁴

UKIM recommends that the CRPD Committee ask the UK:

23. To explain the measures taken to improve conviction rates where the victims of crime have mental health conditions or learning disabilities and provide evidence of the effectiveness of such measures.
24. To explain the measures taken to support 'vulnerable witnesses' with mental health conditions and learning disabilities and provide evidence of the effectiveness of such measures.

Legal aid and legal advice provision

Reforms to legal aid in England and Wales may have a particularly far reaching impact on the realisation of Article 13. The Legal Aid, Sentencing and Punishment of Offenders Act (LASPO) 2012 removed many areas of law from the scope of civil legal aid including employment cases (apart from discrimination) and most housing, debt, and welfare benefits cases. An Inquiry into the proposed reforms found

evidence to suggest that disabled people rely more on legal aid services and ‘there is the potential for them to be disproportionately hit by the changes’.⁴⁵

Under LASPO Act powers, a telephone advice gateway has been introduced as a mandatory first point of access for cases involving discrimination, debt and special educational needs. Widespread concerns have been raised about potential risks to access to justice, including by the EHRC’s Human Rights Review.⁴⁶ The UK Government has acknowledged that people with mental health or cognitive difficulties could find it harder to manage their case or deal with any emotional distress arising from it.⁴⁷ Although the UK Government has given assurances that the telephone gateway service will make adjustments for disabled people, anecdotal evidence suggests that certain clients are already experiencing difficulty accessing the service.⁴⁸

Concurrently with reforms to legal aid, there has been a substantial reduction in state support for local and national not-for-profit advice agencies relied on by many disabled people when seeking advice about their rights or help to challenge decisions.⁴⁹

UKIM recommends that the CRPD Committee ask the UK:

25. To explain how the impact on disabled people of the reform to legal aid and reduction in grants to advice agencies in England and Wales is being monitored and the steps being taken to address any negative effect.

Redress against discrimination in employment

The introduction of fees⁵⁰ for employment tribunal (ET) discrimination cases may be a barrier for disabled people who wish to exercise their employment rights, despite provision for fee remission for people on certain benefits or subject to a means test. Early evidence indicates a substantial drop in ET applications; a comparison of claims issued in September 2012 (before the fees were introduced) with those issued in September 2013 shows a drop of 56 per cent.⁵¹

UKIM recommends that the CRPD Committee ask the UK:

26. To provide evidence of the effect on disabled people of the introduction of fees for employment tribunal cases and to detail the steps being taken to ameliorate any negative effect.

Article 14: Liberty and security of person

Until recently the established practice in psychiatric hospitals and other care settings across the UK has been to assume that patients who are deemed incapable of consent but compliant with their admission and/or treatment could be regarded as voluntary patients.⁵² The European Court of Human Rights found in 2004 that this practice was not compliant with the ECHR, right to liberty and security of the person.

In England and Wales to attempt to address this practice the Deprivation of Liberty Safeguards (DOLS)⁵³ were introduced to protect people in hospitals or care homes who lack capacity to consent to their care or treatment.⁵⁴ Legislative developments to address this practice have not yet been taken in Scotland (although a review is presently underway) or in Northern Ireland.⁵⁵ Furthermore concerns have been raised regarding the effectiveness of DOLS in England and Wales.⁵⁶

UKIM recommends that the CRPD Committee ask the UK:

27. To detail the measures that have, or will be, put in place in each nation to ensure that those who are unable to consent to their placement or treatment in psychiatric hospitals and other care settings are protected in law and to explain the monitoring and review mechanisms that have been put in place.

Article 15: Freedom from torture or cruel, inhuman or degrading treatment or punishment

Treatment of disabled people in health and social care settings

A number of incidents have occurred in which disabled and older people in health and social care settings have been subjected to inhuman and degrading treatment⁵⁷ including abuse as a result of application of physical and chemical restraints.⁵⁸

In England and Wales and Scotland there are proposals to introduce a new criminal offence for the ill-treatment or willful neglect of adults in health and social care settings. There are no comparable proposals for Northern Ireland. Scotland and Northern Ireland lack a statutory definition of restraint.⁵⁹

UKIM recommends that the CRPD Committee ask the UK:

28. To set out the steps taken to safeguard disabled people in health and social care settings, to monitor the effectiveness of such measures and to explain the progress that has been made since the submission of the Initial Report.
29. To detail the measures taken to limit the use of physical and chemical restraint and to evidence the effectiveness of such measures.

**Article 16: Freedom from exploitation, violence and abuse *and*
Article 17: Protecting the integrity of the person**

Disability-related harassment and hate crime

Throughout the UK there is significant under-reporting of disability-related harassment and hate crime.⁶⁰ Whilst research across the UK suggests that disabled people routinely face harassment, the number of disabled people reporting hate crime incidents to the police is disproportionately low.⁶¹

The EHRC inquiry into disability-related harassment, carried out between 2009 and 2011, found that harassment was a commonplace experience for disabled people and that a culture of disbelief and systemic institutional failures were preventing it from being tackled effectively.⁶²

While progress has been made in relation to the recording of disability hate crime, prosecution and conviction remain unacceptably low. A joint review of disability hate crime in England and Wales by the inspectorates of police, Crown Prosecution Service (CPS) and probation found that, 'in many ways it is the hate crime that has been left behind'⁶³. It found the practice of both the police and the CPS to be lacking in relation to obtaining the evidence required to regard the defendant's actions as an aggravating feature. In Scotland, while the approach of police and prosecutors has improved, the lack of attention to disability hate crime by law enforcement agencies in the past has been found to continue to affect disabled people's willingness to report these crimes.⁶⁴

UKIM recommends that the CRPD Committee ask the UK:

30. To provide an evidenced update on the progress that has been made in each nation since the submission of the Initial Report to improve the reporting and prosecution of disability-related hate crime.

