



**Convention on the Rights
of Persons with Disabilities**

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Committee on the Rights of Persons with Disabilities

**Initial report submitted by Israel under article 35
of the Convention, due in 2014***


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Introduction

1. The State of Israel (SOI) is honoured to submit its Initial Report concerning the implementation of the Convention on the Rights of Persons with Disabilities (PWD) (the “Convention”). This Report provides comprehensive information on the measures Israel has taken to implement its provisions.
2. The SOI fully adheres to the Convention and is committed to its obligations thereunder. The SOI signed the Convention on 30 March 2007 and ratified it on 28 September 2012.

Preparation and structure of the Report

3. This Report has been prepared in accordance with the Committee’s *Guidelines on treaty-specific document to be submitted by states parties under Article 35*, paragraph 1, of the Convention and the *Harmonized Guidelines on reporting under the International Human Rights Treaties*, including guidelines on a Common Core document and treaty-specific targeted documents.
4. This Report includes information concerning the implementation of the Convention in Israel and explains Israel’s policies, programs, and laws related to the rights of PWD. Annexed to this Report are relevant statistics titled Annex I.
5. Since the courts in Israel, especially the Supreme Court sitting as the High Court of Justice (HCJ), play a central role in the promotion of human rights and equality, as well as PWD rights (as further elaborated in Israel’s Core Document (HRI/CORE/ISR/2008) paras. 80–85 and its update (HRI/CORE/ISR/2015) paras. 70–85), annexed to this report is a Case Law Annex titled Annex II, which also includes additional information.
6. The Report is the product of extensive internal consultations and efforts. All relevant Government Ministries (GM) and bodies were requested to provide data and information concerning their respective fields of responsibility.
7. The compilation of this report, together with compilation of the relevant information and data, was performed by the Office of the Deputy Attorney General (International Law) at the Ministry of Justice (MOJ), in close cooperation with the Commission for Equal Rights of PWD (hereinafter: the “Commission”) at the MOJ.

Consultation with non-government organizations (NGOs)

8. Israel acknowledges the key role played by NGOs in the development and implementation of the Convention. NGOs were invited to submit comments prior to the compilation of the Report, both by way of direct contact with them and by way of a general invitation to submit comments posted on the MOJ’s website. Due consideration was given to the responses of the NGOs.
9. Israeli NGOs, particularly “Bizchut” – The Israel Human Rights Center for PWD and Beit Issie Shapiro-have established a forum of disability representatives for monitoring the Convention. Representatives of the MOJ have engaged in dialogue with this forum and discussed various issues relating to the Convention. The ultimate goal of these discussions is to enhance the cooperation between the parties in order to implement the Convention in Israel in the best possible manner.
10. Additional consultations regarding the Convention have been held with the Commission’s Advisory Board (see Articles 1–4).
11. Following the completion of an initial draft report to CRPD by Israel, a round table with various civil society organizations took place, as part of a joint project which aims to improve cooperation between State authorities and civil society organizations, specifically relating to the reporting process to the UN Human Rights Treaty Bodies. This joint project was initiated by the Minerva Center for Human Rights at the Hebrew University of

Jerusalem's Faculty of Law. Furthermore, civil society organizations were invited to comment on this draft report prior to its submission. The civil society's comments were transferred to the relevant Ministries response, and were given due consideration.

Israel's reservation to the Convention

12. Israel has submitted the following reservation to Article 23(1) of the Convention: "The State of Israel expresses its reservation with regard to the provisions concerning marriage in Article 23(1)(a) of the Convention, to the extent that the laws on personal status, which are binding on the various religious communities in Israel, do not conform with these provisions".

General provisions of the Convention

Articles 1–4

Number of PWD in Israel

13. According to statistical data from 2017 (pending publication) by the Commission, and Myers-Jewish Joint Distribution Committee (JDC) – Brookdale Institute, based on Central Bureau of Statistics data of 2015 and other sources, there are 1,411,100 PWD in Israel, who constitute 17% of the overall population. 21% of the adult population (age 20+) are PWD and 9% of the adult population have severe disabilities. 15% of the working age (18–64) population – 703,700 individuals – are PWD and they account for 50% of all PWD.

14. According to this data, 9% of the children in Israel (birth to age 17) are PWD (246,300 individuals) while 58% of persons above 65 are PWD (488,400 individuals). 27% of women and 23% of men have disabilities. It has been estimated that 47% of PWD have more than one disability. For Further statistical information, see Annex I.

Legislative measures

15. The fundamental principles concerning the rights of PWD are enshrined in the Equal Rights for Persons with Disabilities Law 5758-1998 (the "Equal Rights Law").¹

16. Sections 1 and 4 of the Law state that Israel's commitment to the rights of PWD is based on the recognition of the principle of equality, the principle of human dignity, and the rights of PWD to reach decisions concerning their lives based on their preferences and desires.

17. The self-stated objective of the Law, as set out in Section 2, is to protect the dignity and freedom of PWD, promote the rights of PWD to participate equally and actively in society in all the major spheres of life, and, furthermore, to provide an appropriate response to their special needs, in such a way as to enable them to live with maximum independence, in privacy and in dignity, realizing their full potential. In addition to general provisions, the Equal Rights Law contains operative provisions prohibiting disability discrimination in relation to employment and public services and places. The Law further stipulates that workplaces and public services and places must be made accessible to PWD.

18. The two principle sources of legislation mandating accessibility to public places and services are the relevant provisions of the Equal Rights Law itself and the *Planning and Building Law 5725-1965*, as amended by the Equal Rights Law. Pursuant to these two laws, detailed sets of Regulations have been promulgated requiring a wide range of accessibility adjustments.

¹ See Full Text of the Law updated to 19 November, 2012 in the following link: <http://www.justice.gov.il/En/Units/CommissionEqualRightsPersonsDisabilities/Equal-Rights-For-Persons-With-Disabilities-Law/Pages/Equal-Rights-For-Persons-With-Disabilities-Law.aspx>.

19. The Regulations prescribe detailed and practical steps required to ensure accessibility, a stage-by-stage timeframe for making public places accessible, and provisions as to the implementation of accessibility on the technical level-including references to Israeli standards.

20. The Accessibility Regulations relate to a wide variety of places and services. Regulations that concern places relate to the accessibility of buildings (including public buildings, new residential buildings, existing schools, health services and emergency shelters) as well as to the accessibility of places other than buildings such as infrastructure, open places, public transportation, etc. Several Accessibility Regulations address the issue of accessibility of services, such as: public services, higher education, professional training, insurance, and communications. As of January, 2017, there is a body of 21 detailed Accessibility Regulations that have been published in official records. Additionally, there are approximately 13 sets of Accessibility Regulations currently in various stages of the statutory process.

21. In addition to the *Equal Rights Law* and Regulations under the Law, there are also provisions concerning the rights of PWD within specific pieces of legislation governing health, education, and social services. Prior to ratifying the Convention, Israel reviewed this legislation for consistency with the Convention and reached the conclusion that it is consistent with the provisions of the Convention.

Definitions of disability in Israel

22. There are several legislative definitions of disability in Israel. The leading definition in the *Equal Rights Law* is intentionally broad: “person with disabilities” is defined in Section 5 as a “person with a permanent or temporary physical, mental or intellectual including a cognitive-impairment, due to which her/his functioning is substantively restricted in one or more major spheres of life”. The *Equal Rights Law* explicitly encompasses both permanent and temporary disabilities thereby widening the CRPD definition of “long-term” disabilities.

23. Regarding appropriate representation in public bodies of over 100 employees, pursuant to a recent Amendment in 2016, the Equal Rights Law defines the term “person with a significant disability” such that it includes various groups of persons recognized by GM as PWD.

24. Disability definitions also vary according to specific legislative contexts, such as qualifications for social security, provisions of special assistance in education, etc. For example: the National Insurance Institute Law 5755-1995 and the Persons with Disabilities (Allowance and Rehabilitation) Law 5719-1959, define degrees of disability and methods of evaluation, the Welfare (Treatment for Persons with Intellectual-Developmental Disabilities) Law 5729-1969, provides a definition of “Intellectual-Developmental Disabilities”; the Rehabilitative Day-Care Centres Law 5761-2000, defines an infant with disabilities; The Investigation and Testimony Procedures (Adjustments for Persons with Mental or Intellectual Disabilities) Law 5766-2005, defines persons with mental or intellectual disabilities; The Treatment for Persons with Mental Disabilities Law 5751-1991, also deals with mental disabilities.

25. Services provided for PWD are varied according to the type of disability and the legislation governing the specific circumstances. In general, services for persons with physical disabilities, persons who are visually impaired and persons who are deaf or hard of hearing are provided according to internal procedures of the Ministry of Labor, Social Affairs and Social Services (MOLSASS).

26. Currently the MOLSASS is establishing a new Administration aimed to provide adjusted and effective services to PWD in the Ministry, whilst merging three existing units which provide services to persons on the autistic spectrum, persons with intellectual-developmental disabilities and persons with physical and sensory disabilities into one.

The Commission for equal rights of PWD

27. In order to promote the implementation of the *Equal Rights Law*, and pursuant to Article 33 of the Convention calling for the designation of one or more focal points within government for the promoting and monitoring of the Convention, the Israeli Government (IG) designated the Commission as the entity responsible for incorporating and supervising the implementation of the Convention. The Commission was established according to the *Equal Rights Law* within the MOJ as a national body dedicated to ensuring and advancing the equal rights of all PWD. The Commission was founded in 2000, and is charged with promoting and enforcing the *Equal Rights Law*, as well as other laws that concern PWD, in order to promote equality and abolish discrimination, to promote inclusion and active participation of PWD in Israeli society.

28. The Commission is a separate body within the MOJ, it has a separate budget, offices and personnel. The Commission has three regional branches – in Jerusalem, Tel Aviv – Jaffa and Haifa.

