



Convention on the Rights of Persons with Disabilities

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Consideration of reports submitted by parties
to the Convention under article 35

List of issues in relation to the initial report of Norway

Addendum

Replies of Norway to the list of issues*, **

[Date received: 14 January 2019]

* The present document is being issued without formal editing.

** The annexes can be consulted in the files of the secretariat.



A. Purpose and general obligations (arts. 1–4)

General obligations (art. 4)

Question 1 (a)

1. The Equality and Anti-Discrimination Act entered into force in January 2018. The Act prohibits direct and indirect discrimination based on disability. The Act also contains provisions regarding activity and reporting obligations and regarding universal design and accommodation to individual needs.
2. The Act expanded the obligation of universal design of ICT to include the training and education sector. Employers' obligation to make active efforts to promote equality and prevent discrimination based on disability was expanded to apply to all employers, regardless of the size of the undertaking. The Ministry of Children and Equality is preparing a Bill to strengthen the activity and reporting obligations of employers and public authorities.
3. In 2016, the EU adopted the Web Accessibility Directive (WAD), which sets more stringent requirements for the universal design of websites and mobile applications for public bodies. Norway has begun work on national implementation of the directive's requirements.
4. The Anti-Discrimination Tribunal deals with complaints regarding discrimination. The tribunal may award damages in employment cases and compensation in straightforward cases.
5. In December 2018, the government presented a strategy for equality for people with disabilities for the period 2020-2030. The strategy will be followed up by an action plan in 2019.
6. The Norwegian Guardianship Act was adopted in 2010, and was *inter alia* designed to fulfil the legal requirements of the CRPD. The Act's entry into force in 2013 entailed a comprehensive reform of guardianship administration.
7. The Act lays down a basic requirement that ordinary guardianship must be voluntary. This implies that modern Norwegian guardianship primarily is based solely on the person's own decision-making or on supported decision-making. Ordinary guardianship imposes no restrictions on an individual's right to exercise legal capacity, but is a support arrangement for persons requiring assistance in dealing with financial or personal affairs.
8. In some cases, legal guardianship has been established for persons who are unable to give consent, against their will. This is not in line with the principle in the Act underlining that ordinary legal guardianship is a voluntary support measure.
9. The Ministry of Justice and Public Security has seen a need to clarify the voluntariness requirement in the Act. Draft legislative amendments were circulated for consultation in November 2018. The proposed changes include a provision stating clearly that ordinary guardianship cannot be established against a person's will, even if the person is unable to give consent.
10. In exceptional cases, the Guardianship Act allows for restrictions on individuals' right to exercise legal capacity. This may only be decided by a court of law when it is essential to protect the person's own interests, and thereby secure the person's other rights based on national and international law. Norway considers the present provisions regarding restrictions on legal capacity to be in accordance with the CRPD. However, the Ministry has commissioned a report on legal provisions in other countries which regulate the exercise of and restrictions on legal capacity. Adjustments or clarifications will be considered if the report should show that other countries have found better forms of regulation.
11. The Ministry of Education and Research works systematically to ensure and further develop an inclusive educational system. Study support and student housing for students with disabilities are intended to enable persons with disabilities to study. Students with

disabilities are entitled to appropriate accommodation of their needs. The 0-24 collaboration project aims at improving coordination of services for vulnerable children and young people aged under 24 and their families. Early intervention in schools and kindergartens has been strengthened.

12. Under the new rules on school environment that were introduced in autumn 2017, schools are required to implement specific measures to stop harassment, discrimination, violence and bullying, and ensure that pupils have a safe, enjoyable school environment. A broad-based focus on building expertise aims to increase the ability of teachers and other adults in schools to prevent, identify and deal with cases of harassment, discrimination or bullying. An anti-bullying ombudsman has been appointed in every county. Professional qualifications relating to pupils with dyslexia and foreign language training are under revision.

Question 1 (b)

13. The sector responsibility principle, a rights-based approach and user involvement are fundamental elements of policy for persons with disabilities.

14. Every year, the government grants substantial funding for organisations representing persons with disabilities. Both operating grants and grants for peer support activities are provided. In 2018, funding for operating grants and peer support totalled EUR 22.5 million. There is extensive contact between the government ministries and organisations for persons with disabilities. There is also substantial contact at directorate level.

15. Municipalities are required under the Municipal Health and Care Services Act to ensure that the views of patients and users are heard when municipal health and care services are designed. The Norwegian Labour and Welfare Administration (NAV) is required to provide users with services and benefits based on the individual user's circumstances and needs. Active user involvement is facilitated at individual and system level.

16. In 2017, a new provision regarding municipal and county councils for the elderly, persons with disabilities and adolescents was incorporated into the Local Government Act. Local governments also have a special responsibility for ensuring the involvement of groups who require accommodation of special needs. For more information, see Norway's initial report to the CRPD Committee, under Article 4.

17. Draft regulatory amendments are circulated for consultation, including to NGOs that represent the interests of persons with disabilities.

Question 1 (c)

18. Overview of relevant judicial decisions and decisions of the Anti-Discrimination Tribunal:

- LB-2018-64831-2: The regional court supported a woman's claim that her voluntary guardianship should be abolished in accordance with her wish;
- HR-2017-275-A: The Supreme Court ruled that the right to enter into, amend and terminate a rental contract was a "financial condition" according to the Guardianship Act, and that this right could be limited when the court found that a person's legal capacity in certain financial affairs had to be restricted;
- LB-2016-138857: The regional court restricted the legal capacity in financial affairs of a woman whose financial dispositions put her at great risk of financial ruin. The woman had a mild intellectual disability and a history of inter alia being financially exploited by others. The court did not impose restrictions on the woman's legal capacity in personal affairs, such as the right to choose her own doctor and decide whether she wanted to use contraception;
- Case HR-2016-2591-A: The Supreme Court concluded that a woman's legal capacity in financial affairs had to be restricted. The woman suffered from mental illness;

- LDN-2015-73: The case concerned the requirement of two foreign languages for specialised study programmes in upper secondary school. The Anti-Discrimination Tribunal considered the obligation under the CRPD to ensure an inclusive education system so as to fulfil the right to education.

Question 1 (d)

19. The government has not taken steps to ratify the Optional Protocol to the Convention. In 2015, the government commissioned an independent expert report on the consequences of possible Norwegian accession to the Optional Protocol to the CRPD, which was subject to public consultation. The report was sent to organizations representing persons with disabilities and other relevant stakeholders. In September 2016, the Government presented a white paper to the Storting (Norwegian parliament) on the communications procedures under the CRPD, the Convention on the Rights of the Child and the Covenant on Economic, Social and Cultural Rights. After thorough consideration, the Government concluded that it would not for the present submit proposals to the Storting to accede to these Optional Protocols, due to considerable uncertainty about the consequences. The main reason for not acceding to the Optional Protocol to the CRPD was that the Committee in certain areas interprets the Convention in a far-reaching manner that is not in line with the understanding of the States Parties. In January 2017, a large majority of the Storting concurred with the government's conclusion.