Disability harassment in schools

The EHRC disability harassment inquiry reported that whilst over four-fifths of disabled pupils report being bullied compared to under two-thirds of non-disabled pupils, bullying on the basis of disability was often not acknowledged as an issue by schools or local authorities.⁶⁵

UKIM recommends that the CRPD Committee ask the UK:

31. To detail the initiatives taken to address disability-related harassment and bullying in schools and to evidence the progress that is being made in addressing this issue.

Article 19: Living independently and being included in the community

Disabled people and their organisations have told the UKIM during UNCRPD involvement and engagement events that they consider the effective implementation of Article 19 as intrinsic to and a pre-requisite for the realisation of other rights under the Convention. The importance of Article 19 was also noted by the UK Parliamentary Joint Committee on Human Rights (JCHR) as part of its inquiry into the implementation of Article 19.⁶⁶

Cumulative impact

In its inquiry the JCHR concluded that, in their view, welfare reform, changes to eligibility criteria for adult social care and the closure of the Independent Living Fund (ILF) 'risk interacting in a particularly harmful way for disabled people. Some disabled people risk losing Disability Living Allowance (DLA) and local authority

support, while not getting support from the ILF, all of which may force them to return to residential care’.

UKIM recommends that the CRPD Committee ask the UK:

32. To explain what steps it has taken to assess the overall, cumulative impact of welfare reform, changes to social care funding and eligibility criteria and the closure of the ILF on disabled people.

Adult social care provision

Adult social care enables many disabled people to live independently. Whilst different legislative and policy measures are in place for the provision of social care in each nation, local authorities in GB and Health and Social Care Trusts in Northern Ireland have experienced reductions in their overall budgets.⁶⁷ This has resulted in savings having to be made in social care budgets, which have been achieved, in part, by reducing levels of care and support to many disabled people.⁶⁸

UKIM recommends that the CRPD Committee ask the UK:

33. To explain what measures have been taken, and what impact they have had, to ensure that the reduction in central government funding to local authorities and health and social care trusts in each nation does not have a negative impact on the realisation of Article 19.

Eligibility criteria

There is concern that regulations under the Care Act 2014 will cause most local authorities to reprioritise their resources so that they target only disabled people who have substantial or critical support needs. Some individuals and groups, including older disabled people, people with mild to moderate learning disabilities and people with mental health impairments, are less likely to fall into the substantial and critical level despite having significant support needs. The concern is that they will not receive support with everyday tasks, potentially resulting in increasing isolation and declining physical and mental health.⁶⁹

UKIM recommends that the CRPD Committee ask the UK:

34. To provide information about the steps taken to ensure local authorities understand the Convention rights when setting eligibility criteria for the provision of social care.

Charging for social care

Local authorities across GB can decide whether to charge for social care provision. In recent years the number of local authorities that have increased care charges has risen⁷⁰ and changes have been implemented that reduce subsidies that protect users from being charged the full cost of their care and support.⁷¹

UKIM recommends that the CRPD Committee ask the UK:

35. To provide information on the numbers of local authorities that charge for social care and how charging policies are monitored to identify the impact on disabled people.

'Portability' of care packages

If an individual who already has a care package moves to a new local authority area there is no guarantee that their care package will be preserved. In most cases, they have to undergo a new assessment and due to different local authority policies this may mean that care packages are not preserved. In England, the Care Act 2014 provides that for an interim period local authorities must continue to provide the same level of support as under the previously assessed care package. However, even with these changes the new local authority can re-assess, in time, and the individual may get less support.

UKIM recommends that the CRPD Committee ask the UK:

36. To demonstrate, with examples, the extent to which measures taken in each nation ensure the portability of social care packages.

People with learning disabilities in residential care settings

In England and Wales, and Northern Ireland there are many people with learning disabilities inappropriately living in assessment and treatment units⁷² due to a lack of suitable provision in local communities.

UKIM recommends that the CRPD Committee ask the UK:

37. What steps are being taken to move people with learning disabilities who are living inappropriately in assessment and treatment units to more suitable accommodation where they are able to live and participate inclusively in their local communities?

Closure of Independent Living Fund

The Independent Living Fund is due to be closed in 2015. In England, Wales and Northern Ireland, support previously provided by the fund, for example, funding to employ a personal assistant or to pay an agency to provide personal care, will be devolved from the UK Government to the devolved governments and local authorities. Under this new arrangement, the budget allocation will not be ringfenced as it is now. Therefore, there is no guarantee that the funding will not be absorbed into the overall social care budget. In Wales, an agreement has been made between the Welsh Government and local government to continue joint support for recipients of the Independent Living Fund in the run up to the closure of the scheme in 2015. The situation is different in Scotland where the Scottish Government announced that it will administer a Scottish Independent Living Fund.