29. The Commission provides information and legal advice, works to raise awareness, issues guidelines, promotes legislation and policy changes, performs inspections, collects data and organizes courses, professional training and lectures regarding the rights of PWD. In addition, and as a vital component of its operations, the Commission exercises its statutory enforcement powers. Thus, the Commission files lawsuits demanding non-discrimination and accessibility in relation to employment, public places and services; and the Commission also has specific authority to inspect the accessibility of public places and services and issue accessibility orders accordingly, as outlined below.

30. The Commission also has the role of receiving complaints addressing discrimination under the Law, and seeking to resolve them. Following complaints, civil and criminal proceedings can be filed by the Commission to the relevant courts. The Commission also submits position papers in various on-going court cases. Proceedings can result in a range of remedies, including compensation to the complainant payable by the discriminating party.

31. According to the *Equal Rights Law*, any person with disabilities who feels she/he was discriminated against is entitled to file a lawsuit regarding discrimination. Such a person may also be represented by NGOs working for the promotion of rights of PWD. In addition to the availability of individual lawsuits, a person with disabilities, the Commission, or an organization may file a class action lawsuit over violations of accessibility obligations.

32. The Commission operates on an annual budget of 12,000,000 NIS (3,288,572 USD). Other Government budgets dedicated for the advancement of PWD are allocated to various issues and programs, as detailed throughout the report.

Ongoing consultation with PWD

33. PWD, and in particular Disabled Persons Organizations (DPOs), are continuously involved in the decision-making process regarding public life in Israel. Concerned individuals and organizations have participated in relevant legislative and policy framework developments. For example, PWD initiated and played an active role in the drafting and enactment of the *Equal Rights Law*. This is reflected in the Law, which requires that the relevant authorities consult with organizations working on rights of PWD when drafting the many Regulations concerning accessibility, such as the *Equal Rights for Persons with Disabilities (Service Accessibility Adjustments) Regulations 5773-2013* (the “*Service Accessibility Regulations*”). These consultations are fully complied with during the on-going implementation process of the Law and Regulations.

34. Section 26 of the *Equal Rights Law* creates a mechanism that guarantees consultation with PWD and their organizations, through the Commission’s Advisory Committee. The Law requires that most of the members of the Advisory Committee be PWD, and currently 61% of the members are PWD. The Advisory Committee is appointed once in three years. At present, its 18 members comprise of representatives from NGOs or advocacy groups, academic experts, legal experts, and public representatives. As part of the

implementation process of the Convention in Israel, numerous meetings have been held by the Advisory Committee in order to identify the main issues to focus on, as well as the general strategy that should be adopted, to best implement the Convention.

Specific rights

Article 5 Equality and non-discrimination

General

35. Equality has been established as a fundamental principle in the Israeli legal system through legislation and extensive case law. The HCJ plays a leading role in the promotion of the principle of equality through the development of jurisprudence when interpreting the *Basic Law: Human Dignity and Liberty*. For further elaboration on the principle of equality, see Israel's Core Document (HRI/CORE/ISR/2008) and its update (HRI/CORE/ISR/2015).

36. The Equal Rights Law addresses the issue of equality and non-discrimination both in its general provisions and operational provisions in the fields of employment, the provision and operation of public places and services and the supply of products.

37. In terms of its general provisions, as mentioned above, Section 1 of the Equal Rights Law states that Israel's commitment to the rights of PWD is based, inter alia, on the recognition of the principle of equality; and one of the self-stated objectives of the Law, under Section 2, is to promote the right of PWD to participate equally and actively in society in all the major spheres of life. In addition, Section 3 of the Law deals with affirmative action and stipulates that an act intended to correct past or present discrimination against PWD, or intended to advance the equality of PWD, shall not be deemed prohibited discrimination.

38. The Equal Rights Law contains the following operational provisions on equality and non-discrimination:

(a) Section 19F addresses discrimination in relation to the provision of public services, the operation of public places and the supply of products: anyone in the business of providing a public service, operating a public place, or supplying a product is prohibited from discrimination on the basis of disability by refusing to facilitate access by PWD to a public place or part thereof, to provide them with a public service or product, or to enable them to use or enjoy a public service. Two further prohibitions are included in Section 19F:

- (i) Setting irrelevant conditions which, directly or indirectly, restrict the use of a public place or service, benefit from a public service or the supply of a product;
- (ii) The provision of a public service and the supply of a product on terms which are inferior to the terms on which the service is provided or the product is supplied.

(b) Based on the principle that inaccessible environments form barriers denying PWD full social participation and inclusion, the Equal Rights Law also deals with the issue of accessibility separately from that of non-discrimination. PWD are entitled to accessibility to all public places and public services and to public transportation. For further elaboration on this matter, see Article 9;

(c) With regard to employment, the Equal Rights Law both prohibits discrimination on the basis of disability in relation to the various stages of the employment process (including hiring, working conditions, promotion and dismissal) and requires affirmative action on the part of employers. The prohibition on discrimination in the field of employment also includes failure to make reasonable adjustments. For further elaboration on equality in employment, see Article 27.

Discrimination of PWD in insurance contracts

39. The provisions of the *Equal Rights Law* (Chapter 5A, Mark H) aim to ensure that PWD shall not be discriminated against in relation to insurance contracts. Section 19II of

the *Equal Rights Law* stipulates that different treatment in insurance contracts shall not constitute discrimination, if it is based on credible actuarial or statistical data, medical information and other information relevant to the assessment of a certain insurance risk, and if such treatment is reasonable under the circumstances.

40. Furthermore, the *Equal Rights Law* sets out the obligation of an insurer who decides to treat a person differently or refuse to insure her/him, to give her/him a reasoned written notice, a short abstract of the data used by the insurer in reaching her/his decision, and a précis of the information used. That person must also be informed that the burden of proof that refusal of insurance or different treatment is based upon, including credible and relevant data, is upon the insurer.

41. Additionally, the insurer is obligated to inform the person of her/his rights to submit a complaint to the insurance regulatory body, the Commissioner of Capital Markets, Insurance and Savings, or to bring an action before the courts. If a person filed a complaint to the Commissioner and the Commissioner did not respond within 90 days, she/he can file a complaint to the special Complaints Committee established in 2005 (as described below).

42. According to Section 19II of the *Equal Rights Law*, the Minister of Justice has appointed a Complaints Committee headed by a judge and including an actuary selected from a list of actuaries recommended by the Minister of Finance, and a medical expert specialized in disabilities, selected from a list of experts prepared by the Minister of Justice. This Committee reviews complaints of PWD who were denied insurance or whose insurance was limited by terms, by the insurance companies and determines whether such refusal complies with the provisions of the Law. A person can appeal the decision of the Complaints Committee to the District Court.

43. Since its establishment, two complaints have been dealt with by the Complaints Committee: in one the insurance company informed during deliberations that it would agree to insure the complainant, in the other the complainant withdrew the complaint during the deliberations.

44. A court may award compensation without proof of actual damage to a person with disabilities whose rights according to Mark H were violated. Specifically, a violation to inform a person on a refusal to insure her/him according to the Law, can lead to a fine of up to 14,400 NIS (3,769 USD).

Article 8

Awareness raising

General

45. The Government of Israel (GOI) has taken measures in order to change the public attitude towards PWD and to raise awareness of their equal rights.

46. The Commission considers awareness-raising to be one of its main priorities. The Commission's vision is to promote equal rights for PWD not only through the use of legal tools but also through social tools such as social media, campaigns, training seminars etc. The Commission's activities towards this end include, inter alia: increasing awareness through the Israeli media, maintaining an annual public awareness-raising campaigns, conducting awareness-raising activities, lectures and seminars including for the Arab population and at schools, and organizing courses and lectures regarding the Convention's implementation. For further information, see part 2 of Annex II.

47. Various NGOs, such as Access Israel and Beit Issie Shapiro, are partially supported by State funds, and also organize conferences and projects aimed at awareness-raising.

48. According to Government Resolution (GR) No. 1073 (2003), there is an Equality Officer appointed in each Government Ministry who is responsible for promoting accessibility and inclusion of the Ministry towards employees with disabilities and PWD using the services of the Ministry. Some of these Equality Officers organize further activities within the Ministries.

49. The Service Accessibility Regulations require every public or private organization providing services to the general public to train its employees who provide such services about the rights of PWD and the provision of accessible services. This training at times includes simulations and meetings with PWD. The implementation of these Regulations enhances not only accessibility but also equality, and serves to raise awareness and reduce prejudice. Every service provider who employs more than 25 persons has to appoint an Accessibility Officer to promote implementation of accessibility.

50. Furthermore, Israel's main national television channels often broadcast interviews, news broadcasts, and documentary programs about or containing awareness-raising messages on the rights of PWD. Israeli mainstream radio (both national and local stations) also deals with the rights of PWD through talk-shows and other relevant broadcastings, either specifically focused on such topics or incidentally broadcasting about them. There are also several Arabic speaking radio stations benefitting the Arab population in Israel, which deals with these issues.

Raising the awareness of elderly PWD

51. The Ministry for Social Equality also operates to raise awareness of the rights of the elderly PWD by operating a special call-center for this purpose. For further information, see part 2 of Annex II.

Article 9 Accessibility

Legislation on accessibility

52. Recognizing that inaccessible environments form barriers denying PWD full social participation and inclusion, Section 19B of the Equal Rights Law enshrines the right of PWD to accessibility to all public places and public services. In addition, the Law forbids discrimination against a person in such places and services due to her/his disability as stated above.

53. In 2005, a specific detailed chapter mandating accessibility of public places and services as a basic right was added to the Equal Rights Law. This new chapter complemented and extended several pieces of accessibility legislation which existed prior to its enactment, such as the Planning and Building Law and the Local Authorities (Provisions for Persons with Disabilities) Law 5748-1988, which included provisions on the accessibility of new public buildings and sidewalks.

54. According to the *Equal Rights Law*, a wide range of places and services have to be made accessible, including public transportation, public buildings, commercial areas, public institutions, schools, medical offices, higher education institutions, employment centers, recreational facilities, hotels, tourism facilities, cultural amenities, religious institutions, financial institutions and services, nature spots, sidewalks and junctions, foot bridges, public parks, emergency services, the common areas of residential apartment buildings, etc. The Law applies to public places and services operated by the State and other public authorities, as well as those operated by the private sector.