B. Specific rights (arts. 5–30)**Equality and non-discrimination (art. 5)****Question 2 (a)**

20. The Anti-Discrimination Tribunal has been empowered to award damages in employment cases and compensation in straightforward cases. This constitutes a strengthening of protection against discrimination on all grounds.

21. The Equality and Anti-Discrimination Ombud has been assigned an advocacy and advisory role.

Question 2 (b)

22. The Equality and Anti-Discrimination Act prohibits multiple discrimination.

23. In July 2018, the Ministry of Children and Equality circulated for consultation a proposal to strengthen activity and reporting obligations. It proposed that all employers be subject to an obligation to promote equality and prevent discrimination, including multiple discrimination. It also proposed that the obligation of public authorities to take action be clarified so as to emphasise the obligation to be aware of multiple forms of discrimination.

Women with disabilities (art. 6)**Question 3 (a)**

24. Norway is regularly recognised internationally as one of the world's most gender-equal countries. Legal protection against discrimination based on among other grounds gender and disability and universal welfare programmes contribute to equality. For more information, see Article 6 of Norway's report to the CRPD Committee.

Question 3 (b)

25. See the responses to 1a and 2b.

Children with disabilities (art. 7)**Question 4 (a)**

26. All minors must have guardians who help to safeguard their financial interests or rights. In cases where neither of the parents can safeguard the minor's interests, the County Governor shall appoint a guardian. Unaccompanied asylum-seeking minors are entitled to have a representative.

27. Reception centres for asylum seekers must have procedures for identifying vulnerable children, including children with disabilities. The reception centres must collaborate closely with local health authorities to ensure that children with disabilities receive necessary health care.

28. Health issues, including disabilities, may also be relevant when assessing whether to grant a foreign national right of residence in Norway. In cases involving children, the best interests of the child must be a primary consideration. The threshold for granting a residence permit to children is lower than for adults.

29. The system of adapted judicial interviews described under 10 a also applies to children under 16 years of age.

Question 4 (b)

30. Reference is made to our response to the UN Committee on the Rights of the Child in CRC/C/NOR/5-6, paragraphs 40-46.

31. According to Article 104, second paragraph, of the Constitution of Norway, the best interests of the child shall be a fundamental consideration in actions and decisions that affect children.

32. The principle of the best interests of the child has been laid down in law in the Children Act, the Child Welfare Act and the Immigration Act.

33. Addressing challenges related to legal proceedings that affect children is a priority.

34. The Norwegian Courts Administration provides training for judges in parental disputes and cases involving violence and abuse issues to safeguard the best interests of the child.

Question 4 (c)

35. The Ministries hold annual meetings with civil society and non-governmental organisations.

Awareness-raising (art. 8)**Question 5**

36. The Norwegian Courts Administration organises seminars for court employees to increase their expertise on disabilities.

37. The Central Guardianship Authority works to provide information to users, including persons with disabilities. Information is provided through web pages and brochures, in a clear language and form.

38. The County Governor's Offices hold courses for guardians, in addition to courses and lectures for health professionals, NAV and other advocacy groups that promote the rights of persons with disabilities.

39. The government's Strategy for Sexual Health (2017-2022) includes a special chapter on sexual health related to illness and functional impairment. Adolescents with disabilities or chronic illnesses may need information and follow-up tailored to their specific needs in addition to ordinary sexual education. The government's LGBTI Action Plan: Safety, Diversity, Openness (2017-2020) features a special programme aimed at incorporating disability, sexuality and LGBTIQ issues into the topics covered by the online service

ung.no. As part of the implementation of the Strategy for Sexual Health, there is focus on increasing awareness of and expertise on LGBTIQ issues in public health and care services. Organisations have received funding to run low-threshold services and peer support programmes.

40. In autumn 2016, the government presented a strategy to prevent hate speech, aimed at combating hate speech based on gender, ethnicity, religion, life stance, disability, sexual orientation, gender identity and gender expression.

Accessibility (art. 9)

Question 6

41. As a general rule, new buildings must meet universal design or accessibility requirements. The Norwegian State Housing Bank (Husbanken) offers grant and loan schemes to promote accessibility in new and existing dwellings. Both Husbanken and the Directorate of Building Quality provide guidance for individuals, the construction industry and municipalities on improving accessibility in housing and buildings.

42. The National Development Programme for Universal Design in counties and municipalities ran from 2009 to 2013. The evaluation showed that the programme was perceived as important, and that it generated extensive activity in participating municipalities and counties. The municipal network for universal design continues in 2019.

43. In the field of ICT there is a timeframe for ensuring that ICT solutions meet universal design criteria. The Agency for Public Management and eGovernment (DIFI) monitors compliance with regulatory requirements. If the requirements are not met, the regulations provide authority to impose a coercive fine. New public buildings are required to meet universal design criteria, but sanctions cannot be imposed for breaches. However, cases regarding discrimination may arise where buildings are not compliant with accessibility rules and may be brought before the Anti-Discrimination Tribunal.

Question 7

44. The government is in the process of preparing a public consultation document on how to transpose the directive into Norwegian legislation.

45. Reference is also made to the response to 6.

Situations of risk and humanitarian emergencies (art. 11)

Question 8

46. A pilot project has been initiated in which pre-registered users send text messages directly to emergency service numbers.

Equal recognition before the law (art. 12)

Question 9

47. The CRPD is a key instrument for ensuring that the human rights of persons with disabilities are respected. Norway is committed to fulfilling its obligations under the Convention.

48. Norway's interpretative declaration relating to Article 12 reflects an interpretation which Norway considers to be fully in line with the wording of the article. This view is shared by a number of the State Parties to the Convention. Several states have statutory provisions similar to those of Norway regarding the authority to establish guardianship, including limiting the legal capacity of individuals where strictly necessary. Several State Parties have similar declarations, and other State Parties have not objected to the declarations. Together with reports from other State Parties on their fulfilment of their obligations under the Convention, this reflects a general opinion held by many State Parties that the Convention allows for limited authority to deprive individuals of or restrict legal

capacity. The premise is that restriction of legal capacity is strictly necessary as a last resort, and is subject to legal safeguards.

49. The Norwegian government accordingly has no plans to withdraw its interpretative declaration regarding Article 12.

Question 9 (a)

50. Guardianship is a support measure for persons in need of assistance to make decisions in personal or financial matters. The reform implemented by the new Guardianship Act was aimed at increasing the self-determination of persons who require the assistance of a guardian. Under ordinary, voluntary guardianship, the individual has full legal capacity.