UKIM recommends that the CRPD Committee ask the UK:

38. What measures have been taken, and what impact they have had, to ensure that the closure of the Independent Living Fund (with the exception of Scotland) does not have a negative impact on the realisation of Article 19?

Article 23: Respect for home and the family

Support for disabled parents

Disabled people in the UK face a number of challenges when planning and starting a family. A UK study on physically disabled parents' experiences of maternity services found that they often face negative attitudes towards their pregnancy by maternity professionals and challenges getting appropriate information and support to enable them to plan and prepare for birth.⁷³ Similar experiences were reported during UNCRPD participation events in Scotland⁷⁴ and concerns have been raised regarding access to information relating to maternity services in Northern Ireland.⁷⁵

UKIM recommends that the CRPD Committee ask the UK:

39. To set out the initiatives undertaken in each nation to promote better understanding of the needs of disabled parents and the effect these initiatives have had, and explain what information is provided to disabled parents about pregnancy, birth and caring for children.

Article 24: Education

Educational outcomes

Disabled people are more likely to have poorer educational outcomes at all stages of education, but particularly during their school years.⁷⁶

Additional provision is made for many, but not all, disabled pupils through the Special Educational Needs (SEN) system in England, Wales and Northern Ireland and Additional Support Needs (ASN) system in Scotland. Substantial reforms of the SEN system are underway in England, Wales and Northern Ireland. In England disability organisations have raised concerns that the changes are being implemented too quickly⁷⁷. In Northern Ireland there is concern the reforms will dilute existing entitlement and lead to inconsistencies in provision depending on whether pupils are educated in special or mainstream schools.⁷⁸

UKIM recommends that the CRPD Committee ask the UK:

40. To explain how reform of the Special Educational Needs (SEN) systems in England, Wales and Northern Ireland, and the current Additional Support Needs (ASN) system in Scotland, will improve educational outcomes for and participation of disabled children and young people.

Inclusive education (this issue is also relevant to Article 46)

When the UK government issued the interpretative declaration and reservation to Article 24 it set out its commitment to developing an inclusive education system. However, from the information in the Initial Report it appears that there may be an acceptance of a fixed and permanent role for separate special schools. For instance, there is no explanation of how the role of special schools is diminishing over time as mainstream schools become progressively more inclusive, including through the increased co-location of specialist and mainstream provision.

UKIM recommends that the CRPD Committee ask the UK:

41. To confirm the position in relation to inclusive education and explain how they will ensure the education system at all levels is inclusive and geared towards supporting disabled people to achieve their full potential and participate equally in society.

Exclusions

Research into school exclusions across the UK has identified that disabled children and those with additional needs are more likely to be excluded from school, and this includes unlawful exclusions.⁷⁹

UKIM recommends that the CRPD Committee ask the UK:

42. To provide information about the measures taken to identify and reduce both unlawful and lawful exclusion of disabled pupils across the UK and to explain how progress is monitored.

Transitions from school

Research from Northern Ireland and Scotland that shows the process of transition for disabled young adults from school to further education, training or employment and from child to adult health and social care services has shown this can be highly unsatisfactory.⁸⁰ In England, the introduction of Educational and Health Care Plans for people with learning disabilities potentially to the age of 25 may improve the position for those who require high levels of support.⁸¹

UKIM recommends that the CRPD Committee ask the UK:

43. To explain the steps taken to improve the process of transition for disabled children and young people from children's education services to further education and employment services in each nation, the effect these are having and how progress is monitored?

Article 25: Right to the highest attainable standard of physical and mental health

Health inequalities

Disabled people, particularly those with a learning disability or mental health condition, are more likely to have significant health risks, to experience health inequalities and major health problems and are likely to die younger than other people.⁸² They are also less likely to receive health checks, screening tests and treatment. Across the UK, there is evidence of low levels of disability awareness among healthcare staff; failure to investigate or treat physical ill health because it is viewed as part of a mental health condition or learning disability⁸³ and a lack of user friendly written information in accessible formats.⁸⁴

UKIM recommends that the CRPD Committee ask the UK:

44. What measures have been put in place to address the health inequalities faced by people with learning disabilities and mental health conditions and to provide evidence of the progress that has been made to ensure they receive appropriate and tailored health care services.

Provision of advocacy services

In 2009, the Parliamentary and Health Service Ombudsman and the Local Government Ombudsman for England and Wales carried out investigations into the deaths of six people with learning disabilities.⁸⁵

Their report found significant failures in service provision across both health and social care, despite extensive policy and guidance being in place. It noted that these cases were likely to be indicative of a wider problem. The report concluded that independent advocates could have provided an additional safeguard of the rights of those disabled people who were in an especially vulnerable situation.

UKIM recommends that the CRPD Committee ask the UK:

45. To set out the measures taken to ensure awareness and availability of advocacy services for people with learning disabilities and people with mental health conditions and to provide evidence of the effectiveness of those measures.

