CALL FOR INFORMATION ON EXPERIENCES AND FOR EVIDENCE RELATED TO THE IMPLEMENTATION OF
THE UNITED NATIONS CONVENTION ON THE RIGHTS OF PERSONS WITH DISABILITIES
BY STATES PARTIES AND BY THE EUROPEAN UNION

ENUSP asks for your input for our Shadow report on the EU’s implementation of the CRPD, and we welcome your submission before 1 June 2015 at enusp.info@gmail.com

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol represent an important milestone in protecting and enforcing the rights of all persons with disabilities, including psychosocial disabilities. The Convention adopts a broad definition of persons with disabilities and reaffirms that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms. It clarifies and qualifies how all categories of rights apply to persons with disabilities and identifies areas where adaptations have to be made for persons with disabilities to effectively exercise their rights and areas where their rights have been violated, and where protection of rights must be reinforced.

This Convention is the first UN Treaty the European Union signed as a whole and has also been ratified individually by the majority of EU Member States. Full implementation of the CRPD will require great changes in legislation, policy and practice in all countries in the years to come.


The CRPD Committee is a body of 18 independent experts in charge of monitoring implementation of the Convention by State Parties who have ratified it. All State Parties have to submit regular reports to the Committee on how the rights enshrined in the Convention are being implemented in their country. The Committee examines each report and makes suggestions and general recommendations on the report. It forwards these recommendations, in the form of concluding observations, to the State Party concerned.

See for the CRPD Committee: http://www.ohchr.org/EN/HRBodies/CRPD/Pages/CRPDIndex.aspx

In 2015, the European Union (EU), which ratified the CRPD on 23 December 2010 is obliged to submit a report to the Committee on the Rights of Persons with Disabilities on how the EU has worked to enforce the rights enshrined in the Convention.

In connection with the submission of the report by the EU, ENUSP submitted suggested questions for the “List of Issues” the CRPD Committee will adopt and send to the EU. This List of Issues consists of questions and requests for more information, and the EU must respond in writing.

See ENUSP’s suggestions for the List of Issues here: http://www.enusp.org/

In addition, ENUSP representatives were able to attend a civil society briefing, a side event with WNUSP and other meetings at the time of the CRPD Committee Session No. 13 from 25 March - 17 April in Geneva devoted to determining this List of Issues for the EU report. They made several presentations and devoted time to lobbying and raising awareness among Committee members.
The recent side event and other meetings may be seen via webcasting provided by the International Disability Alliance here: [http://www.treatybodywebcast.org/](http://www.treatybodywebcast.org/)

ENUSP is now working on a “Shadow Report” (also called parallel report, alternative report, civil society report) for the end of June on how we see the EU’s performance under the CRPD. This Shadow Report will make reference to specific articles of the Convention addressed in the submission and also contain our recommendations.

On its side, the EU will submit its report and the CRPD Committee will engage in its review and produce its Concluding Observations during Session No. 14 from 17 August to 4 September 2015. Again, ENUSP hopes to participate in a civil society briefing on the EU’s performance during this session in Geneva and observe the Committee’s interactive dialogue with the State Party over two days.

**ENUSP is therefore interested in hearing about your experiences and receiving evidence you have from EU Member States** (such as data, statistics, testimony, cases at law, media articles, violations, extreme cases, etc.) that illustrate the EU’s performance in implementing the CRPD. We would also be happy to receive your recommendations on how to ensure compliance with the CRPD in your country.

This information will be very useful for our Shadow Report. Not all members of the CRPD Committee can even imagine what mental health care practices are like, so it is important to be very clear and provide evidence for statements made. It would be helpful if you can indicate priorities for CRPD implementation in your country or the EU as a whole.

Below are a list of questions and issues based on the articles of the Convention where EU Member States and other countries have demonstrated difficulties with implementation. They may be relevant in your country or bring to mind other issues and recommendations you would like to share with us. The attached list is meant to give you inspiration, and doesn’t need to be answered in full.

As a side note, compared to implementation by countries themselves as States Parties, “EU implementation” is limited to its competence, i.e., the spectrum of EU instruments, recommendations and programmes which can be found in more detail in ENUSP’s suggestions for the List of Issues specifically for the EU. We would be happy to receive your comments and suggestions on these issues too. But don’t worry if you are not an EU expert, that’s where ENUSP comes in.


Please feel free to give us your input on only one or just a few of the following questions based on the situation in your country. We greatly appreciate any and all contributions you can make to best reflect the current situation of persons with psychosocial disabilities in the EU in light of the articles of the CRPD below.