55. Places and services are to be made accessible by accommodating various types of disabilities. Examples of adjustments include elevators for mobility-impaired persons, adjusting counter heights for persons in a wheelchair; braille and accessible signage for visually impaired persons; recorded texts in order to provide information to visually impaired persons or persons with learning disabilities and guiding persons with mental and psychiatric disabilities in the use of public services and accessibility, etc.

56. The *Equal Rights Law* applies to existing public buildings. New construction and new extensions made to existing public buildings and some existing residential buildings are covered by the accessibility provisions in the *Planning and Building Law*. However, the provisions applying to new construction are more wide-ranging, given the substantial difference in cost between retrofitting existing buildings and planning a new construction so that it will be accessible.

Certain exemptions from making accessibility adjustments

57. The *Equal Rights Law* aims to balance the rights to equality and human dignity for PWD with the property rights of persons and bodies operating and/or providing public places and services. The Law does this by creating a series of important exceptions and exemptions from the obligation to make public places and services accessible. Thus, according to Section 19M of the Law, places and services which are to be made accessible are exempted from adjustments if they impose “an undue burden” as determined by a number of factors, including the financial capacity of the person or body concerned and the number of persons served by a particular public place or service.

58. As a general rule, however, public sector bodies are not exempt from adjustments in whole or in part on the grounds of “an undue burden”.

59. Other exceptions relate to situations in which the making of a particular adjustment is not technically feasible (based on the opinion of a Licenced Accessibility Expert under the Law), or is inconsistent with the special nature of the public place concerned, after taking into account historical or ecological considerations.

Gradual implementation of the accessibility regulations

60. Through a series of specific Regulations, the Law has been gradually applied to all accessibility issues relevant to the everyday lives of PWD. The process of implementing the accessibility requirements for most buildings and services is to be finalized by 2017 by the private sector, by 2018 by the Government, and by 2021 by local authorities. Intermediate benchmarks and exceptions were also defined. Some of the Regulations stipulate that the relevant Minister shall determine the timetable for the relevant bodies.

61. The following are the main Regulations which have already been published in official records:

(a) According to the Planning and Building Law and the Planning and Building (Permit Application, Terms and Fees) Regulations 5730-1970, a permit for the construction of a public building will be denied if it does not comply with Regulations concerning accessibility. It is required to consult a Licensed Accessibility Expert before applying for a permit;

(b) The Planning and Building (Permit Application, Terms and Fees) Regulations 5730-1970, regulates accessibility of new public buildings apply to all new public structures that are legally obligated to make public areas accessible, as well as apartment complexes containing six flats or more. The scope of these Regulations is extensive and sets out modifications, and accessibility adjustments for PWD. Moreover, these Regulations are applicable to different disabilities, including visual and hearing impairments, physical disabilities; etc.

(c) The Equal Rights for Persons with Disabilities (Arrangement of Accessibility to Public Transportation Services) Regulations 5763-2003, set forth the accessibility requirements for urban buses, bus stops, central facilities, trains, aircraft, ships, airports, and sea ports. These include, inter alia, accessible bus stops, accessible signage at stops and on the buses, audio announcements, etc. A 2016 Amendment to these Regulations addresses the accessibility of the light rail, special seats, rail stations; etc.;

(d) The Equal Rights for Persons with Disabilities (Site Accessibility Adjustments) Regulations 5768-2008, lay down the accessibility requirements for archaeological sites, national parks and nature reserves, as well as certain other areas, mainly forests. According to these Regulations, new sites may not be open for public use unless the accessibility requirements have been met. Existing sites must gradually meet the requirements by 2018;

(e) The Equal Rights for Persons with Disabilities (Access to Telecommunications Services and Telecommunications Facilities) Regulations 5769-2009, specify the properties of the communications equipment that communications companies must offer to their subscribers who are PWD and their obligations to maintain a call-center for transmission of messages via a telephone receptionist, to publish the accessibility

adjustments, and to report their implementation progress to the Ministry of Communications and the Commission;

(f) The Equal Rights for Persons with Disabilities (Accessibility Adjustments for a Public Place which is an Existing Building) Regulations 5772-2011, which entered into force in June 2012, stipulate that every public building in Israel be first surveyed with regard to its accessibility and then adjustments shall be carried out as required over a number of years. Due to the substantial costs involved in making existing public buildings accessible, long periods of gradual implementation are set out in the Regulations;

(g) The Equal Rights of Persons with Disabilities (Adjustments for Access to an Existing Educational Institution) Regulations 5771-2011, set out accessibility requirements for existing schools. For further information, see Article 24;

(h) The Equal Rights for Persons with Disabilities (Accessibility of Rental Vehicles and Buses) 5773-2012, set forth accessibility requirements for rented cars and for buses rented to groups;

(i) The Equal Rights for Persons with Disabilities (Accessibility Adjustments for a Public Place which is Not a Building) Regulations 5774-2013, set out specific accessibility requirements for open public places such as public gardens, cemeteries, beaches; etc.;

(j) The Service Accessibility Regulations define the obligations of service providers with regard to service accessibility. These Regulations pertain to the adjustments in the public place, information, guidelines and training of employees. This includes, for example, a requirement to provide Braille or large print forms and documents to those who request it, stock assistive listening devices at service counters, as well as modification of procedures, practices and accessibility of websites. These Regulations also set procedures for the training of personnel who provide services to the public, and management, who are required to undergo simulation of service provision, followed by discussions and meetings with PWD. These regulations also mandate gradual accessibility of websites. For further information, see Article 21;

(k) The Equal Rights for Persons with Disabilities (Accessibility Adjustments for Professional Training) Regulations 5775-2014, include accessibility provisions for training courses under the supervision of the MOLSASS. For further information, see Article 26;

(l) The Equal Rights to Persons with Disabilities (Reduced License Fee for Operating Accessible Taxis) Regulations 5774-2014, stipulate that the Ministry of Transportation and Road Safety (MOTRS) shall provide up to 1,000 operators of disability accessible taxis with a payment discount. For further information, see Article 20;

(m) The Civilian Defense (Specifications for Construction of Shelters) (Amendment) Regulations 5776-2016 and the Civilian Defense (Accessibility Adjustments in Shelters) Regulations 5776-2016, set forth accessibility requirements for the construction of bomb shelters and accessibility adjustments within such shelters. For further information, see Article 11;

(n) The Equal Rights of Persons with Disabilities (Accessibility Adjustments to Health Services and Places Providing These Services) Regulations 5776-2016, include provisions for physical accessibility adjustments required in existing health facilities, as well as health services accessibility adjustments;

(o) The Equal Rights of Persons with Disabilities (Accessibility Adjustments to Existing Public Places which are Institutions of Higher Education and for the Higher Education Services Provided) Regulations 5776-2016, which entered into force in November 2016, include provisions on physical accessibility adjustments required at higher education institutions and the services those institutions provide. These Regulations will be implemented gradually.

62. Other important Regulations concerning the accessibility of roads and sidewalks, accessibility of inter-city buses, accessibility of new educational institutions, service accessibility to health facilities, accessibility in cases of emergency etc. have yet to be finalized and are in the process of being promulgated.

Enforcement of the implementation of the accessibility regulations

Enforcement by the Commission, PWD, and disability-related NGOs

63. The *Equal Rights Law* sets forth detailed provisions concerning sanctioning, remedies, and enforcement.

Civil enforcement

64. Section 19YY of the *Equal Rights Law* stipulates that violations of Chapters E, E1 or the accessibility provisions of the *Planning and Building Law* constitute a civil tort.

65. PWD, disability related NGOs or the Commission may, by way of an individual or class action under the *Class Action Law 5766-2006*, file a civil claim with a view of making a public place or service accessible according to the Regulations.

66. The courts can rule the usual remedies, injunctions and/or damages, and can also rule punitive damages according to Section 19YY of the *Equal Rights Law*. Such compensation shall not exceed 61,175 NIS (16,014 USD), without proof of actual damage. The special exemption from the general requirement of proving damage is based on the legislature's recognition that failure to implement accessibility obligations a priori causes damage.

Administrative and criminal enforcement – on the part of the Commission

67. Section 19QQ of the *Equal Rights Law* stipulates that the Commissioner, or a person authorized by her/him, may issue an "accessibility order" obligating any entity to which the Law applies to make accessibility adjustments. Violation of the terms of an accessibility order is a criminal offence, punishable by court imposed fine, and where an "accessibility order" has been issued to a public or private corporation, or to a local authority or government entity, personal criminal liability may also be attached to persons holding executive positions in such bodies.

68. The Commission has a designated accessibility enforcement department which operates country-wide. Supervisors perform field surveys and send the responsible parties notices and accessibility orders. The supervisors are authorized to investigate, request documents, and inspect premises. They carry out over 1,000 inspections annually of the implementation of the different Regulations, and issue letters of warning to entities found not to be compliant with the accessibility requirements.

69. In most cases (approximately 90%), the situation is remedied following inspections and warnings, and accessibility adjustments are put in place. In about 10% of the cases, an accessibility order is issued and investigations are held when necessary. In 4–5 cases, indictments or civil suits were filed by the Commission against companies that did not comply with the order, and the issues were decided by the courts.

70. In addition, the Commission publishes professional guidelines explaining the accessibility requirements set out in Regulations. The main impact of this enforcement is twofold – the adoption of the legal requirements by the various bodies and improving accessibility on the ground all over Israel.