Mental health safeguards

In England and Scotland concerns have been raised about the effectiveness in practice of mental health legislation.

In Scotland, some of the innovations of the Mental Health (Care and Treatment) (Scotland) Act 2003 have not been effective. A legislative review conducted by the Scottish Government concluded that, for example, Advance Statements (whereby a patient can set out the way they would like to be treated in the event of becoming mentally unwell) are not widely known about or used and need further promotion.⁸⁶ The Mental Welfare Commission for Scotland has found that there continues to be wide variation in the understanding and interpretation of the sections of the 2003 Act that allow restrictions to be placed on people who are detained. The Commission also found restrictions on individuals not subject to compulsion under the 2003 Act which were not legally authorised and that there was a lack of knowledge among staff and individuals about the right of appeal and access to mental health advocacy.⁸⁷ In England and Wales many of the vital safeguards in the legislation have been found not to be working effectively.⁸⁸ Issues of concern include difficulties in accessing treatment without being subject to compulsory detention, which is compounded by the unavailability of hospital beds.

In Northern Ireland, a draft Bill is under construction to govern both mental health and mental capacity law.

UKIM recommends that the CRPD Committee ask the UK:

46. To provide evidence of what progress has been made to ensure the safeguards provided for in mental health legislation operate effectively.

Adequacy of mental health care

Research in England and Scotland has found inconsistencies in mental health care and treatment. Evidence from Scotland has found a ‘range of unmet needs’ in Intensive Psychiatric Care Units. These include a lack of activities, rehabilitation or a therapeutic environment; a ‘one size fits all’ approach to risk management and a lack of opportunities for meaningful involvement in the care process.⁸⁹ In England, some acute mental health units have been described as frightening, un-therapeutic and failing to demonstrate compassion, where pressure to cut acute services in the interest of finding short-term savings may be undermining good services and exacerbating difficulties.⁹⁰

UKIM recommends that the CRPD Committee ask the UK:

47. To provide information about the steps being taken to ensure greater respect for the human rights of disabled people in mental health settings and to evidence the effectiveness of these steps.

Mental health strategy for Northern Ireland

Northern Ireland has a disproportionately high rate of mental illness with 25 per cent higher overall prevalence of mental health conditions than in England.⁹¹ Among the factors contributing to this high level is the history of violent conflict.⁹² A previous strategy for addressing mental health issues in Northern Ireland ended in 2008 and none has been put in place since then.

UKIM recommends that the CRPD Committee ask the UK:

48. To confirm when a new Mental Health Strategy for Northern Ireland will be adopted.

Article 27: Work and employment

Employment gap

There is a persistent gap in the employment rates of disabled people compared to non-disabled people. Only half of disabled people in Britain are in work compared to four-fifths of non-disabled people.⁹³ In Northern Ireland, the employment rate for non-disabled people is nearly twice that of disabled people.⁹⁴

Pay gap

The pay gap (the difference in percentage terms between the median earnings of disabled people and non-disabled people) between disabled and non-disabled men is 11 per cent, while the pay gap between disabled women and non-disabled men is double this figure at 22 per cent.⁹⁵ This is in the context of very low employment rates for disabled adults (highlighted above).

UKIM recommends that the CRPD Committee ask the UK:

49. To provide an update on progress made to address the employment and pay gaps between disabled and non-disabled workers

Attitudinal barriers

Research has found that many employers have a negative attitude towards employing disabled people. For example, a research report from the Department for Work and Pensions found that only 37 per cent of employers would consider employing someone with a mental health condition.⁹⁶

Employers' concerns about employing disabled people include perceived risks to productivity; concerns about the implications (financial and otherwise) of making workplace adjustments; confusion about legislation and required practices, and negative perceptions of legislation.⁹⁷

UKIM recommends that the CRPD Committee ask the UK:

50. To explain how the actions outlined in the Initial Report have created a positive approach by employers to disabled people; whether they are having the effect of addressing employers' negative perceptions of disabled people as employees and, if so, how these initiatives will be extended.

Welfare to Work measures

Concerns have been raised that service providers contracted by the UK Government to deliver the Work Programme in Britain were offering job placements to disabled people with lower support needs, but giving limited consideration to disabled people with more complex support requirements.

UKIM recommends that the CRPD Committee ask the UK:

51. To explain how service providers delivering the Work Programme are ensuring that disabled people with complex support requirements have equal access to work and employment opportunities.

Article 28: Adequate standard of living and social protection

Twice as many disabled adults live in persistent poverty compared with non-disabled adults.⁹⁸

Since the UK Initial Report a range of measures, including a cap on welfare spending, have been introduced in subsequent Budget and Spending Reviews to reduce the fiscal deficit.

Reform of the welfare benefit system has been implemented at the same time as reductions in local government budgets,⁹⁹ changes to how health and social care are funded and provided and changes to the support provided to assist disabled people getting into and getting on in the workplace.