51. The clear general rule is that a guardian may not make decisions against the wishes of the person concerned. A special rule applies where the person is incapable of understanding what the decision entails, but in any case the guardian must listen to the person and base the decision on the person's own will and desires. As a general rule, accordingly, an ordinary guardianship constitutes decision-making support for persons in need of it.

52. Restrictions on individuals' legal capacity may only be imposed by a court decision, and only when strictly necessary to prevent a person from significantly harming his or her own interests. Decisions to restrict individuals' right to exercise legal capacity to manage financial and personal affairs are taken very seldom. At present, there are around 65 000 ordinary guardianships, while around 220 persons have so called full or partial restrictions of legal capacity. Normally the courts will order so called "partial restrictions". But also if the courts should order so called "full restriction" the restriction is limited. According to the Act section 23 the person still – and without any interference – normally may enter into an employment contract, dispose over money earned by his or her own work and dispose over money given to the person's own disposal. In addition the person in a case of "full restriction" still may make all ordinary dispositions in a household.

53. The guardianship authority is working to promote the power of attorney arrangement as an alternative to guardianship.

Question 9 (b)

54. Around 42 000 adults have a legal guardian. Approximately 20 500 are women and 21 600 are men. The statistical breakdown by type of disability is uncertain. Among adults with a disability who have a legal guardian, the largest groups appear to be persons with intellectual disabilities, dementia or other mental illnesses. Some persons have multiple diagnoses.

55. The statistical data on guardianship, by age, are as follows:

<i>Age</i>	<i>Number</i>	<i>Percentage of population</i>
18 – 29	7950	0.9%
30 – 59	15313	0.7%
60 – 89	15850	1.3%
Over 90	2884	6.5%
Total	42051	1.0%

56. The introduction of a new Guardianship Act entailed a transition from a system of denial of legal capacity to individually adapted guardianship that could encompass full or partial restriction of legal capacity. As of 1 July 2013, around 250 persons had been denied legal capacity. By 1 July 2016, all cases of deprivation of legal capacity from the period prior to 1 July 2013 had been reviewed. In a large percentage of these cases, the decision imposing deprivation of legal capacity was either amended to guardianship without deprivation of legal capacity or was annulled with the result that the person no longer has a guardian. In the remaining cases, proceedings regarding guardianship with deprivation of

legal capacity were brought before the district court. At present, around 220 persons have been fully or partly deprived of legal capacity.

Question 9 (c)

57. The Central Guardianship Authority holds annual meetings with user organisations. The user organisations have also contributed to the design of a new methodology for interviews with persons with various disabilities. In 2019, the County Governors will be tasked with training guardians in providing decision-making support based on this methodology. The County Governors hold courses for guardians in which the rights of persons with disabilities are key topics. User organisations have been involved to some extent in these information activities.

58. The guardianship website vergemal.no offers information and training modules for guardians that cover the rights of persons with disabilities. Similar information is also available on the websites of the County Governor's Offices. Some offices have also posted video presentations on their websites and on social media.

Question 9 (d)

59. Decisions to establish guardianship may be appealed by the person concerned and immediate family members. These persons may also apply for changes in guardianship. Other administrative decisions taken by the guardianship administration pursuant to the Guardianship Act may mainly be appealed by the person concerned, with assistance if relevant, and by the guardian.

60. In cases regarding deprivation of legal capacity that are brought before a court, a legal representative shall be appointed at the government's expense.

61. The guardian does not have authority to make decisions opposed by the person concerned, unless the person has been deprived of legal capacity with regard to the decision in question.

62. Even in cases where a person has been deprived of legal capacity, his or her view must be heard before the guardian makes decisions, and the guardian must take account of his or her opinion. Spouses or cohabitants must also be allowed to state their opinions. If the person disagrees with the guardian's decision, the question may be submitted to the County Governor.

63. The County Governors supervise and provide guidance and training for guardians. If a guardian fails to comply with the stipulated requirements, the County Governor shall provide guidance and advice. The County Governor may relieve the guardian of his assignment if this is in the best interests of the person under guardianship. The County Governor shall relieve the guardian of his assignment if this is necessary out of regard for the person for whom a guardian has been appointed. A special guide on supervision of guardians has been issued to County Governors.

64. The Central Guardianship Authority supervises the County Governor, on the basis of both reports of concern from the person under guardianship himself and from individuals in the person's immediate circle. Planned risk-based inspections are also carried out of the County Governor's performance of his duties.

Access to justice (art. 13)

Question 10 (a)

65. When interviewing witnesses, including aggrieved persons, with intellectual disabilities or other disabilities that entail a need for accommodation, use shall be made of adapted judicial interviews in certain serious cases. Adapted judicial interviews may also be conducted in other cases when warranted by due consideration for the witness. This type of interview is also used in certain cases when the witness is under 16 years old.

66. Adapted judicial interviews must be conducted in accordance with currently approved methods for interviewing children and particularly vulnerable adults.

67. Furthermore, persons with disabilities, in the same way as other aggrieved persons, will be entitled to have a legal representative appointed as counsel for the aggrieved person in certain serious cases.

68. State-administered Children's Houses play a pivotal role in efforts to ensure legal safeguards for children and persons with disabilities. The Children's Houses were established to ensure that children and other particularly vulnerable groups who may have been subjected to violence and sexual abuse receive effective, coordinated follow-up in cases that have been reported to the police. The task of the Children's House is to facilitate adapted judicial interviews and medical examinations, offer therapy and follow-up, and coordinate inter-professional and inter-agency collaboration.

69. Another measure that can provide support and assistance is the witness support scheme. The Prosecution Instructions allow victims to be accompanied by a person they trust during interviews.

70. The rules governing the appointment of a defence counsel are set out in sections 96-99 of the Criminal Procedure Act. Besides these cases, the court may appoint a public defence counsel for a person charged when special grounds so dictate, including the person charged having a disability or being in some other physical or mental state that calls for the appointment of a defence counsel.

71. Most courts of justice should have been adapted to accommodate the needs of users with physical disabilities, but this requirement has not been complied with everywhere. New courthouses must conform with universal design requirements. The public authorities cover interpreting costs for a person with substantial speech or hearing impairments who is party to, or an expert or a witness in a case. All courthouses have at least one room adapted for equipment for persons with hearing impairments.

Question 10 (b)

72. In October 2018, the government appointed a public committee to review the legal aid scheme. Issues to be assessed by the committee include whether it is necessary to expand the scheme to cover more types of cases than at present.

Liberty and security of the person (art. 14) and freedom from torture or cruel, inhuman or degrading treatment or punishment (art. 15)

Question 11

73. The Norwegian government maintains its interpretative declaration regarding Articles 14 and 25, as it considers the declarations to be consistent with a widely held understanding of the Convention among the State Parties.