Additional enforcement mechanisms

71. Additional mechanisms and practices have been set in place in order to promote the implementation of the *Equal Rights Law*:

(a) Certification by Licensed Accessibility Experts as part of planning and licensing processes: Recognizing the significant potential of preventive measures, the Equal Rights Law subjects planning approval of new construction of a public place, extension of an existing public building, or licensing of a new business to the certification by a Licensed Accessibility Expert and compliance with accessibility obligations. A Licensed Accessibility Expert can be licensed for buildings, infrastructure and environment or for service accessibility. The license is granted by the MOLSASS to certain professionals who undergo specialized training in the field of accessibility. The following Regulations have

been enacted and approved for training Licensed Accessibility Experts: Equal Rights for Persons with Disabilities (Licensed Accessibility Experts for Buildings, Infrastructures and Environment) Regulations 5767-2007; Equal Rights for Persons with Disabilities (Licensed Accessibility Experts for Services) Regulations 5767-2007. Furthermore, study syllabuses and examinations have been developed; a director for training of Licensed Accessibility Experts has been appointed; a pedagogic supervisor has been appointed; academic institutions have been approved to conduct the training; and registrars have been appointed to maintain a registrar of Licensed Accessibility Experts:

(i) About four courses are held annually for the purpose of awarding licenses to Accessibility Experts and the MOLSASS holds periodic training courses for Licensed Accessibility Experts, as stipulated in the Regulations;

(ii) This process has greatly improved the supply of specialists in the field. Before the Law was enacted, only 20 Licensed Accessibility Experts were recognized. As of January 2016, there are 270 engineers and architects who are Licensed Buildings, Infrastructures and Environment Accessibility Experts, 162 practical engineers who are Licensed Buildings, Infrastructures and Environment Accessibility Experts, and 195 members of the Licensed Services Accessibility Experts special register.

(b) According to Section 19PP of the Equal Rights Law, a public service provider employing at least 25 persons is required to appoint one of its employees as an Accessibility Officer. The Accessibility Officer has a dual function – to advise the public as to the accessibility of the public service concerned and to advise the service provider of the relevant accessibility adjustments needed.

Implementation processes of the accessibility regulations

72. In order to promote the implementation of the accessibility provisions, in addition to inspection, the Commission initiates public campaigns, provides seminars and materials in print and on its website, and it is involved in the training of Licensed Accessibility Experts. The Commission also answers some 3,000 queries annually, provides legal and technical information, and is authorized to grant requests for exemptions on the basis of technical infeasibility and undue burden. The queries which indicate inaccessible public places or services are resolved either by negotiation or legal action.

73. GM have taken action to promote the implementation process of accessibility legislation. For additional information about activities taken by relevant GM in this regard, see part 2 of Annex II.

Standardization of accessibility

74. The Israeli Standards Institute is a statutory body responsible for determining standardization in various fields, including various standards in accessibility matters. These include professional and technical requirements such as for accessible parking space dimensions, requirements for accessible elevators, accessible signage, etc. The Israeli standards, as a rule, take into consideration international standards in the field, and in some cases adopt or reference international standardization (concerning website accessibility, for example).

75. The accessibility legislation (*The Equal Rights Law* and the *Planning and Building Law*) obligates the relevant Ministries to take these standards into account when enacting Regulations in this field, and most relevant Regulations include reference or adoption of such standards.

76. The adoption of standards regarding accessibility also encourages companies to develop suitable technologies by manufacturing or importing products that conform to the requirements of the standards. PWD and representatives from their organizations are among the members of the Expert Committees that prepare and approve the standards. Likewise, there is a process of receiving comments from the public.

Accessibility in Government procurement processes

77. Any action taken by the Government, including procurement is taken according to the *Service Accessibility Regulations*. The Government Procurement Administration, which is in charge of the publication of tenders for all Ministries, examines the accessibility adjustments required before the publication of each tender, and formulates the tender accordingly. The following government procurements have specified accessibility requirements: cellular phones and services, queue management technologies, and time clocks, as well as tenders of the Ministry of Health (MOH). With regard to accessibility of information, see Article 21.

Article 10 Right to life

78. The Basic Law: Human Dignity and Liberty provides basic guarantees of personal liberty of all persons, and stipulates, inter alia, that “There shall be no violation of the life, body or dignity of any person as such” and that “All persons are entitled to protection of their life, body and dignity”. The Basic Law applies equally to all persons, including PWD.

Article 11 Situation of risk and humanitarian emergencies

79. The Home Front Command within the Israel Defence Forces (IDF) is charged with the important task of preparing the public for emergency situations. The Home Front Command includes a special branch that deals with services for PWD in times of emergency.

80. One of the Home Front Command’s stated goals is to assist PWD and their families, caregivers, friends, neighbours, acquaintances and professionals to prepare properly and act according to the required procedures in cases of emergency. To that end, the Home Front Command has published specific instructions for PWD on its accessible website. The instructions are also contained in a widely distributed pamphlet. The instructions are in easy-to-read language, and the website features videos demonstrating PWD performing the instructions. The instructions on the website offer recommendations and specific instructions for persons with medical problems, persons who are deaf or hard of hearing, blind or visually impaired, persons with limited mobility and mentally disabled or autistic persons, as well as information on available governmental services.

81. Additional accessibility measures for emergency information is provided to the deaf and hard of hearing populations in Israel through a pager, distributed free of charge. The device receives written warnings during emergencies. In addition, a smartphone application was launched providing real time text messages. The Home Front hotline is also accessible via text messages.

82. During an emergency situation, ‘the Home Front Command’ collects data regarding the situation of PWD, receives calls and develops provisions for specific needs. This branch also works with other relevant GM and agencies such as the MOLSASS and other service providers. In addition, the IG and JDC Israel operate a joint pilot project in three cities in the south of Israel called ‘Communal Supporter in Emergency’. The project assists the MOLSASS in being better prepared to assist persons with special needs in cases of emergency by collecting door-to-door information about them and their individual needs.

83. On 27 June, 2016, the Civilian Defense (Specifications for Construction of Shelters) (Amendment) Regulations 5776-2016, and the *Civilian Defence (Accessibility Adjustments in Shelters) Regulations 5776-2016*, entered into force. The first set of Regulations stipulate that programs for building new shelters shall only be approved if they include accessibility adjustments for PWD, and that adjustments should be made in existing shelters in order to be accessible for PWD. The second set of Regulations include accessibility instructions for PWD, such as concerning the signage of the access path to the shelter and the shelter itself, the need to install accessible chemical toilets, and accessible showers.

84. Other Regulations on emergency situations are in the process of being promulgated.

Article 12

Equal recognition before the law

85. Following recent important legislation, as described below, a Family Matters Court now has three main alternatives regarding PWD, in cases where they have difficulties in decision making: to appoint a guardian, to consider appointing a person whose function is to support the decision-making of such person, and only in limited cases, the court is authorized to declare a person incapable of making her/his own decisions and appoint her/him a guardian, an option exercised in very few cases each year.

86. The Israeli courts also play an active and important role in the current shift of perception regarding the concept of guardianship in Israel. For further information, see part I of Annex II.

The Legal Capacity and Guardianship Law 5722-1962

87. The *Legal Capacity and Guardianship Law* states the principle that each person is entitled to full legal capacity. Section 1 of the Law stipulates that every person is competent to hold rights and obligations from birth until death. Section 2 stipulates that every person is competent to perform legal actions, unless her/his legal capacity was deprived or restricted according to the law or by a judgment of a court.

88. In cases in which PWD have difficulties in decision-making, the court is authorized to appoint them a guardian according to Section 33 of the *Legal Capacity and Guardianship Law*. The Law enables the appointment of a guardian to a person who, permanently or temporarily, is unable to look after all or any of her/his affairs, and there is no other person authorized and willing to do so on her/his behalf. A person that a guardian was appointed to, is not deprived of her/his legal capacity, and her/his legal action shall be considered valid, unless due to other reasons, such as the need for her/his informed consent to a specific action, the action is invalid or can be annulled.

89. In limited cases in which a person is incapable of making her/his own decisions and subsequently damage may occur to her/him or her/his property, a court is authorized to declare her/him legally incompetent under Section 8 of the *Legal Capacity and Guardianship Law*. Declaring a person legally incompetent is possible only in cases of mental or intellectual disability. The legal implications of declaring a person legally incompetent are distinct; however, a legally incompetent person is competent to hold rights and obligations, according to Section 1 of the Law. Since this procedure limits the legal capacity of the person, the State and the courts use this tool only in very rare circumstances. According to the State's database, in 2014, only six (6) persons were declared legally incompetent by the courts. In 2013, there were seven (7) such declarations. In 2012, five (5) persons were declared legally incompetent and added to the database. In 2011, there were eleven (11) persons found to be legally incompetent.

Amendment No. 18 to the Legal Capacity and Guardianship Law 5776-2016 and its implementation

90. Since the enactment of the *Legal Capacity and Guardianship Law* in 1962, vast changes in social perceptions towards persons that a guardian was appointed to have taken place, both in Israel and abroad. These changes in Israel were inspired, *inter alia*, by this Convention, which strengthens the prevailing approach today that emphasizes the uniqueness of each individual, the existences of a wide range of disabilities that should not be treated uniformly, the need to respect the will of each person to the utmost extent possible, and the importance of their participation in decisions that relate to them.

91. In order to introduce this modern approach and its underlying principles into the *Capacity and Guardianship Law*, a government bill was drafted in 2014. On 29 March, 2016, Amendment No. 18 to the *Legal Capacity and Guardianship Law* was passed in the Knesset. This Amendment enters into force in stages, with the last stage to take effect on

April 10, 2018. During the legislation process of this Amendment in the Knesset; DPOs, relevant NGOs and PWD participated in the deliberations in the Constitution, Law and Justice Committee, alongside GM, the Administrator General (AG), the Commission and the Legal Aid Administration (LAA) at the MOJ.