Research indicates that disabled people are disproportionately affected in terms of reductions in income and services, by the welfare reform programme.¹⁰⁰ The European Committee of Social Rights has expressed concern that these reforms will

lead to an increase in poverty amongst disabled people¹⁰¹ when already, twice as many disabled adults live in persistent poverty compared with non-disabled adults.¹⁰²

There is a range of research highlighting the disproportionate impact of the changes to welfare benefits on disabled people across the UK¹⁰³ and that this could be worse in Northern Ireland.¹⁰⁴

Transition from Disability Living Allowance (DLA) to Personal Independence Payments (PIP)

The proposed transition from the DLA to PIP may result in a loss of income for many disabled people. It is estimated that in Britain by May 2018, there will have been a 28 per cent reduction in the number of individuals in receipt of PIP compared with those who would have received DLA.¹⁰⁵ In Northern Ireland the estimate is that over half will either lose their entitlement altogether or have their benefit decreased.¹⁰⁶ A report by the House of Commons Work and Pensions Committee found that decisions on eligibility for PIP can take up to 6 months or more. This has resulted in financial difficulties for some disabled people whilst awaiting the outcome of their PIP assessment.¹⁰⁷

Housing benefit

Changes to housing benefit include reducing the amount of housing benefit paid to claimants if they are living in social housing and are deemed to have surplus bedrooms.¹⁰⁸ This under occupancy deduction may particularly affect disabled people who require a second bedroom for a personal assistant or carer to stay overnight or to store equipment. The under occupancy deduction will affect 23 per cent of working age social housing benefit claimants in Britain and 53 per cent in Northern Ireland.¹⁰⁹ Two-thirds of housing benefit claimants affected by the under occupancy deduction are disabled.¹¹⁰ Although Government has stated that Discretionary Housing Payments (DHP) can be awarded to people facing hardship in paying their rent, different local authorities administering the fund apply different eligibility rules whilst some have capped the total amount available for DHP. The Scottish Government, on the other hand, has successfully appealed to the UK Government to allow it to remove the cap on the DHP fund in Scotland. In any event, the DHP is regarded as a transitional measure.¹¹¹

Work Capability Assessment

There is some evidence that disabled people are being assessed wrongly as fit for work and thus losing entitlement to social security benefits as a result.¹¹² At the same time the Government's welfare to work measure, intended to get long-term unemployed people, including disabled people, into work is not delivering to target.¹¹³

Cumulative impact assessment

In addition to the need to take account of the impact on disabled people of each aspect of welfare reform, a number of organisations have called for a cumulative impact assessment by the UK Government to assess the combined impact on disabled people.¹¹⁴

The UK Government has reasoned that modelling difficulties prevent it from undertaking an assessment of cumulative impact which would be sufficiently robust. However, there is a substantial body of opinion that thinks that it can be done.

The Social Security Advisory Committee advocates that maximum efforts should be made on an ongoing basis to evaluate the overall impact of the reform programme and proposes options for the Government to build on analyses which have already been undertaken.¹¹⁵

The Equality and Human Rights Commission has also published research that shows that, with some caveats, cumulative impact assessment is both feasible and practicable. The study also provided a preliminary assessment of the cumulative impact of tax, spending and benefit changes in the 2010-15 period on equality groups. Amongst its findings, the research shows that the impact of tax and welfare reforms are more negative for families containing at least one disabled person, particularly a disabled child, and that these negative impacts are particularly strong for low income families. This is not surprising, given the significant cuts to working-age welfare, and the high proportion of working age welfare spent on disabled people, particularly those on low incomes.¹¹⁶

UKIM recommends that the CRPD Committee ask the UK:

52. To provide information on the steps taken to identify and address the impact of the various reforms to social security on disabled people's human rights and the realisation of Article 28.

Article 29: Participation in political and public life

Accessibility in the voting system

At the 2010 UK General Election, 67 per cent of polling stations had one or more significant access barrier. This is only a 1 per cent improvement from the last General Election and 2 per cent from the General Election of 2001.¹¹⁷

Despite the widespread assumption that postal voting is the most accessible way of voting for disabled voters, almost half of disabled voters who used the postal voting system reported one or more significant access problems.¹¹⁸

UKIM recommends that the CRPD Committee ask the UK:

53. To explain the measures taken to ensure that voting ballots, postal votes and information explaining how to cast your vote are available in a range of accessible formats.
54. To explain how new technologies are being used to overcome the barriers that prevent disabled people from voting.
55. To explain how it ensures that polling stations are accessible.

Participation in public life

Disabled people continue to be significantly under-represented on the boards of public bodies.¹¹⁹

UKIM recommends that the CRPD Committee ask the UK:

56. To provide information about the steps taken in each nation to improve the representation of disabled people on boards of public bodies and how progress is being monitored.

Article 30: Participation in cultural life, recreation, leisure and sport

Sport

Despite the 4.2 per cent increase in participation by people with a long-standing illness or disability reported after the Olympic and Paralympic Games,¹²⁰ disabled

people's participation in sport continues to be significantly lower than non-disabled people.¹²¹

There is no commentary within the UK Initial Report about the participation of disabled people in sport in Northern Ireland.

UKIM recommends that the CRPD Committee ask the UK:

57. To provide up-to-date information about the number of disabled people participating in sport and physical activity and the progress made in all nations since the Initial Report.