Question 11 (a)

74. In September 2017, several amendments to the Mental Health Care Act entered into force with the object of giving patients greater self-determination and stronger legal safeguards. A condition was introduced regarding the "lack of capacity to consent" in cases of compulsory observation, compulsory mental health care and compulsory treatment.

75. The amendment is to be evaluated, and an e-learning course on assessment of capacity to consent is being developed.

76. A legislative committee has been appointed to assess the coercive laws in the health and care sector. The committee will present its report in June 2019. Among other things, the committee is to report on the relationship to international obligations, including the CRPD, and assess the need for regulatory amendments.

Question 11 (b)

77. In 2009, a new chapter was added to the Patient and User Rights Act on somatic health care for patients who lack capacity to consent and who oppose treatment. The provisions were introduced to ensure health care for this group, and to ensure that coercion

was only used in compliance with stringent criteria, and was subject to legal safeguards. To ensure proper implementation, circulars, templates and training material for health personnel and supervisory bodies were developed.

78. Coercive health care for persons with intellectual disabilities must comply with The Health and Care Services Act. It is important that the legal safeguards of persons with intellectual disabilities are properly observed, and that health and care services make systematic, conscious efforts to prevent the need for use of coercion and force in the services. In 2015, a circular on these provisions aimed at promoting such efforts was issued.

79. The Directorate of Health and the Board of Health Supervision organise a national conference every year for the appeal body (County Governors).

80. The Directorate of Health is to draw up national guidelines to ensure adequate services for persons with intellectual disabilities.

Question 11 (c)

81. Several of the amendments to the 2017 Mental Health Care Act concerned “compulsory treatment”. For instance, a requirement was introduced that the patient must lack capacity to consent. It was further specified that the person making the decision must assess expected side effects and the possible risk of permanent damage as a result of medication and how the overall use of coercion is expected to affect the patient and cooperation with the patient. It was also specified that the decision-maker must take into consideration the patient’s advance directives or statements regarding prior experience of coercion. In addition, a statutory duty was imposed on the person making the decision to use coercion to consult with another qualified health professional. A right was also introduced for the patient to have a post-decision evaluation interview, and the right to free legal counsel in appealing the decision to the County Governor.

82. Following the legislative amendments, the Directorate of Health has updated its templates for decisions on compulsory treatment for use in electronic patient records. The Directorate has also drawn up appeal decision templates for the County Governor (the appeal body), and holds a national conference every year for the country’s County Governors with a view to strengthening and standardising controls.

83. There is a need for further assessment of the regulation of use of electroconvulsive therapy (ECT) without the patient’s consent. This is part of the terms of reference of the legislative committee appointed to review the regulation of coercion in Norwegian legislation. Pending possible regulatory amendments, it was deemed necessary to strengthen supervision of non-consensual use of ECT. The Directorate of Health has asked all Norwegian supervisory commissions to monitor and register all use of ECT on grounds of necessity in mental health care.

84. Norway has a national system for reporting undesirable incidents in specialised health services.

85. A total of 33 reports in the period 1 July 2012–8 March 2018 dealt with undesirable incidents in connection with ECT. Sixteen of the reports concerned women and 11 concerned men. Six reports did not specify gender.

86. The reports concerned undesirable incidents at different stages of the administration of ECT. During ECT, the most frequent incidents were dental damage, medication errors, and incorrect voltage. After ECT, falls, ventricular fibrillation and unusual lethargy were most common. Despite the few incidents reported, we see that there may be potential for improvement in administering ECT.

Question 11 (d)

87. The Directorate of Health is developing guidance material for health personnel working with people with intellectual disabilities. The annual state budget finances measures aimed at strengthening competence in health and care services for people with intellectual disabilities. The Ministry of Health and Care Services issued white papers in

2013, 2015 and 2018 which, amongst other themes, address the needs of people with disabilities.

88. Norway also has regulations to ensure a certain level of quality in primary health and care services in municipalities. The overall goal of these regulations is to ensure that municipal health and care services respect each individual's self-determination, self-worth and way of life.

Freedom from exploitation, violence and abuse (art. 16)

Question 12

89. Penal provisions that provide protection against violations of personal rights basically protect everyone. Some penal provisions provide special protection for persons with disabilities.

90. Section 185 of the Penal Code applies to any person who publicly makes a discriminatory or hateful statement based on someone's disability.

91. Section 186 of the Penal Code applies to any person who in a commercial activity refuses a person goods or services based on the person's disability, provided that the refusal is not due to a lack of physical accommodation.

92. Section 295 of the Penal Code applies to any person who obtains sexual activity for himself/herself or another person, or makes a person perform acts corresponding to sexual activity on himself/herself by exploiting a person's mental illness or intellectual disability.

93. One of the possible acts in Section 291 concerning sexual assault applies to any person who engages in sexual activity with a person who is unconscious or for other reasons incapable of resisting the act. This may apply to cases where the aggrieved person has a severe disability.

94. A breach of the law motivated by the disability of others or other circumstances relating to a group with a particular need for protection will constitute aggravating circumstances; see Section 77 (i) of the Penal Code.

95. The government's strategy against hate speech 2016-2020 stresses hate speech and hate crime is to receive priority in all police districts, and that chiefs of police must ensure that hate crime is dealt with appropriately. Punishable actions motivated by the aggrieved person's disability are given priority by the Director General of Public Prosecutions. The National Police Directorate has published guidelines for use in police districts, to ensure consistent, correct registration of hate crime.

96. The Directorate for Children, Youth and Family Affairs has an ongoing project targeting women with mental illnesses or physical or intellectual disabilities who have been the victims of violence. The project is investigating how these women can be encouraged to seek help from health and social welfare services.

Question 13 (a)

97. The government takes the responsibility of preventing and combating hate crime seriously.

98. One of the aims of the Penal Code of 2005, which entered into force in 2015, was to offer greater protection against hate crime. As mentioned, an offence motivated by the disability of others or other circumstances relating to a group with a particular need for protection will constitute general aggravating circumstances under the Penal Code of 2005. Although the phrase "hate crime" is not used, this provision expresses a general principle that in cases in which the motivation for the offence can be attributed partly or wholly to these factors a stricter penalty will be imposed.

99. Pursuant to the Penal Code of 2005, a number of offences could be regarded as aggravated when they are attributable to circumstances of this nature. When determining whether a physical assault is aggravated, weight must be attached to factors such as whether

it was motivated by the aggrieved person's disability. As mentioned above, persons with disabilities are also accorded special protection by other provisions of the Penal Code.

Question 13 (b)

100. Case dismissals and waivers of prosecution may be appealed to the immediately superior prosecuting authority. If appeals are not successful, or the proceedings take too long, an appeal may be lodged with the Parliamentary Ombudsman.