92. This Amendment anchors the modern approach, according to this Convention, and highlights the importance of including PWD, in cases in which they have difficulties making decisions, in the decision-making process on issues relating to them, as part of their independence and autonomy, without diminishing the obligation to protect them and to safeguard their interests where necessary. The Amendment is based on the following principles:

(a) The ‘necessity principle’ – a guardian should not be appointed for a person, unless there is a genuine necessity to protect that person’s rights and interests;

(b) The ‘least restrictive measure principle’ – no measures that limit the rights of the person or her/his freedom should be used if there is a less restrictive measure that fulfills the same purpose. As part of this principle, no guardian shall be appointed if it is possible to fulfill the purpose by using less restrictive measures. In cases where a guardian was appointed, her/his ability to make decisions regarding the person will be limited to matters which are necessary to protect the person’s current interests, and according to a court’s decision;

(c) The ‘best interest principle’ – it is the obligation of the guardian, the court or any other authority which can make decisions on behalf of the person, to make decisions which are in the best interest of the person and her/his rights. According to the Amendment the “will” of the person overcomes her/his “best interests”. However, when the guardian believes that the person might be harmed, her/his best interests overcome her/his will. This balance reflects the aspiration to respect the person, while acknowledging her/his vulnerability;

(d) The ‘self-determination principle’ – a person should have the right to make her/his own decisions, if possible, regarding her/his body, property and life, for as long as she/he is able to do so;

(e) The ‘participation principle’ – a guardian or any other authority that was appointed to assist the person, has to share all information with the person regarding her/his own matters, to consult with her/him when making the decisions and to take into consideration her/his wishes;

(f) Safeguarding the autonomy of the person and her/his involvement in society – the guardian should, as far as possible, act in a manner that shall allow the person to preserve her/his independence and autonomy as well as be involved in the person’s social life and protect her/his cultural and religious needs.

93. According to this Amendment, Section 33A of the Law states that a guardian shall not be appointed, unless there is a genuine necessity to protect the person’s best interests, and it is impossible to fulfill the purpose for which a guardian was appointed in a less restrictive alternative. When appointing a guardian, the court will specify in which matters the guardian has the authority to make decisions on behalf of the person: medical matters, personal matters or property matters. The court is obligated to minimize the matters which fall under the responsibility of the guardian, to those matters which are necessary for the person’s best interests. The court also should limit the period for which the guardian is appointed to the shortest possible period.

94. In order to implement the above mentioned principles, the Amendment establishes two significant alternatives to guardianship that emphasize the person’s will and her/his autonomy:

(a) “Enduring power of attorney” – the Amendment to *Legal Capacity and Guardianship Law* created a new legal institution of “enduring power of attorney”, according to which a person shall be allowed, while she/he is mentally competent, to appoint a representative who will be authorized to act on her/his behalf and make decisions for her/him, in the event that she/he loses the ability to understand, due to a mental or

intellectual impairment, without a need to petition to the courts. The power of attorney can be limited to specific matters, personal, medical or financial matters or all matters related to that person. In addition, prior instructions can be determined in the power of attorney as to the ways of action of the representative regarding medical, personal and property matters. The Law defines who can be appointed as a representative and her/his duties and authorities. In order to better protect the person from being exploited by her/his representative, the Law stipulates that the representative is not authorized to use her/his power of attorney for certain matters regarding the person she/he represents. The Law additionally stipulates certain actions that the representative is not authorized to do unless the action is specified in the power of attorney or unless the court authorized those actions in advance. These limitations were included in order to better protect the individuals who gave an enduring power of attorney interests. Moreover, the Law regulates a mechanism for filing complaints and for judicial intervention if necessary, which will enter into force in July 2017. The Law also allows an interim alternative if a person wishes to appoint a guardian (with all the supervision and the involvement of the court which apply to this appointment) and express her/his will in advance regarding the identity of the guardian and the guidelines she/he has to follow accordingly. The “Enduring power of attorney” mechanism entered into force on October 10, 2016;

(b) “Supporter of decision-making” – establishes a mechanism that allows the nomination of a person to support the decision-making of persons who have difficulties making decisions regarding their matters, but are able to make such decisions with assistance. The role of the supporter in decision-making is to assist such a person to make decisions according to her/his wishes, to obtain information, explain in the appropriate language the possible alternatives, to assist that person to realize her/his decisions and to exhaust her/his rights – not make the decisions for the person. The Law regulates this mechanism and defines who can be appointed as a supporter of decision-making, the necessary training, the responsibilities and duties of the supporter, the end date of the support, etc. The “Supporter of decision-making” mechanism will enter into force on April 10, 2018. According to the Amendment, the Minister of Justice is authorized to enact Regulations to implement this mechanism.

95. Furthermore, this Amendment encompasses other issues aimed at protecting the rights, dignity and autonomy of persons who have difficulties making decisions, such as: granting additional inspection powers to the inspectors of the AG at the MOJ in order to allow effective supervision; defining the person’s will as a guiding principle in her/his Guardian’ exercise of discretion; defining the rights of persons that a guardian was appointed to and the scope of the obligations ensuing from that relationship (such as: the right to receive information, right to independence, right to privacy); the right to be represented through a guardian by the LAA in some cases, the ability of a guardian of her/his relative to choose another guardian or guardianship corporation in her/his will, subject to the person’s best interest.

96. In Addition, the Amendment annuls the use of the term “ward” in the Law and in all other relevant laws, and replaces it with “a person that a guardian was appointed or could be appointed to her/him”. Although this is only a semantic modification, it represents the change in the State’s perception of persons that a guardian was appointed to, who are no longer defined by their legal capacity or disability.

97. GR No. 2394 (2017) establishes an inter-ministerial committee in order to conclude within a year, a multi-annual national program on guardianship and its alternatives, for the next ten years. The multi-annual national program should include the establishment and implementation of alternatives for guardianship, as well as recommendations on ways, goals and benchmarks for their implementation, and it is to be concluded after conducting consultations with DPOs, relevant NGOs and PWD. The inter-ministerial committee includes representatives of the following Ministries: MOJ, MOLSASS, MOH, MOF and Social Equality.

Guardians and the AG at the MOJ

98. The AG is responsible for the supervision of guardians in Israel, which are appointed pursuant to the orders issued by the Family Matters Courts, aided by the

recommendation of the welfare services at the MOLSASS and after receiving the position of the Attorney General's Office.

99. Until a few years ago, the AG supervised only guardians appointed by the courts for property matters. Recently, as part of a new approach which emphasizes the welfare of the persons that a guardian was appointed to, the AG expanded its supervision to personal and medical matters as well. In the first stage, the supervision is limited and is part of a pilot program in collaboration with the Brookdale Institute. After the pilot period ends, a decision will be made as to how to implement the supervision of guardians for personal and medical matters.

100. Additionally, as part of the new approach, the supervision of the AG had been expanded and focuses on whether or not the needs and preferences of the person that a guardian has been appointed to are fulfilled and whether or not the guardian acts in order to improve the person's welfare, including by conducting visits of the supervisors of the AG to these persons' homes.

101. In 2004, the AG published guidelines for guardians: guardians for personal and medical matters, guardians for property matters and guardians for all matters. According to these guidelines, guardians should ensure that they preserve the dignity of the person; act honestly, responsibly, with loyalty, consistently, and in good faith; listen to the person's opinion and consult with her/him as much as possible before making any decision; encourage her/his relationship with her/his family; encourage the person to make decisions by her/himself if possible, etc.

102. In March 2016, the AG together with the MOLSASS published working procedures for guardianship corporations that can be appointed as guardians by the courts. These guidelines are based on the principle of cooperation with the person that a guardian was appointed to in the decision-making process and increasing the focus on her/his will, empowerment and independence. As a rule, guardians are required to visit the person that they have been appointed to every week if the person is living in the community, and every two weeks if the person is in an institution. According to the working procedures, in large guardianship corporations there are persons who are responsible for conducting such visitations every week or two weeks, and they report to the case managers who are in charge of the treatment. These case managers are obligated to conduct visits at least every six months according to the guidelines, which will be increased to at least every three months at the end of 2017, once the guidelines will be fully in force. The AG also began working on a systematic structuring of the supervision of guardianship corporations. This is due to the fact that for many years, persons that a guardian was appointed to and who lack financial ability had to fund their guardians themselves, thus leaving them with low funds in order to cover their basic needs. Consequently, in January 2014, various GM initiated the joint funding of guardians for persons that a guardian was appointed to and who lacked the financial ability. In 2015, a Committee including representatives of the following Ministries: MOJ, MOLSASS, MOF and the Accountant General decided on the manner in which guardianship corporations will receive funds and during 2016 the funds began to be transferred. The committee also issued an instruction that corporations and other guardians that are responsible for a large number of persons, are not allowed to receive fees from persons lacking the financial ability, as long as their fees are paid by the State.

103. For data relating to the appointment of guardians in recent years, see Annex I.

Legal representation in cases of legal capacity

104. Prior to the Amendment to the Law, the LAA had established a unique department specializing in the representation of elderly persons and cases raising questions of legal capacity (The Elderly Persons and Legal Capacity Department). The department's lawyers, aim to preserve the client's autonomy, for instance by proposing the appointment of "supporters" rather than guardians, seeking less restrictive measures and creating legal mechanisms adapted to the specific needs of the client.

105. Currently, in cases of compulsory hospitalization, and in cases in which a guardian is appointed during such a process, there is a right to legal representation by the LAA, with no means test.

106. There is currently no legislated right of representation in cases of legal capacity. Even so, where it is needed, Family Matters Courts may appoint a specialized lawyer from the Elderly Persons and Legal Capacity Department. This lawyer not only represents the client, seeking to safeguard her/his autonomy and rights, but also brings to the attention of the court all information necessary for a balanced judicial decision, including information on family, friends, support options, preferences, monetary situation, home status, debts, need for legal representation in other issues, the option of advance medical and financial planning, etc.

Article 13

Access to justice

The Israeli investigation and testimony procedures (adjustments for persons with mental or intellectual disabilities) law 5766-2005

107. PWD are more likely than others to become victims of crime and assault. However, their involvement in the criminal process is liable to be fraught with difficulties due to their disability, which may lead to the unintended denial of justice.

108. An innovative Israeli Law, enacted in December 2005, requires specific procedural adjustments in severe criminal cases, as stipulated in its Addendum. The *Investigation and Testimony Procedures (Adjustments for Persons with Mental or Intellectual Disabilities) Law* applies to Police investigations and court testimonies involving persons with autism, mental or intellectual disabilities if they are suspected of committing a severe crime, witness a severe crime, or are victims of one.