Culture

Disabled people are significantly less likely to participate in cultural activities than non-disabled people¹²² and continue to face barriers around lack of accessible facilities, services and transport preventing equal participation in cultural life.¹²³

UKIM recommends that the CRPD Committee ask the UK:

58. To explain how the initiatives set out in the Initial Report have increased disabled people's access to and participation in cultural life.

Article 31: Statistics and data collection

Data collection in the devolved countries and developing disability indicators

The Initial Report does not explain the measures taken by the devolved governments in Scotland, Wales and Northern Ireland under this article. Nor does it explain how the disability equality indicators will be further developed in accordance with the CRPD.

UKIM recommends that the CRPD Committee ask the UK:

- 59. To provide information on the statistics and research data collected by the devolved governments to meet the requirements under Article 31.
- 60. To explain how the disability equality indicators have been developed in accordance with the CRPD.

Despite improvements in the collection of disability statistics, significant gaps still remain in many important areas. For example, statistics are collected about pupils with special educational needs (SEN)/additional support needs (ASN). However, not all disabled pupils have SEN/ASN and so the data collected is not complete. In England and Scotland, statistics on the number of disabled children who are looked after by the state are not routinely collected. Independent surveys carried out in prisons have identified significant under-reporting of the numbers of disabled prisoners.

There is limited availability, in social surveys, of disaggregated disability data including disaggregation by other equality characteristics, such as sex, age and ethnicity. For example, there is limited data about the circumstances of disabled women and girls in the UK.

UKIM recommends that the CRPD Committee ask the UK:

61. What steps it has taken to identify and fill gaps in the collection of disability statistics, including measures to ensure this data is disaggregated by equality characteristics.

Article 33: National implementation and monitoring

Strategic coordination and CRPD Action Plan

The jurisdictional coverage of the UK Government's primary disability strategy, *Fulfilling Potential – Making it Happen*, is inconsistent. *Fulfilling Potential* focuses primarily on England and Wales. The Action Plan states that 'some [policies are] applicable across the whole of the UK and many to England only. The devolved administrations have their own policies with regard to devolved matters'.¹²⁴ UKIM, and many DPOs, have been calling for national and UK-wide action plans which are streamlined and coordinated to bring together action by UK and devolved Governments.

UKIM recommends that the CRPD Committee ask the UK:

62. To explain how implementation of the Convention is coordinated across all the nations and whether integrated action plans will be developed, with clear actions and time-bound indicators at the UK-wide and national level.

There is little detail in *Fulfilling Potential* about how the Office for Disability Issues (ODI) coordinates implementation of the Convention across the Westminster Government departments and what the respective roles, accountability and make-up are of the ODI; Fulfilling Potential Strategy Group (which 'oversees' the action plan); and the Social Justice Cabinet Committee, which 'reviews' the work set out in the Action Plan.

UKIM recommends that the CRPD Committee ask the UK:

63. How does the UK ensure coordination on implementation across Government departments, in each jurisdiction?

The UK Independent Mechanism (UKIM)

There is no framework beyond UKIM to link key stakeholders, such as the regulatory bodies for key public services, to better promote, protect and monitor CRPD implementation.

UKIM recommends that the CRPD Committee ask the UK:

64. How does the UK intend to develop the framework for promotion, protection and monitoring implementation to involve and coordinate the work of key stakeholders?

Involvement of DPOs

UKIM has engaged in work across the nations to actively involve DPOs.¹²⁵ However, we believe that the primary responsibility for involvement rests with the UK as the State Party.

UKIM recommends that the CRPD Committee ask the UK:

65. What steps it has taken – including details of what practical and financial resources it has provided – to ensure that disabled people and their representative organisations are involved and actively participate in the reporting process and how this is coordinated across the UK.

Article 46: Reservations

UKIM does not believe reservations or interpretative declarations are appropriate in ratifying the Convention for the reasons set out below, and we continue to call for the withdrawal of the three remaining reservations and the interpretative declaration.

Reservation concerning Article 18 – Liberty of Movement and Nationality

Following the Home Office review of the reservation, the Minister announced the reservation was necessary ‘to retain the right to apply immigration rules, to avoid creating an unnecessary new avenue to challenge immigration decisions due to the optional protocol, and to preserve the right to safeguard the public purse from excessive demands which may be placed on it’.¹²⁶

UKIM’s view is that the reservation as currently drafted is so broad and general as to be incompatible with the object and purpose of the Convention and as such is in breach of Article 46 of the CRPD and Article 19 of the UN Vienna Convention on the Law of Treaties concerning the permissibility of reservations.

The reservation is not compliant with the principle of non-discrimination set out in Article 5, which is fundamental to the UK Government's obligations under the Convention.

Reservation concerning Article 24 – Education

The realisation of Article 24 requires Governments to ensure the education system at all levels is inclusive and geared towards supporting disabled people to achieve their full potential and participate equally in society.

UKIM welcomes the commitment in the interpretative declaration to continue to develop an inclusive education system. However, we believe this commitment is contradicted by the UK’s maintaining both a declaration and a reservation in relation to Article 24. We believe this displays an unnecessary and disproportionate degree of caution concerning Article 24.

Reservation concerning Article 27 – Work and Employment

UKIM rejects the arguments made by the Ministry of Defence (MOD) for the continued blanket exemption of the armed forces from the Equality Act 2010 and the Disability Discrimination Act 1995 that continues to apply in Northern Ireland, which underlies its proposed reservation.