We look forward to receiving your submission in the next couple of weeks, before 1 June 2015 and preferably as soon as possible. Please send your input to enusp.info@gmail.com

Please indicate if you agree to have your information published on ENUSP’s website [www.enusp.org](http://www.enusp.org)
Inspirational list of questions on the implementation of the
United Nations Convention on the Rights of Persons with Disabilities (CRPD)

There are naturally a number of issues at stake for persons with disabilities. ENUSP has been focusing particularly on:

**Article 12 - Equal recognition before the law**
**Article 14 - Liberty and security of persons**
**Article 15 - Freedom from torture or cruel, inhuman or degrading treatment or punishment**
**Article 19 - Living independently and being included in the community**

Here is a list of questions we hope will inspire you to report back to us:

**Purpose and general obligations (arts. 1–4)**
Can persons with psychosocial disabilities enjoy their human rights?

Are persons with psychosocial disabilities treated as equal human beings, and are legislation, terminology and concepts respectful to persons with psychosocial disabilities?

Are persons with psychosocial disabilities meaningfully involved in the development and implementation of legislation and policies to implement the Convention? Do user-run advocacy organizations exist, are they supported, and can they participate meaningfully (have actual influence)?

**Equality and non-discrimination (art. 5)**
Do persons with psychosocial disabilities have equal opportunities and enjoy and exercise their human rights and fundamental freedoms on an equal basis with others?

Have there been cases brought by persons with psychosocial disabilities for discrimination in for example employment, education, in the provision of accommodation and in the provision of goods and services?

**Women with disabilities (art. 6)**
Are women with psychosocial disabilities receiving appropriate care (based on free and informed consent, according to the will and preferences of the person concerned, in any area of support, including parenting)? Is community based care for women with psychosocial disabilities available?

Is there gender inequality experienced in any areas of life by women and girls with psychosocial disabilities? Are women and girls with psychosocial disabilities at a higher risk of abuse?

**Children with disabilities (art. 7)**
Are children with psychosocial disabilities receiving appropriate care?

Are children placed in institutional care and deprived of a family environment?

Are there sufficient non-medical, family- and community-based care options for children with psychosocial disabilities (accessible to all people, based on free and informed consent, according to the will and preferences of the child concerned, in any area of support, is the support age-appropriate and disability-sensitive)?
**Awareness-raising (art. 8)**
What is being done to ensure that persons with psychosocial disabilities have equal opportunities and equal rights to the enjoyment and exercise of human rights and fundamental freedoms on an equal basis with others?

Is information on mental health and support being provided in a good and understandable way?

Are there any measures taken to bring reporting of the mass media on persons with psychosocial disabilities into line with the human rights model of disability enshrined in the Convention?

**Accessibility (art. 9)**
Are communities accessible and inclusive for persons with psychosocial disabilities? Are there barriers that prevent persons with psychosocial disabilities from participating equally in the community?

Is there good quality and helpful community based support? Is community based care available for all people, based on free and informed consent, according to the will and preferences of the person concerned, in any area of support and including education, work and parenting? Is the support age-appropriate and disability-sensitive?

**Right to life (article 10)**
Have there been documented cases in your country where persons died directly at the hands of psychiatry? Has action been taken and was it successful against those responsible?

**Situations of risk and humanitarian emergencies (art. 11)**
Are the specific needs of persons with psychosocial disabilities taken into account in situations of risk and humanitarian emergency?

This could also include humanitarian aid programmes, such as international aid programmes, do they fund institutions? Are poverty-reduction programmes accessible for persons with psychosocial disabilities?

**Equal recognition before the law (art. 12)**
Are persons with psychosocial disabilities placed under guardianship or in any other way deprived of making decisions about their own lives (deprived of legal capacity)?

Do they have free choice in all aspects of life, including on where to live, and which support to receive – which would mean that there are no forced treatments?

Is substitute decision making (guardianship) replaced by good practices of supported decision making, where persons with psychosocial disabilities receive support to make and execute their own decisions, based on free and informed consent, according to the will and preferences of the person concerned, in any area of support and including education, work and parenting, in an age-appropriate and disability-sensitive manner?

Are guardians of persons with psychosocial disabilities allowed to give their authorization for psychiatric or other interventions (such as sterilization or participation in research) without the consent of the person?

Can persons with psychosocial disabilities effectively appeal against court decisions on the deprivation of their legal capacity, and can they effectively appeal against decisions that other people may take about their lives? Are there any statistics?
Access to justice (art. 13)
Do persons with psychosocial disabilities have access to justice and legal aid (as a victim, witness or defendant)?

Can persons with psychosocial disabilities within the justice system enjoy and exercise their rights and freedoms on an equal basis with others (including whether there is reasonable accommodation made)?

Liberty and security of the person (art. 14)
Can persons with psychosocial disabilities be confined without consent using involuntary institutionalization in mental health facilities (unfree to leave)? Is there long-term institutionalization? Are there any statistics?

Are there any other restrictive measures in use that deprive persons with psychosocial disabilities of their liberty and security on an equal basis with others (locked facilities, restrictions)?

Is there a way for the person to regain freedom? Are there any statistics?