109. Different adjustments are granted to persons with different disabilities according to the Law. At the investigative stage, persons with intellectual disabilities and autistic persons are entitled to be investigated by a specially trained social worker, outside of Police premises, and not by Police personnel. Persons with mental disabilities are investigated by the Police, but they are entitled to have another person present, who may assist the investigator to avoid disability-related misunderstandings. As a rule, investigations of persons with these disabilities must be videotaped. Only in exceptional cases may they be audio-recorded or documented in writing instead. A special kit for augmentative and alternative communication methods which would be admissible in court has been developed. The special investigators have been trained to use such a kit, and they operate it in collaboration with specialized speech therapists.

110. In courts, many different adjustments are available, including augmentative and alternative communication methods, a friendlier environment in the courtroom, an exemption from confronting the accused, questions framed in a way that assists recollection, and an expert testimony that explains the meaning of the witness's words and conduct to the judge.

111. The Law has been in force since December 2006, and is implemented in practice by specially trained social workers at the MOLSASS when intellectually disabled and autistic persons are involved in investigations or court testimonies. Such investigations are also conducted in Arabic, by specially trained social workers, and in other languages when needed, with the assistance of interpreters.

112. In order to ensure efficient accessibility for persons with mental and intellectual disabilities, and in order to evaluate the application of the Law, a national forum was established, whose participants are representatives of: the State Attorney's Office (SAO), the Department of Investigation of Police Officers, the Department for Children's Investigation and Special Investigations in the MOLSASS, the Israeli Police, the Commission, the Office of the Deputy Attorney General (Criminal Law) and "Ashalim" and "Haruv" Institutes. This forum examines relevant cases and determines the method of treatment; follows the court rulings in the field; and facilitates the instant flow of information between the relevant bodies.

113. During 2016, this Forum, together with representatives of the Public Defender's Office (PDO), held two conferences on the accessibility of PWD to the justice system, both

under the auspices of the Director General of the MOJ. The conferences aimed to achieve cooperation between the enforcement authorities: the Israeli Police, the SAO and the PDO on procedural and intrinsic matters regarding the implementation of the *Investigation and Testimony Procedures (Adjustments for Persons with Mental or Intellectual Disabilities) Law*.

114. Moreover, in 2016, this forum drafted recommendations to improve the current working methods of implementing this Law which are to be formulated into State Attorney's Guidelines.

Accessibility of investigation bodies

115. Section 39 of the Service Accessibility Regulations stipulates that if an investigator believes that the person being investigated is a person with a disability, she/he is obligated to use the appropriate accessibility measures according to the relevant disability, unless the accessible device or service is unattainable after an appropriate attempt to utilize it. It is necessary to investigate the person promptly in order to prevent the investigation's hindrance or disruption, to prevent risk to life or wellbeing, to facilitate the detention of additional suspects, or in order to discover further evidence. The adaptations specified in the Service Accessibility Regulations are diverse and include translation into sign language and visual documentation, usage of an alternative assistive communication system, etc.

116. Thus, for example, the Police have approved placing assistive hearing devices in approximately 73 Police stations, established an emergency center for persons who are hard of hearing or deaf to be contacted via text message, email or fax, and have a list of sign language translators in Police stations. In addition, the Police publicized a procedure relating to investigating PWD. The procedure outlines the methods of Police treatment during an investigation of a person with disabilities, while maintaining the values of human equality and dignity throughout the process.

117. As for the rights of victims with disabilities, and specifically their right to receive information regarding the legal stage of the criminal procedure of the offense to which they were victims, the information can be obtained via a Police system that includes a website accessible to PWD.

Investigations of minors with disabilities

118. Section 4C of the *Evidence Revision (Protection of Children) Law 5716-1954*, stipulates that the investigation of a child with intellectual disabilities involved as a victim of a severe offense (such as prostitution, rape, obscene acts, etc.) shall be conducted by a child-investigator, who is a special investigator as defined by the *Investigation and Testimony Procedures (Adjustments for Persons with Mental or Intellectual Disabilities) Law*.

119. Additionally, in relation to minors generally, this Law allows the court to be flexible in hearing the testimony of a minor. For example, the court may hear such testimony without the presence of the offender in the courtroom, without the minor being called to the witness stand, whilst the judges are not wearing gowns, in the judge's chamber or elsewhere, and/or with the presence of another person chosen by the minor to be present during her/his testimony, etc.

Accessibility of judicial bodies

120. Sections 44–48 of the *Service Accessibility Regulations* regulate the issue of accessibility to judicial bodies. The majority of these provisions entered into force in 2016.

121. The *Service Accessibility Regulations* stipulate that a person seeking means of assistance or service as provided in Sections 45 and 46 shall issue such a request before the court at which the hearing is being held. The means of assistance and services that may be requested include, among others: transcription services; an oral description of the contents of written materials; making use of hearing aid equipment; the possibility to record the proceedings; granting sufficient time to listen to pre-recorded comments; providing an oral

description of the courtroom and the location of those present in it; making use of a speech therapist; translating the proceedings into sign language, etc.

122. In cases where such a request has not been filed, the presiding judge is authorized to order adjustments according to the *Service Accessibility Regulations* including allowing one of the parties, upon her/his request, to be accompanied by a person on her/his behalf who will explain the events occurring in court. In addition, a person with disabilities who is a party to the legal proceeding will be allowed to consult with her/his representative for a reasonable time, if necessary.

123. In the event that the court is convinced that a party has failed to comprehend the judicial proceedings due to her/his disability and is not represented, she/he shall be given an explanation, both prior and after the deliberation, phrased in simple language, as to the nature of the deliberation, her/his rights, and the decisions that may be made by the court. In addition, proceedings that concern PWD shall be adjusted according to their disabilities, subject to limits due to the court's schedule.

124. Upon a request made by a person with disabilities, adjusted seating will be supplied and situated in a specially designated area. If deliberations are in open court, the audience shall be provided with adjusted seating, a transmitter that will allow them to hear the parties, and an on-screen transcript or sign language translation service.

Representation of PWD in legal proceedings

The PDO

125. The PDO provides high quality and professional legal representation to suspects, defendants, detainees and convicted persons in criminal proceedings. The right to be represented by PDO is defined by law and depends on various factors, such as the severity of the offence and the economic status of the person requesting the service. In general, defendants and prisoners that are not represented by a private defender are represented by the PDO.

126. In specific circumstances, the PDO represents PWD. For example:

(a) Section 15 of the Criminal Procedure Law 5742-1982, stipulates that in criminal cases or investigations in which testimony is required, there is an immediate right to appoint a public defender in cases of a physical or sensory disability or concern of a mental or intellectual disability by the court;

(b) Section 18(A)(2) of the Public Defender's Law designates representation in psychiatric committee for persons who are hospitalized by criminal order. The psychiatric committees are established in each district according to the Treatment for Persons with Mental Disabilities Law and consist of members elected by the Minister of Health including lawyers, psychiatrists working in the Civil Service (CS), and psychiatrists who are not employed by the CS. According to the Law, the committees are authorized to extend the hospitalization period of patients, discuss appeals submitted by patients regarding orders for hospitalization or clinical treatments, decide on the release of patients from hospitalization, etc. Each patient's case is reviewed by the psychiatric committee every six months.

127. The PDO represents many intellectually or mentally disabled defendants in criminal proceedings. In order to cope with the unique challenges that are required from lawyers in representing clients with disabilities, a department was formed in each district of the PDO, providing professional supervision and guidance for the representative lawyers, as well as a national professional forum that allows for information-sharing and objectives on this issue.

Representation by the LAA

128. The LAA is a unit within the MOJ that provides free legal aid in civil trials and in certain administrative appeals. While being part of the GOI, it enjoys a degree of independence and can file suits against the State on behalf of victims when necessary. According to the *Legal Aid Law 5732-1972*, and the *Legal Aid Regulations 5733-1973*, there are three tests to determine eligibility for receiving legal aid: the legal field of the lawsuit, financial eligibility, and the likelihood of winning the case.

129. The LAA provides legal representation in a wide range of areas of civil law. Specifically, the LAA provides representation in areas unique to PWD, such as: the representation of involuntarily hospitalized persons, representation in psychiatric committees and appeals of these committees' decisions regarding involuntary hospitalization. The financial eligibility test does not apply in these cases, nor does the likelihood of winning the case at the psychiatric committees' level.

130. Recently, the LAA drafted a unique form, in simple language for the purpose of applying for legal assistance to benefit persons with intellectual disabilities.

Training of legal and prison personnel

131. The representatives of the SAO who are proficient in the implementation of the *Investigation and Testimony Procedures (Adjustments for Persons with Mental or Intellectual Disabilities) Law* lecture on the application of this Law and the principles of equality for PWD. These lectures are part of advanced study courses for Police investigators, special investigators, legal assistants, speech therapists, attorneys, and Police prosecutors.

132. For further elaboration on training programs for public officials and other professionals, see Israel's Core Document (HRI/CORE/ISR/2015), paras. 96–108.

Article 14

Liberty and security of the person

Treatment in custody

133. According to Section 5 of the *Basic Law: Human Dignity and Liberty*, there shall be no deprivation or restriction of the liberty of a person by imprisonment, arrest or in any other way, unless pursuant to the limitation clause: by a law befitting the values of the State of Israel, enacted for a proper purpose, and to an extent no greater than is required. No distinction is made on the basis of disability.

134. A person with disabilities, as any other person, enjoys the presumption of innocence and will be detained or imprisoned on a criminal or civil matter, only on the basis of a decision of a judicial body, according to the provisions of the relevant laws, regardless of her/his disability.

135. The Israel Prison Service (IPS) operates in order to provide optimal solutions for the population of prisoners with disabilities who are in custody, and these are provided according to the characteristics of the disability and the needs of the individual prisoner.

136. The IPS provides prisoners with disabilities accessibility to the common living area, in order to allow her/his appropriate integration into the different frameworks within the prison, such as education and employment.

137. The IPS created unique wings and therapeutic intervention for prisoners with personality disorders. Further, the IPS has established monitored frameworks – medical and nursing, for prisoners with unique needs, and operates a facility for the provision of medical and mental care for the population in need.

138. In addition, the IPS is taking measures in order to promote, in relevant cases, the inclusion of PWD in community services, in lieu of incarceration, by finding placement opportunities that are compatible to each person, according to her/his disability.