Contrary to the MOD's interpretation, if the exemption was not in place it would not be required to abandon objective and necessary job criteria, including those in relation to levels of physical and mental fitness. As such removing the exemption would not require the armed forces to recruit non-deployable people or people with limited deployability so creating a 'two tier system'. By way of illustration, the exemption which had applied to the police and fire services in the original DDA was lifted in 2005, with no negative impact upon the ability of both services to determine objectively who joins the services, or upon operational effectiveness.

UKIM recommends that the CRPD Committee ask the UK:

66. What steps it has taken to review, and details of any evidence relied on as the basis to retain the reservations and interpretative declaration.

Annex

List of questions UKIM recommends that the CRPD Committee ask the UK:

1. To explain how the UK and devolved governments take into account the UNCRPD in the development and implementation of all new and existing policies, programmes, and legislation and how this action is co-ordinated at national and UK-wide level.
2. Do the UK and devolved governments intend to implement the JCHR's recommendation and, if so, when?
3. To describe the measures in place to ensure that public authorities, including councils, are aware of and act in conformity with the Convention and the outcomes of those measures.
4. To detail, with examples, how the UK and devolved governments ensure the active involvement of disabled people and children in the development and implementation of legislation and policies and the effect of this involvement.
5. What measures the Northern Ireland Executive has taken to ensure that the legislative protections for disabled people in Britain are available in Northern Ireland.
6. What steps has the UK taken to monitor and remedy the different treatment of disabled children seeking redress against discrimination or harassment in schools with regard to access to compensation and injunctive relief?
7. To outline the availability of specialist services that are accessible to disabled women who experience sexual or domestic abuse. Where these services are provided locally, how do the national governments meet their responsibilities by collating information on service availability and adequacy?
8. To evidence how local and national domestic violence strategies, policies and programmes identify the needs of disabled women and ensure disabled women are able to use domestic abuse services.
9. To detail the methods by which the views of disabled children and young people are respected fully and taken into account in the development of UK and

devolved government strategies, policies and programmes on disability and children and to evidence the effect this has had.

10. To explain the initiatives that have been taken to reduce the number of disabled children living in poverty and the effect these initiatives have had.
11. To evidence how the particular needs of looked after disabled children are being addressed, the measures that have been taken to ensure they receive the support and care needed and the outcomes achieved by those measures.
12. To detail the steps taken and outcomes achieved to initiate and encourage public portrayals of disabled people, including through government communications that are consistent with the purpose of the Convention.
13. To provide current data on the extent to which accessible housing is available across the UK and information on how the UK will ensure that new and existing housing is accessible and can be easily adapted when people become disabled.
14. To explain the steps taken to improve access to the built environment including ensuring that public and private organisations comply with accessibility standards and to detail the effectiveness of these steps.
15. To explain the steps taken to ensure that street designs are accessible to and do not put at risk people with visual and other impairments and to detail the effectiveness of these steps.
16. To provide evidence of the effectiveness of legislation and public initiatives aimed at improving transport accessibility (including bus, rail, taxi and transport by air and sea); and to explain how monitoring is undertaken to ensure compliance with and improvements to meet its obligations under the Convention.
17. To provide an update on the steps taken to ensure the provision of information in accessible and appropriate formats, including Easy Read, and how the effectiveness of these measures is monitored.
18. To provide information on the availability of sign language interpreters, lip speakers and palantypists and the steps being taken to increase availability and ensure disabled people can access appropriate communication support in a timely and cost-effective manner.
19. To explain how current suicide prevention strategies take account of the needs and circumstances of disabled people, in particular those with mental health problems, and to evidence the effectiveness of these steps in reducing suicide rates.

20. To explain the steps taken to ensure that the UK carries out full and independent investigations into deaths in mental health care settings and to evidence the effectiveness of these steps.
21. To explain how the effectiveness of the frameworks governing mental capacity in each nation is being monitored, what actions have been taken to improve the availability of support in decision-making and the outcome of such action.
22. To explain how the effectiveness of the safeguards, which are in place to protect disabled people from abuse, in particular financial abuse, are monitored, to detail the steps taken to eradicate such abuse and to evidence the effectiveness of such steps.
23. To explain the measures taken to improve conviction rates where the victims of crime have mental health conditions or learning disabilities and provide evidence of the effectiveness of such measures.
24. To explain the measures taken to support 'vulnerable witnesses' with mental health conditions and learning disabilities and provide evidence of the effectiveness of such measures.
25. To explain how the impact on disabled people of the reform to legal aid and reduction in grants to advice agencies in England and Wales is being monitored and the steps being taken to address any negative effect.
26. To provide evidence of the effect on disabled people of the introduction of fees for employment tribunal cases and to detail the steps being taken to ameliorate any negative effect.
27. To detail the measures that have, or will be, put in place in each nation to ensure that those who are unable to consent to their placement or treatment in psychiatric hospitals and other care settings are protected in law and to explain the monitoring and review mechanisms that have been put in place.
28. To set out the steps taken to safeguard disabled people in health and social care settings, to monitor the effectiveness of such measures and to explain the progress that has been made since the submission of the Initial Report.
29. To detail the measures taken to limit the use of physical and chemical restraint and to evidence the effectiveness of such measures.
30. To provide an evidenced update on the progress that has been made in each nation since the submission of the Initial Report to improve the reporting and prosecution of disability-related hate crime.