Protecting the integrity of the person (art. 17)

Question 14 (a)

101. There are very stringent criteria for when an abortion or sterilisation can be carried out without consent. Only in situations where a woman is suffering from severe mental illness or has severe intellectual disabilities can a guardian submit a petition for abortion on behalf of the woman. The woman must be incapable of understanding what pregnancy entails, and it must be clear that abortion will be in her interests. If the woman resists because she has insight into the situation, she has sufficient legal competence to be able to give valid consent. The intervention may not then be carried out legally without such consent.

102. The guardian may submit an application for sterilisation on behalf of a person suffering from such severe mental illness, intellectual disabilities or mental impairment that she herself is not capable of adopting a position on the intervention, and a cure or substantial improvement cannot be expected. In these cases, an application for sterilisation is decided by a board of experts (sterilisation board). Sterilisation may be granted if pregnancy and childbirth could entail substantial risk to the woman's life or physical or mental health, care for a child could place the woman in a particularly difficult life situation, or if sterilisation appears to be the best option for preventing pregnancy, because the woman's genetic make-up implies a substantial risk of a child having a serious disease or defect, or because owing to mental illness or intellectual disabilities the woman would not be able to provide satisfactory care for a child.

103. With regard to the question on coercive medication, reference is made to the response to 11c.

Question 14 (b)

104. The Directorate of Health recently revised a circular relating to the Sterilisation Act. It is clearly stated that the Act does not permit coercive interventions.

105. The same applies to the Abortion Act. The Directorate of Health is revising a circular relating to the Abortion Regulations.

Question 14 (c)

106. The clear general rule is that medical assistance may only be carried out if there is valid consent. If there has been failure in the provision of medical assistance, and the conditions are otherwise met, the patient may receive compensatory damages. The person will also have a right to necessary medical assistance, including rehabilitation services.

Liberty of movement and nationality (art. 18)

Question 15

107. The parents of hearing-impaired children are offered up to 40 weeks' training in sign language while their children are 0–16 years old, irrespective of whether they are refugees, asylum-seekers, migrants or Norwegians. Instruction in sign language is free of charge for the individual.

108. There are no special programmes, language courses etc. designed for immigrants, refugees and asylum-seekers with disabilities. Those who have been granted a residence permit for Norway have the same rights as other children and adolescents in Norway.

109. Children and adolescent asylum-seekers of compulsory school age with disabilities have a right and obligation to schooling and they have the same rights as other pupils, for example the right to special education and adapted language education. Adapted language education means adapted education in Norwegian, and, if needed, mother tongue instruction and/or bilingual subject teaching. These rights apply to children in primary and lower secondary schooling irrespective of their residential status.

110. Children and adolescents with sign language as their first language have a right to instruction in sign language as well as the subject sign language.

111. There are special transitional curricula in basic Norwegian and mother tongue for language minorities. Pupils in upper secondary education for whom a decision for adapted language education has been issued, and who have lived in Norway for less than 6 years at the time of graduation, may follow the subject curriculum in Norwegian for language minorities with short time of residence in Norway and have their Norwegian exams from this curriculum.

112. The introduction programme and instruction in Norwegian and social studies is the authorities' most important means of getting newly arrived refugees and immigrants into work or education. A report from 2016 about special adaptation of instruction in the Norwegian language shows that there is a need for further adaptation of Norwegian language training for persons with disabilities. The Ministry of Education and Research is engaged in following up the report.

113. The Directorate of Immigration has a separate circular with requirements regarding the use of interpreters and language assistants for those living in reception centres for asylum seekers.

Living independently and being included in the community (art. 19)

Question 16 (a)

114. One of the main purposes of the Health and Care Services Act is to ensure that each individual has the opportunity to live and dwell independently and to have an active, meaningful existence in fellowship with others. The municipalities are responsible for providing primary health and care services in accordance with the purposes and framework of the Act. There has been a shift in the services offered by the municipalities from traditional institutional services towards an increase in health and care services at home, activity services during the day and more independent living arrangements, also for patients and users of all ages in need of 24/7 health and care services.

115. Municipalities are obliged to report the number of persons between 18 and 49 years old living in long term care institutions to the County Governor. The number of younger persons living in long term institutions varies, but recent figures have shown a declining tendency. The ministry is monitoring developments in this area, along with representatives from the Norwegian Association of Disabled (NAD), the Norwegian Federation of Organizations of Disabled People (FFO) and the Norwegian Association of Local and Regional Authorities (KS).

Question 16 (b)

116. The regulation of Norwegian legislation on coercion in the healthcare sector is being reviewed by a committee which is to submit its recommendation on proposed amendments to the regulatory framework in June 2019.

Question 16 (c)

117. A satisfactory place to live is regarded as a fundamental need and a prerequisite for health and participation in spheres such as education, work, and the community generally. The aim is that as many persons as possible who wish to do so should be able to live in their own home in an ordinary residential environment and receive the necessary services there. Husbanken (Norwegian State Housing Bank) manages the government financial instruments used by municipalities in their work to help persons into appropriate housing.

When allocating subsidies to co-located housing and assisted living schemes, housing specially geared to persons with different types of disabilities and a need for follow-up, Husbanken places emphasis on normalisation and integration. Housing must not have an institutional character, and the number of co-located housing units must not be too large. The housing units should be located in ordinary environments. Some persons with intellectual disabilities may want to live in a community with close contact with personnel who can offer security to the individual. For others, the same living arrangement may create obstacles to living a good life. The solution chosen should be adapted to the wishes of the individual. Husbanken's guidelines refer to the fact that when housing co-operatives and co-located housing are established, it is important that the users themselves or their representatives take part in the planning.

Question 16 (d)

118. Over the past 25 years, one of the most significant features of Norwegian society is the downscaling of traditional institutionalization of services, see the response to 16 A.

119. The Ministry of Health and Care Services has developed a national strategy for an age-friendly society – "More years, more opportunities", a white paper *Leve hele livet* "Live your life – all your life" with a specific national programme for an age-friendly society inspired by WHO's concept of age-friendly societies and communities, and an action plan for a more dementia-friendly society "Demens2020", all addressing the topic of independent living services.

120. Municipalities must offer practical assistance and training organized as user-controlled personal assistance. As of 1 January 2015 an individual right to user-controlled personal assistance on certain conditions was established by law in the Patients' and Users' Rights Act. The individual right includes a right to respite measures for parents with children with disabilities living at home. The municipalities also have a legal obligation to consider and offer user-controlled personal assistance to persons who do not meet the terms under the individual right.

121. Guidelines and a handbook about user-controlled personal assistance have been developed.

122. The new scheme of user-controlled personal assistance has been evaluated. The Ministry of Health and Care Services has also received several reports from user organisations regarding user-controlled personal assistance. In combination, the evaluation and reports will hopefully provide a good foundation for taking the measures necessary to ensure that people with disabilities can live as active and independent a life as possible.