Compulsory assessment and treatment on serious mental health grounds

139. The *Treatment for Persons with Mental Disabilities Law* provides that psychiatric hospitalization may be used in limited situations. The most common situation is voluntary hospitalization and treatment, but in certain situations a person may be involuntarily hospitalized and/or treated. According to the Law, the District Psychiatrist or her/his deputy, or the Court, the director of a psychiatric hospital or a department manager, as defined by the Law, may order involuntary hospitalization if the person is mentally ill and as a result of

her/his illness her/his judgment is impaired, and she/he poses an imminent threat to her/himself or to the public. An involuntary hospitalization order by a District Psychiatrist is valid for only seven days, and may be extended by an additional seven days at the request of the director of the psychiatric hospital or a department manager with the approval of the District Psychiatrist.

140. The patient can appeal to be released from the involuntary hospitalization to the District psychiatric committee, which consists of two psychiatrists and one lawyer who is eligible to be appointed as a judge of a Magistrate Court. The appeal will be heard within five days. A psychiatric committee may extend the order after 14 days for a period of up to three months, and afterward extend it by an additional period of no more than six months. If the psychiatric committee extended the involuntary hospitalization order by more than three months, the individual and/or her/his family or lawyer may contest the involuntary hospitalization to the district psychiatric committee. The district psychiatric committee is required to examine such appeal and discuss continued hospitalization within 14 days from the date of hospitalization. An appeal regarding the decision of the district psychiatric committee may be submitted to the District Court. The director of a psychiatric hospital or a department manager may order the involuntary hospitalization of a person who satisfies the conditions specified above and is located on the premises of the hospital, for a period of 48 hours. After such period, the authorization of a District Psychiatrist is required for further involuntary hospitalization. The director of a psychiatric hospital or a department manager may decide to end involuntary hospitalization before the end of the authorised period.

The use of restraints in psychiatric hospitals

141. Section 34 of the *Treatment for Persons with Mental Disabilities Law* stipulates that a physician in a psychiatric hospital may issue a written order for the restraint or isolation of a patient in cases where these measures are necessary for the medical treatment of the patient or in cases where the patient may present a physical danger to her/himself or to others. The order will be in force for a limited period of time. In cases of emergency and in the absence of a doctor, a senior nurse can instruct to restrain a person and to call a doctor as soon as possible to receive authorization. If such authorization is not provided, the patient shall be released from the restraint immediately.

142. The use of restraints in psychiatric hospitals is also regulated by the *Treatment for Persons with Mental Disabilities Regulations 5752-1992*. These Regulations stipulate that a doctor must record the instructions and reasons for the special order. Patients may be held in isolation only in specially designated rooms equipped with appropriate safety measures. Patients may be restrained to a bed by two or more limbs in specially designated rooms containing no more than three beds, each with a fireproof mattress, smoke detectors, reasonable ventilation, only furniture that is necessary, and no access by other patients.

143. According to the *Treatment for Persons with Mental Disabilities Regulations*, restraining orders are valid for a period not exceeding four hours, but may be extended by a physician after examination for additional periods also not exceeding four hours each time. In many hospitals, the extension of a restriction order requires the approval of the Assistant Director of the hospital. Some hospitals require that restricted patients shall be examined by a nurse every half an hour.

144. Restraining orders are used only in cases of imminent danger of physical harm to the patient or to others, as a consequence of deterioration in her/his mental health condition, and not as a means of “punishment”.

145. In May 2016, the MOH Director General appointed a steering committee to examine possible plans to reduce the use of mechanical restraints in Israel. Thirteen distinguished members were appointed to take part in this committee, including professionals from mental health departments, the Commissioner for Equal Rights of PWD, and representatives from NGOs. The Committee is headed by the Ombudsman of the Medical Professions at the MOH. The Committee’s mandate is to examine the use of physical restraints in the mental health system and to make recommendations on ways and plans to reduce, or annul completely, the use of mechanical restraints in Israel. The updated

recommendations on this issue are likely to abolish the practice of using restraints within several years.

The right to legal representation by the LAA in case of involuntary hospitalization

146. According to Section 29A of the *Treatment for Persons with Mental Disabilities Law and the Treatment for Persons with Mental Disabilities (Legal Representation in Involuntary Treatment) Regulations 5766-2006*, every person for whom a compulsory hospitalization order has been issued, is entitled to be represented by the LAA in procedures of psychiatric hospitalization and in appeals on decisions to issue an order of involuntary hospitalization.

147. In order to make the services of the LAA accessible to involuntary hospitalized persons, psychiatric hospitals are required to inform patients about their right to receive free legal representation from the LAA, and if they object to their hospitalization, the psychiatric hospitals must provide them with special forms upon hospitalization, as well as provide information about them to the LAA. A lawyer from the LAA shall meet with the involuntary hospitalized person at the hospital, interview her/him and assist in filling a legal aid request form.

148. According to data from the LAA, recent years have seen a significant improvement in the assertion of the rights of involuntary hospitalized persons. This improvement is reflected in the recognition by psychiatric doctors of the right of hospitalized persons to legal representation and its importance. Legal representation has led to a significant decrease in the number of unlawful hospitalizations and resulted in noteworthy improvements in the protection of the basic rights of hospitalized persons according to the Law. The LAA represents approximately 5,000 persons (over the age of 18) in these procedures each year.

Representation of minors by the LAA

149. The *Youth (Care and Supervision) Law 5720-1960*, regulates the treatment of minors “in need” as defined by Law, and governs the majority of child protection proceedings in Israel. The Child Representation Unit at the LAA provides legal representation to minors, including minors with disabilities.

150. The majority of Child Representation is in the capacity of *guardian ad litem* for the minor, appointed by a Juvenile Court to represent the best interests of minors in various legal proceedings and before different authorities, committees and entities. These proceedings include: issues of hospitalization and/or examination and/or psychiatric treatment arising during child-protection proceedings in Juvenile Courts, or hospitalization procedures of minors who are under 15 years old. The appointment of a *guardian ad litem* is at the judicial discretion of the Juvenile Courts, according to Section 8C of the *Youth (Care and Supervision) Law* and does not provide all minors with the right to be represented by a lawyer.

151. According to the Child Representation Unit at the LAA, approximately 70% of minors in child protection proceedings in Juvenile Courts are represented by a lawyer from the Child Representation Unit. The lawyers representing such minors on behalf of the Child Representation Unit at the LAA are carefully selected and specialize in the representation of minors, receive designated qualifications, a one-year multidisciplinary training, and are closely supervised.

152. The *Youth (Care and Supervision) Law* in combination with the *Treatment for Persons with Mental Disabilities Law* governs the legal framework for psychiatric treatment of minors, including treatment under forced hospitalization conditions.

Compulsory hospitalization of criminal offenders with mental disabilities

153. Any person suspected of committing an offense, arrested, or indicted may claim that her/his criminal act was the result of a mental condition, according to Section 34H of the *Penal Law 5737-1977*. If she/he proves that the criminal act was the result of a mental condition, she/he shall not be held criminally responsible and cannot be prosecuted.

154. Section 170 of the *Criminal Procedure Law 5742-1982*, and Section 15 of the *Treatment for Persons with Mental Disabilities Law* regulate cases of persons who are charged with criminal offenses and found currently unfit to stand trial by a court. In this case, the court may issue a psychiatric treatment order or an involuntary hospitalization order. The court will not issue a psychiatric treatment order unless it is certain that such an order will not pose a risk to the public or to the defendant. In addition, according to Section 18 of the *Treatment for Persons with Mental Disabilities Law*, a psychiatric treatment order or an involuntary hospitalization order will be issued by the court, only if the defendant's legal representative is present in court.

155. The order will be issued only after the court receives a psychiatric opinion, and if it is necessary in order to assess a person's mental condition, the opinion will be given only after the defendant is hospitalized for observation and evaluation, according to a court order. In accordance with a psychiatric opinion, a judge will decide whether the mental condition of a person merits involuntary hospitalization. An appeal may be submitted to the court regarding the decision of the medical staff.

156. A psychiatric treatment order or an involuntary hospitalization order will not exceed the duration of imprisonment set out in the *Penal Law* for the offences included in the indictment.

157. In the case of a person who has been involuntarily hospitalized by a court order, only a district psychiatric committee (comprising of two psychiatrists and one legal advisor) may decide to replace a hospitalization order with a psychiatric treatment order, to end such hospitalization and release the individual to her/his home, or allow her/him a leave from the hospital. Such a decision shall be based on an examination and evaluation of the mental condition of the aforementioned person and the level of threat she/he poses.

158. Section 28A of the *Treatment for Persons with Mental Disabilities Law* addresses cases of persons indicted of murder or attempted murder for whom a psychiatric treatment order or an involuntary hospitalization order was issued by the court. A special psychiatric committee is authorized to address these cases and decide on vacations terms, order the release of such person from involuntary hospitalization, issue a psychiatric treatment order and the imposition of supervision measures after the release, etc.

The right to legal representation by the PDO in cases of involuntary hospitalization

159. The PDO represents mental patients under involuntary treatment by Court order, in all mental health hospitals and clinics all over the country, according to Section 18 of the *Public Defender Law*. Representation in psychiatric committees is provided by lawyers who are specialized and qualified in the field.

160. In recent years, the PDO has placed an emphasis on the submission of appeals regarding the decisions of the psychiatric committees. For data on representations by the PDO, see Annex I.

161. In recent years important rulings by the courts established procedural guarantees in cases of involuntary hospitalization, including: limitation of the authority of the psychiatric committees in estimating the danger presented by a person who was hospitalized according to Section 15A of the *Treatment for Persons with Mental Disabilities Law*; the importance of holidays for the stabilization of the rehabilitation process of the patient; the requirement of the psychiatric committee to provide detailed reasoning of its decisions, referring to all the parameters required for the extension of involuntary hospitalization; the obligation to consider the proportionality between the length of the hospitalization and the severity of the offenses; a ruling that the psychiatric committee has no authority to consider "penalty considerations" in its decisions; the requirement of the psychiatric committee to specify any decision regarding the danger presented by a person, and not settle for a standard estimation of danger; an emphasis on the rights of patients and their recognition as persons who require treatment and not as ordinary criminals; limitations on the committee when it attempts to delay the release of a patient in certain situations; the obligation to examine the decisions of the psychiatric committee in light of the *Basic Law: Human Dignity and Liberty* and the purpose of the Law, etc.