31. To detail the initiatives taken to address disability-related harassment and bullying in schools and to evidence the progress that is being made in addressing this issue.
32. To explain what steps it has taken to assess the overall, cumulative impact of welfare reform, changes to social care funding and eligibility criteria and the closure of the ILF on disabled people.
33. To explain what measures have been taken, and what impact they have had, to ensure that the reduction in central government funding to local authorities and health and social care trusts in each nation does not have a negative impact on the realisation of Article 19.
34. To provide information about the steps taken to ensure local authorities understand the Convention rights when setting eligibility criteria for the provision of social care.
35. To provide information on the numbers of local authorities that charge for social care and how charging policies are monitored to identify the impact on disabled people.
36. To demonstrate, with examples, the extent to which measures taken in each nation ensure the portability of social care packages.
37. What steps are being taken to move people with learning disabilities who are living inappropriately in assessment and treatment units to more suitable accommodation where they are able to live and participate inclusively in their local communities?
38. What measures have been taken, and what impact they have had, to ensure that the closure of the Independent Living Fund (with the exception of Scotland) does not have a negative impact on the realisation of Article 19?
39. To set out the initiatives undertaken in each nation to promote better understanding of the needs of disabled parents and the effect these initiatives have had, and explain what information is provided to disabled parents about pregnancy, birth and caring for children.
40. To explain how reform of the Special Educational Needs (SEN) systems in England, Wales and Northern Ireland, and the current Additional Support Needs (ASN) system in Scotland, will improve educational outcomes for and participation of disabled children and young people.
41. To confirm the position in relation to inclusive education and explain how they will ensure the education system at all levels is inclusive and geared towards

supporting disabled people to achieve their full potential and participate equally in society.

42. To provide information about the measures taken to identify and reduce both unlawful and lawful exclusion of disabled pupils across the UK and to explain how progress is monitored.
43. To explain the steps taken to improve the process of transition for disabled children and young people from children's education services to further education and employment services in each nation, the effect these are having and how progress is monitored?
44. What measures have been put in place to address the health inequalities faced by people with learning disabilities and mental health conditions and to provide evidence of the progress that has been made to ensure they receive appropriate and tailored health care services.
45. To set out the measures taken to ensure awareness and availability of advocacy services for people with learning disabilities and people with mental health conditions and to provide evidence of the effectiveness of those measures.
46. To provide evidence of what progress has been made to ensure the safeguards provided for in mental health legislation operate effectively.
47. To provide information about the steps being taken to ensure greater respect for the human rights of disabled people in mental health settings and to evidence the effectiveness of these steps.

UKIM recommends that the CRPD Committee ask the Northern Ireland Executive:

48. To confirm when a new Mental Health Strategy for Northern Ireland will be adopted.

UKIM recommends that the CRPD Committee ask the UK:

49. To provide an update on progress made to address the employment and pay gaps between disabled and non-disabled workers
50. To explain how the actions outlined in the Initial Report have created a positive approach by employers to disabled people; whether they are having the effect of addressing employers' negative perceptions of disabled people as employees and, if so, how these initiatives will be extended.

51. To explain how service providers delivering the Work Programme are ensuring that disabled people with complex support requirements have equal access to work and employment opportunities.
52. To provide information on the steps taken to identify and address the impact of the various reforms to social security on disabled people's human rights and the realisation of Article 28.
53. To explain the measures taken to ensure that voting ballots, postal votes and information explaining how to cast your vote are available in a range of accessible formats.
54. To explain how new technologies are being used to overcome the barriers that prevent disabled people from voting.
55. To explain how it ensures that polling stations are accessible.
56. To provide information about the steps taken in each nation to improve the representation of disabled people on boards of public bodies and how progress is being monitored.
57. To provide up-to-date information about the number of disabled people participating in sport and physical activity and the progress made in all nations since the Initial Report.
58. To explain how the initiatives set out in the Initial Report have increased disabled people's access to and participation in cultural life.
59. To provide information on the statistics and research data collected by the devolved governments to meet the requirements under Article 31.
60. To explain how the disability equality indicators have been developed in accordance with the CRPD.
61. What steps it has taken to identify and fill gaps in the collection of disability statistics, including measures to ensure this data is disaggregated by equality characteristics.
62. To explain how implementation of the Convention is coordinated across all the nations and whether integrated action plans will be developed, with clear actions and time-bound indicators at the UK-wide and national level.
63. How does the UK ensure coordination on implementation across Government departments, in each jurisdiction?

64. How does the UK intend to develop the framework for promotion, protection and monitoring implementation to involve and coordinate the work of key stakeholders?
65. What steps it has taken – including details of what practical and financial resources it has provided – to ensure that disabled people and their representative organisations are involved and actively participate in the reporting process and how this is coordinated across the UK.
66. What steps it has taken to review, and details of any evidence relied on as the basis to retain the reservations and interpretative declaration.

Contacts

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