123. Implementation of the national strategy for housing and support services, *Housing for welfare (2014–2020)*, is in progress. Six ministries are responsible for the strategy, and six directorates are collaborating on its implementation. The County Governor is to contribute to the implementation of the strategy in municipalities, and is to promote housing and support services and ensure coordination of inter-sector responsibilities and instruments. The strategy has three main aims: Everyone should have a good place to live; everyone in need of services must receive assistance in managing their living arrangement; and public services must be comprehensive and effective. Assistance in acquiring suitable housing is a focal aspect of implementation of the strategy. One of the results achieved during the strategy period is that several municipalities have developed a good, varied supply of housing for the disadvantaged. The number of housing units at the disposal of municipalities has increased throughout the strategy period. Husbanken also has instruments for enabling more people to own their own home.

124. Municipalities have the principal responsibility for assisting the disadvantaged in the housing market. The strategy is primarily a means of ensuring that municipalities meet a coordinated state agency and have better framework conditions for their work. Users were involved in developing the strategy. However, organisations of persons with disabilities have not been directly involved in the implementation of the strategy. Municipalities have an independent responsibility for involving users in municipal services.

125. There is great demand for sign language interpreters. Persons in need of an interpreter are entitled to this service, and responsibility lies with the individual sector. In 2018 the government received an independent report that proposes reorganising the interpreting service for the deaf and hard of hearing. The Ministry of Labour and Social Affairs is now engaged in further follow-up of this report, and a dialogue has been established with organisations that represent the interests of the deaf and hard of hearing.

Question 16 (e)

126. Official Norwegian Report NOU 2016:17 På lik linje [On the same level] proposes eight actions for realising the fundamental rights of persons with intellectual disabilities. The report will be followed up in a white paper to the Storting.

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

Question 17

127. In the field of language, literature and libraries, this is mainly being followed up through subsidies and allocations to relevant institutions and organisations. For example: The Norwegian Library of Talking Books and Braille (NLB) is intended to ensure that persons who have difficulty in reading printed texts because of a disability have ready access to literature and library services. The foundation Døves media [Media for the deaf], among others, produces material in sign language.

128. The overarching framework for the Norwegian Broadcasting Corporation NRK's responsibilities is laid down by the Storting in the right and duties of NRK, which states: "NRK's broadcasting service shall be available to the whole population. In designing its services, it shall take account of persons with disabilities." The Norwegian Broadcasting Act imposes minimum requirements on NRK with respect to providing for the hearing impaired in its television service. NRK has a special accessibility manager who is responsible for ensuring enjoyment for users of all NRK's platforms through subtitles, live subtitling, audio subtitling, audio description and sign language interpretation.

129. NRK has a user committee consisting of representatives of nine organisations for persons with disabilities and one participant from the Norwegian Pensioners' Association. The purpose of the user committee is to provide input regarding improvements and developments in accessibility of NRK material on television, radio, online and mobile devices.

130. The Norwegian Labour and Welfare Administration (NAV) is required to implement universal design. Communications between NAV and users are increasingly transmitted in digital form. Users must have equal opportunities to obtain information and to use online services, irrespective of their functional ability and without a need for special accommodations. Users with disabilities are involved along the way to ensure the quality of the work.

Respect for home and the family (art. 23)

Question 18 (a)

131. Digital guidelines have been prepared to enhance the expertise on children with disabilities of the child welfare services and the health and care services. These services have different responsibilities for children and adolescents with disabilities and their families. By collaborating on a comprehensive, coordinated range of services, we can ensure good and equal services for everyone. This presupposes that the service providers possess a knowledge and understanding of one another's responsibilities, tasks and limitations. The purpose of the guidelines is to clarify roles and responsibilities and provide advice on how the services can cooperate on offering appropriate services for children in need of both child welfare and health and care services.

Question 18 (b)

132. According to the Health and Care Act, health and care services are provided according to the individual's needs. The law requires health personnel to make an individual assessment of services in each case, and co-determination is a part of this assessment. In cases involving children, the voices of the child and the child's family will be important factors in the co-determination process.

Question 18 (c)

133. The ministries regularly invite representative organisations to discuss matters of importance to the organisations.

Education (art. 24)**Question 19 (a)**

134. Norwegian teacher education is governed by framework regulations and national guidelines. Framework plans for primary and lower secondary school educations place emphasis on teachers being able to create inclusive and health-promoting teaching environments, to provide learning-promoting feedback and to adapt teaching to the needs and aptitudes of the pupils. They must have a knowledge of children and adolescents in difficult life situations and be able to recognise signs of bullying, violence and sexual abuse. Candidates must be able to swiftly take the necessary action and to establish a collaboration with the relevant professional bodies. Candidates must also have a knowledge of applicable legislation and the rights of children and adolescents. Candidates must be able to take action early, and ensure progression in a pupil's development.

135. Requirements regarding subject qualifications have been introduced for primary and secondary school teachers. Norway has an extensive further education programme. Programmes for special needs education and inclusion are now being developed. A specialisation in special needs education is to be offered from autumn 2019. Both central government (Statped) and local government (PPT) support systems have been established.

136. In autumn 2019 the Ministry of Education will submit a report to the Storting on early intervention and inclusive fellowship in kindergarten and school.

Question 19 (b)

137. Section 4-3 in the Act relating to universities and university colleges states that the board is responsible for ensuring that the learning environment at the institution, including the physical and mental working environment, is fully satisfactory on the basis of an overall assessment of considerations regarding the health, safety and welfare of the students. The design of the physical working environment shall as far as possible and reasonable, ensure that premises, access roads, sanitary facilities and technical installations are designed in such a way as to enable persons with disabilities to study at the institution. The institution shall, to the extent possible and reasonable, adapt study provisions for students with special needs. This adaptation must not result in a reduction of the academic requirements of the individual courses.

138. Students taking higher education may apply for housing through the Student Welfare Organisation. Minimum requirements are set with respect to universal design of student housing. In addition, substantial redesign is often carried out to improve the usability of the housing for students with extensive needs. Students with disabilities occupy 65 of 3149 housing units with universal design. This is due to too few students applying for accommodated housing.

Question 19 (c)

139. According to the Education Act, education shall be adapted to the abilities and aptitudes of the individual pupil, and when necessary, the pupil is also entitled to special education. These rights, and the pupils' right to attend a school close to where they live, are particularly important to ensure inclusive learning environments.

140. Children and pupils with sign language as their first language, or who after an expert assessment have a need for instruction in sign language, are entitled to such instruction. A similar right exists to necessary instruction in braille and in the use of necessary technical aids for severely visually impaired and blind children and pupils. Children and adolescents who partly or wholly lack functional speech and have a need for alternative and supplementary communication have the right to appropriate forms of communication and necessary means of communication in their learning.