Freedom from torture or cruel, inhuman or degrading treatment or punishment (art. 15)
Are forced psychiatric interventions used against persons with psychosocial disabilities, including forced medication, solitary confinement, restraints (belts, cage beds, chains), forced electroshock or psychosurgery without the free and informed consent or other harmful practices?

Are persons with psychosocial disabilities subject to medical, scientific or psychiatric experimentation without their free and informed consent?

Freedom from exploitation, violence and abuse (art. 16)
Are there cases where persons with psychosocial disabilities, including women, boys, girls and older persons, have been victims of exploitation, abuse and violence?

Protecting the integrity of the person (art. 17)
Can persons with psychosocial disabilities be who they are, without being forced to change?

Are there any invasive and intrusive measures used against persons with psychosocial disabilities?

Liberty of movement and nationality (article 18)
Are there problems for persons with psychosocial disabilities to enjoy liberty of movement (including leaving the country), freedom to choose their residence and nationality on an equal basis with others?

Living independently and being included in the community (art. 19)
Is there any progress being made towards sustainable deinstitutionalization and inclusion of persons with psychosocial disabilities in the community? Do community solutions meet the needs of people with psychosocial disabilities as they define the needs themselves?

Is there good quality and helpful community based support available to persons with psychosocial disabilities? Is community based care available for all people, based on free and informed consent, according to the will and preferences of the person concerned, in any area of support and including education, work and parenting? Is the support age-appropriate and disability-sensitive?

Are there forms of outpatient forced treatment (“community treatment orders”)?
**Personal mobility (art.20)**

Do persons with psychosocial disabilities have access to the physical environment, to transportation and to other facilities and services open or provided to the public at all levels and on an equal basis with others?

**Freedom of expression and opinion, access to information (art. 21)**

Can persons with psychosocial disabilities express and publish their views and opinions freely?

Is all information made available to the general public accessible for persons with psychosocial disabilities?

**Respect for privacy (art. 22)**

Is the privacy of personal, health and rehabilitation information of persons with psychosocial disabilities protected on an equal basis with others? Is there interference in family life, home, correspondence, telephone and internet access?

**Respect for home and the family (art. 23)**

Can persons with psychosocial disabilities marry, found a family, enjoy parenthood and relationships on an equal basis with others?

**Education (art. 24)**

Do persons with psychosocial disabilities enjoy the same opportunities in education as others?

**Health (art. 25)**

Do persons with psychosocial disabilities have access to general and medical health care services? Is this service of equal quality to services for others, based on free and informed consent and full information, and according to the needs, the will and preferences of the person concerned?

Does a person with psychosocial disabilities have a free choice regarding health care services, including the right to refuse treatment? Are there cases of persons with psychosocial disabilities being forced to undergo general or medical health care interventions?

**Work and employment (art. 27)**

Do persons with psychosocial disabilities have access to employment on an equal basis with others?

Are there cases of persons with psychosocial disabilities being forced or coerced to work?

Are there cases of persons with disabilities working without adequate payment and legal protection equal to others?

**Adequate standard of living and social protection (art. 28)**

Do persons with psychosocial disabilities enjoy an adequate standard of living and social protection? Is there support for persons with psychosocial disabilities to achieve an adequate standard of living and social protection?
Participation in political and public life (art. 29)

Can persons with psychosocial disabilities fully take part and equally participate in the conduct of public affairs? Are persons with psychosocial disabilities encouraged to participate in public and political positions? Are persons with psychosocial disabilities encouraged to form and join organisations to represent themselves?

Are there cases where persons with psychosocial disabilities are not entitled or able to vote, such as when they are in psychiatric or rehabilitation institutions or placed under guardianship?

Do persons with psychosocial disabilities experience problems exercising their right to vote?

Participation in cultural life, recreation, leisure and sport (art. 30)

Can persons with psychosocial disabilities enjoy cultural, recreational, leisure and sports activities on an equal basis with others?

Statistics and data collection (art. 31)

Are the experiences of persons with psychosocial disabilities meaningfully included in research, studies and data collection?

National implementation and monitoring (art. 33)

Are there laws and policies that need to be changed to implement the Convention?

Has the government taken measures to abolish involuntary institutionalization and forced psychiatric interventions?

Have measures been taken to alleviate the impact of the financial crisis and austerity measures on persons with psychosocial disabilities?

Are persons with psychosocial disabilities meaningfully involved in the implementation and monitoring of the Convention? Including meaningfully influencing law and policy making?

Is there an official focal point or monitoring body (Inspection, Ombudsperson, National Human Rights Institution, etc.) that effectively deals with the rights of persons with psychosocial disabilities?

Thank you for your participation and your contribution to ENUSP’s Shadow Report.

We look forward to receiving your submission by 1 June 2015 and preferably as soon as possible at enusp.info@gmail.com. Please also indicate if you agree to have your information published on ENUSP’s website www.enusp.org.