141. All pupils have a right by law to a workplace that is adapted to their needs. Schools must be built and fitted out so as to take account of pupils with disabilities.

Health (art. 25)

Question 20 (a)

142. Reference is made to the response to question 11.

Question 20 (b)

143. Patients and users have the right to receive information on their health condition and treatment in a language they understand. The right follows indirectly from legal provisions regulating patient and users' rights to receive information and to be heard. Correspondingly, the personnel providing health and care services have a duty to provide the patients and users with information in a language they understand. This duty may also follow from the general but fundamental obligation for personnel providing health and care services to provide services in accordance with the general but fundamental principle of reliability.

Question 20 (c)

144. Health personnel acquire knowledge and competence through education and in working life. The current curricula for health and care personnel include several learning criteria linked to the rights of persons with disabilities, including topics such as human rights, body integrity, autonomy, respect and sexuality.

145. In recent years, steps have been taken in the health regions and hospitals to raise awareness and enhance competence among health personnel on the rights of persons with mental illness, stressing that voluntary treatment is always the main rule regardless of the illness (somatic or mental) in question, and that coercive measures may only be applied as an absolute last and temporary resort when no other alternative is available.

Question 20 (d)

146. According to the Health and Care Services Act, municipalities are responsible for providing primary health and care services to persons in the municipality in question.

147. The Directorate of Health develops guidance material for health personnel working with persons with intellectual disabilities. The annual state budget finances measures aimed at strengthening competence in the health and care services with respect to persons with intellectual disabilities. The Ministry of Health and Care Services issued white papers in 2013, 2015 and 2018 concerning the needs of people with disabilities.

Habilitation and rehabilitation (art. 26)

Question 21 (a)

148. The coordinating units are an important tool for planning and organizing habilitation and rehabilitation for persons with disabilities. National regulations and guidelines provide the justification for and the description of their work. A success factor in many communities has been organizing the coordinating unit together with, or close to, the office that allocates health services to patients. Educating individual patient coordinators is also a central part of the coordinating unit's tasks.

Question 21 (b)

149. Patients who are in need of coordinated health services over a prolonged period of time have a right to their own individual (rehabilitation) plan, which describes the patient's individual goals, the responsibility of each profession and health care provider in the multi-disciplinary team, and the time frame involved in obtaining the assistance necessary for achieving these goals. The plan should show a holistic approach, integrating plans for different health care disciplines, service levels and sectors. There might be some (undesirable) variety in how these individual plans are formed, and how they ensure the time frames. Much emphasis is now placed on setting up national standardized patient pathways in Norway, and these might work well in combination with individual rehabilitation plans in the future in further ensuring that timeframes are documented and are in compliance with the national recommendations. There are several applicable sanctions for non-compliance. Patients can complain to the Ombudsman or the county medical officer if they do not receive the health services they are entitled to.

Question 21 (c)

150. The Equality and Anti-Discrimination Act prohibits discrimination on the grounds of disability, and the ban also applies if a person is discriminated against as a result of their close association with a person with a disability. The basis for discrimination "care responsibilities" in the Act comprises care responsibilities for next of kin. The crucial point is that the person who is the recipient of the care has a need for care, typically because of illness or a disability, and that the person who maintains that he or she is discriminated against has a responsibility for or actually provides nursing and care to this person.

151. In order to prevent discrimination in working life, employers have a duty to be proactive, which includes making accommodations for and ensuring the possibility of combining work and family life.

152. Persons who have provided support and protection to relatives with disabilities for extended periods of time and want to return to the open labour market can use NAV's services in the same way as others. NAV can give advice and guidance in job-seeking, and can provide labour market programmes in order for individuals to obtain employment.

153. The Norwegian Directorate of Health has published guidelines on how to support family members and other dependents of patients who receive health care services. Dependents are entitled to financial compensation if their care-giving responsibilities take extensive time and resources.

Work and employment (art. 27)**Question 22 (a)**

154. Under the Equality and Anti-Discrimination Act, discrimination is prohibited and accommodation to individual needs is a requirement. The Act ensures special protection in employment relationships. Among other things, it is prohibited in employment processes to acquire information on an applicant's disability. There is also a duty to be proactive; see the response to 21 C. The Anti-Discrimination Tribunal deals with complaints about breaches of the rules mentioned above, with the exception of the employer's duty to be proactive. The tribunal may take decisions on orders to rectify, stop, and take other necessary action to ensure the cessation of discrimination. The tribunal may also reach decisions on compensation, and damages in straightforward cases.

Question 22 (b)

155. The Job Strategy for People with Disabilities was implemented in 2012, and has subsequently been extended and strengthened. The main target group is young people under the age of 30 with disabilities who need assistance in obtaining employment, including young people in the transitional phase between education or training and work. The measures in the strategy target all those with a need for assistance in getting into ordinary work. The type of assistance to be given is determined by NAV and the individual together. From 2019, the job strategy is phased into the National Inclusion Initiative. This is a

government initiative to help more of those outside working life to find employment. Persons with disabilities are an important target group.

156. The government wants the state to be at the forefront of this inclusion work, and has set a target that 5% of new government employees should be persons with a disability or gaps in their CV.

157. The Ministries of Labour and Social Services and Health and Care Services collaborated on the Follow-up Plan for Work and Mental Health for the period 2013–2016. The purpose of the plan was to include, prevent sickness absence and counteract exclusion of persons who face challenges because of mental health problems. The plan was concluded at the end of 2016 and the initiative has been continued within NAV's ordinary framework.

Question 22 (c)

158. The Labour Force Survey (LFS) is a quarterly questionnaire survey.

159. As at the second quarter of 2018, 16.8% of the population aged 20–66 (599 000 persons) reported a disability. Employment for this group was 44% t, compared with 74% for the population as a whole. Unemployment was about the same for both groups.

160. No data are currently available on the percentage of persons with disabilities in work who are immigrants, their place of residence or their type of disability. According to Statistics Norway, it is not statistically defensible to publish figures for such small groups on the basis of a sample survey such as the LFS. Very high drop-out figures and bias in the net sample are also problems with respect to immigrants in particular.

161. A task of the Directorate for Children, Youth and Family Affairs is to document the living conditions of people with disabilities. Their statistics pages present up-to-date knowledge and research. Against the backdrop of the CRPD, a collaboration has been initiated between Statistics Norway and the Directorate, with the goal of establishing official living condition statistics for persons with disabilities based on information from different registers. The aim is to publish official statistics on this area annually from 2020 onwards. Register-based statistics will help to provide more and detailed data on the various groups by linking up the different registers. It will then be possible to see employment, for example, in association with immigrant background, income, education and place of residence etc. provided privacy considerations permit.

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

Question 23 (a)

162. We do not have any figures on the expected lifetime income of this group. Persons who become disabled before the age of 26, and who are covered by the special regulatory framework for "young disabled" are assured of a higher minimum benefit than persons not covered by this regulatory framework.

163. About 64% of those aged 18–62 on disability pensions do not have pensionable income in addition to their national insurance benefits. The average income in 2017 for persons aged 18–62 who do not have a pensionable income in addition to benefits was NOK 149 600.

Question 23 (b)

164. We do not have any figures on the expected life income of this group. Disability pension is meted out in proportion to previous income up to six times the basic amount in the National Insurance Scheme (currently 6 x NOK 96 883 = NOK 581 298). The number of persons aged 45 years or over on disability pensions with upwardly revised income prior to disability of over NOK 700 000 as at 31 December 2017 was 13 800. In 2017 about 400 persons aged 45 or over on disability pensions had an income of over NOK 700 000.

Participation in political and public life (art. 29)**Question 24**

165. Under the Equality and Anti-Discrimination Act, municipalities have a duty to ensure that polling stations are universally designed. Only if municipalities consider the burden of making the necessary accommodation disproportionately great can they deviate from this duty. The Election Act also sets the requirement that municipalities must use polling stations that are suitable and accessible. Municipalities using polling stations that do not have universal design must undertake to arrange for voters to be able to vote outside the polling station.

166. One of the main goals of the Directorate of Elections is to ensure that polling is accessible. Municipalities receive guidance on the importance of accessible polling stations, and of their duty to use premises, equipment and materials that are adapted to voters of all ages and with different functional abilities.

167. The Ministry of Local Government and Modernisation has collaborated with various user groups on developing universally designed polling equipment that the municipalities can order.

Question 25

168. A special Motivation Campaign targets local political parties and lists. It provides information on the importance of placing women high on voting lists, and on the parties giving equal priority to women and men by giving the same number of additional votes to women and men.

169. Reference is also made to the response to question 1b about municipal councils and involvement.

Participation in cultural life, recreation, leisure and sport (art. 30)**Question 26 (a)**

170. In order to qualify for state subsidies for new buildings and rehabilitation of existing facilities, facilities for cultural activities and for sports and physical activities are required to have universal design.

171. The allocation letter to the Norwegian Olympic and Paralympic Committee and Confederation of Sports (NIF) contains guidelines requiring that NIF pave the way for activities for persons with disabilities. Subsidies are granted for equipment for persons with disabilities.

172. Audiovisual works that receive certain grants from the Norwegian Film Institute must be subtitled. If distributed in Norwegian cinemas, audio description is required in addition to subtitling.

Question 26 (b)

173. A proposition will be submitted to the Storting concerning consent to accession to the Marrakech Treaty in 2019.

C. Specific obligations (arts. 31–33)**Statistics and data collection (art. 31)****Question 27**

174. Norway is working on several fronts with statistics and data on the living conditions of persons with disabilities. Statistics Norway's sample surveys are largely in line with EU standards for sample surveys. With respect to disability, the surveys adhere largely, but not fully, to the Washington Group's standard questions. In Norway we have a more relational

understanding of disability, which is also reflected in the manner of questioning in sample surveys.

Question 28

175. The Directorate for Children, Youth and Family Affairs has the important task of initiating and ordering research in the field of disabilities. The Directorate also has an important part to play in ensuring that other sector authorities include disabilities and universal design in their analyses and research assignments.

International cooperation (art. 32)

Question 29 (a)

176. Norway's international support to education is now complemented by a distinctive Inclusive Education Initiative to create awareness and build capacity to reach pupils with special needs. Norway's support to multilateral health programs has a strong focus on discrimination against women and girls with disabilities. It applies a strong SRHR focus to combat the high prevalence of sexual violence.

177. Annual disbursements to projects specifically targeting persons with disabilities and their living conditions total around NOK 120 – 135 million. DPOs, among others the Atlas Alliance, receive around half of this, thus ensuring broad involvement of persons with disabilities in the design and implementation of international cooperation initiatives.

178. Applicants to the civil society grant scheme are required to provide information about the inclusion of persons with disabilities, and later report on results for this target group. Data are expected to improve significantly when Norway starts to apply the OECD/DAC marker on disability inclusion.

Question 29 (b)

179. Human rights is an obligatory cross cutting issue in all our development policy. A manual with guidance on result and risk management, including cross cutting issues, was developed in 2017. The guide sets out minimum requirements and includes examples on how to apply and understand human rights as a cross-cutting issue. Particular attention is given to disability in relation to non-discrimination.

180. Projects that include disability aspects are growing in number, from 33 in 2012 to 82 in 2016 (and possibly more). The share of Norwegian aid that has mainstreamed disability grew from 2.5% in 2013 to 7% in 2014 and has remained at that level.

National implementation and monitoring (art. 33)

Question 30 (a)

181. The Ministry of Children and Equality is responsible for coordinating the implementation of the convention at national level. The Directorate for Children, Youth and Family Affairs has drawn up a proposal for a project plan for improving implementation of the CRPD in municipalities.

Question 30 (b)

182. The government provides financial support for alternative reports from civil society. Travel subsidies are also given to civil society in connection with the dialogue meeting with the CRPD Committee. See also 1B.

Question 30 (c)

183. The Equality and Anti-Discrimination Ombud has a mandate to monitor that Norwegian law and administrative practice are in accordance with the CRPD (Article 33 (2)).

184. In some cases, the Ombud contacts local and/or central authorities about breaches of the anti-discrimination legislation in light of communications from individuals who feel discriminated against or of media items associated with individuals. In such cases the Ombud also refers to the CRPD. The Ombud may bring cases about breaches of the Equality and Anti-Discrimination Act before the Anti-Discrimination Tribunal, but has no power itself to impose sanctions for breach of the Convention.

185. Apart from the fact that monitoring of the implementation of the Convention can be said to form a part of the Ombud's general mandate, the Ombud also has responsibilities that are more purely supervisory responsibilities, and reports to the CRPD Committee. In recent years the Ombud has also prepared several national reports on the CRPD and coercion in psychiatry, universal design of schools, the right to information, goods and services and conditions in prison for persons with disabilities. The Ombud refers to the CRPD in responses to government hearings, and uses media actively to make the authorities and people generally aware of topics that are problematic in relation to the Convention.

186. In 2018, the Ombud started a project that entailed reviewing a random selection of cases about the use of coercion against persons with disabilities. The purpose of the project is to see whether the rules on the CRPD are observed in law and practice.

187. The Ombud has a good dialogue with civil society. Amongst other things, the Ombud has its own user committee for collaboration and exchange of experience with interest groups and voluntary organisations.