Persons with intellectual-developmental disabilities involved in criminal activity

162. Section 19B of the *Welfare (Treatment for Persons with Intellectual-Developmental Disabilities) Law 5729-1969*, regulates cases in which a person involved in criminal activity might have intellectual disabilities claims that she/he cannot stand trial due to such disability.

163. In these cases, the person shall be referred for evaluation by a Diagnostic Committee, established according to Section 5 of the *Welfare (Treatment for Persons with Intellectual-Developmental Disabilities) Law*. The Committee will then submit its expert opinion to the Court. According to the Law, the Court can decide to order periods of detention and incarceration in a closed facility appropriate to the needs of persons with intellectual-developmental disabilities, or to close the criminal file and to refer the person to the Diagnostic Committee for determining the course of treatment needed, which shall be suited to the condition and needs of the person. One such closed facility appropriate to the needs of persons with intellectual-developmental disabilities exists in Israel; appropriate for use as an alternative to regular imprisonment, namely the “Neve Menashe” Institute, which provides detention and rehabilitation services.

Article 15

Freedom from torture or cruel, inhuman or degrading treatment or punishment

164. Acts and behaviors defined as torture may constitute offences under the Israeli *Penal Law*. For example, infliction of physical harm is criminalized in the *Penal Law* in the chapter on offences concerning harm and wounding.² In addition, there is a positive duty to attend to the health and livelihood of persons defined as “a helpless person” (Section 322 in conjunction with Section 377 of the *Penal Law*), which applies to anyone responsible for a helpless person – that is, a person who is unable to provide for her/his own sustenance due to various reasons, including age, sickness, or mental disability.

Clinical trials

165. The *Public Health (Clinical Trials with Humans) Regulations 5741-1981*, determines the rules and procedures for the conduction and approval of the Division for Human Subjects Clinical Trials in Israel, and its oversight by the Clinical Trial Department, in the MOH. The procedure designates several vulnerable groups as “special groups” whose physical or mental condition has impaired their ability to give informed consent, or if participating poses a higher medical risk for them (such as pregnant women, minors, and persons who are in legal custody). Several provisions concerning persons who are part of a “special group” were put in place in order to protect them and prevent them from being exploited, while allowing them to partake in medical experimentation if they wish to and if it might improve their medical condition or otherwise contribute to their wellbeing.

166. The “Procedure for Clinical Trials in Humans” (2016 Edition) guarantees that institutional review boards (and national ones) should not approve clinical trials with participation of special groups, unless the trial has potential to promote the health of that group and cannot be conducted with other participants not considered “special groups”, to ensure that there is no exploitation of this group.

167. As a rule, the participation of a “special group” in a clinical trial, and specifically one that is aimed towards a certain “special group”, requires approval by the MOH, in addition to the approval of the local medical institutions review boards. These rules are in accordance with the Regulations, internal procedures and in the language of the consent forms signed by the participants in the clinical trial. Additionally, if the person that is being considered for participation in a clinical trial has a legal guardian, her/his legal guardian must approve of the clinical trial as well as the participant’s consent to participate in it. In general, a person without capacity to consent or assent cannot participate in a clinical trial without having a legal guardian appointed to her/him and the guardian’s approval.

² “Harm with aggravating intent” under Section 329 of the Penal Law, “Grievous harm”, under Section 333, “Wounding” under Section 334 and “Harm and wounding under aggravating circumstances” under Section 335.

Article 16

Freedom from exploitation, violence and abuse

Legislation protecting PWD from abuse

168. PWD are protected by the *Penal Law* from abuse, violence and exploitation as any other persons, without any discrimination. In some violence and sex offences, there are aggravating circumstances if the victim is a “helpless person”. Measures for protection of PWD are defined in Section 368A of the *Penal Law*. This Section defines “helpless person” as “a person who because of her/his age, illness or physical or mental infirmity, mental impairment, or any other cause, cannot provide for the needs of her/his livelihood, health or welfare”. The Law defines a duty to report certain violence and sex offenses against those who are included in this definition. The duty to report is imposed according to Section 368D of the *Penal Law* on any person who has reasonable grounds to believe that such a crime was committed recently by a person in charge of a minor or a “helpless person”. A professional (physician, nurse, educator, social worker, social welfare employee, policeman, psychologist, criminologist, paramedic, director or staff member of a residential facility or institution in which minors or persons under care live) has a duty to report if in the course of her/his professional activity or responsibility she/he has reasonable grounds to believe that such a crime was committed. The person who is in charge of the “helpless person” also has a duty to report in these circumstances. Violation of this duty constitutes an offence punishable by three months’ imprisonment or six months if the offender is a professional or has responsibility for the helpless person.

169. Additionally, the *Safety of Protected Persons Law 5726-1966*, establishes the legal duty of a person responsible for a “protected person”, meaning a parent, step parent, a guardian, person having custody of a protected person, or one who the protected person is under her/his influence. A “protected person” is defined in the Law as a minor under the age of 14 years or a person that due to her/his disability, mental impairment or aging, cannot provide for her/his own needs. The Law enables indictment of persons responsible for putting the protected persons in certain situations that might cause them physical or mental harm and the Law enables Government Authorities, especially specially authorized social workers at the MOLSASS, with powers to care for such protected persons. A Police officer may remove a “protected person” from the custody of the responsible person in such circumstances for up to a week, after consulting with an authorized social worker. Removal for more than a week, or other protective measures, requires a court order. Protective institutionalization may be ordered by the court for up to six months. However, psychiatric institutionalization may only be carried out if the “protected person” poses an immediate physical risk to her/himself or to others.

State inspection over institutions of PWD

170. All institutions and care facilities operated either by the MOLSASS, the MOH, or by private contractors, are inspected by state officials of these ministries. In addition, there are various State Authority mechanisms to which a person can turn to with complaints regarding the implementation of her/his rights, such as: the Public Complaints Commissioner at the State Comptroller Office, the Public Complaints Commissioner at the MOH, the LAA concerning involuntary hospitalization. For further information, see Article 14.

171. In this manner, all facilities of the MOLSASS are supervised, and each person who has a complaint can refer it directly to the supervisor of the MOLSASS. Complaints can also originate from families, neighbors, and any other person who believes that a person in a residential care facility was not cared for or treated properly. Additionally, out-of-home care facilities of the MOLSASS have internal procedures for dealing with irregular events that take place in the facilities, including possible abuse of a resident.

172. The MOH is in charge of both private and governmental mental health institutions. The supervision of the abovementioned facilities includes teams of supervisors who conduct periodical and unannounced inspections. In the MOH, there is a public complaints commissioner and a quality control branch. Furthermore, the MOH operates a hotline to

which families can call, fax, email or write to, and subsequently, according to the complaint, an unannounced inspection at a mental health hospital can be initiated. Problems revealed in the framework of this supervision regarding neglect or abuse are taken seriously, conveyed to the relevant bodies and treated accordingly. Any case of death at a mental health hospital is reported to the Police which is authorized to investigate the case. Any patient's death, in a psychiatric hospital or a rehabilitation institute is reported to the MOH and examined.

173. The Commission also conducts inspections in institutions, care facilities and psychiatric hospitals per year and submits reports to the relevant Ministries.

174. These abovementioned measures are enforced to protect PWD in different types of facilities. Nevertheless, there have been some cases in which violence against protected persons was recorded and treated by the authorities. Few of these cases resulted in convictions of the caregivers in those institutions. For further information, see part I of Annex II.

175. The MOLSASS and MOH operate programs for the identification and prevention of harm to the elderly who are at risk of abuse and neglect, both in the community and in institutions. These programs include meetings with the elderly population in day-care facilities and retirement homes.

Victims of violence

176. In general, the main legislation regarding the rights of crime victims is the *Crime Victims' Rights Law 5761-2001*, which is aimed at granting rights to crime victims and protecting their dignity without prejudicing the legal rights of suspects, defendants, and convicted persons.

177. The Molsass operates therapeutic consultancy centers which are designated to provide consulting services, rehabilitation, and renewal of social integration treatment for PWD who were abused or were victims of violence. For example, the Molsass provides sexual-social treatment in the community and in the out-of-home care facilities. This sexual-social treatment is also provided to those who are victims of violence and is adapted to persons with special needs.

178. Pwd who are victims of violence and are treated in out-of-home care facilities are accompanied by a staff member in order to introduce them to, and provide accessibility to, the service provided.

179. Additionally, there are training programs and training-group guides on preventing violence against PWD, introduced in collaboration with the Jdc.

Article 17

Protecting the integrity of the person

180. As with all Israeli citizens, the physical integrity of Pwd is protected by law. According to the *Patients' Rights Law 5756-1996*, every person has the right to refuse to undergo any medical treatment. This right is subject only to such reasonable limits as provided by the Law.

181. Every person accessing health and disability services must be informed of her/his rights, be treated with respect, and receive services in a manner that has regard for her/his dignity and privacy. The Patients' Rights Law requires as a general rule, apart from exceptional circumstances, that a person must give informed consent before undergoing medical treatment. Furthermore, internal procedures of the Moh stipulate the necessity of explaining the medical situation to a person according to her/his understanding and condition.

182. Section 68 of the Legal Capacity and Guardianship Law stipulates that a court may take any temporary or permanent measure it deems fit, in order to protect the interests of a person whom a guardian was appointed to. Whereas if the request is to authorize a medical treatment, the court will not authorize the request unless it is satisfied that, according to a

medical opinion, such measures are required to protect the physical or mental condition of the person who a guardian was appointed to. The court shall make its decision after considering the wishes of that person, the importance of treatment, its necessity, its urgency, its potential harm to the person's way of life and the prospects for improvement in the quality of her/his life.

Non-consensual treatment subject to safeguards

183. The *Patients' Rights Law* provides for compulsory medical assessment and treatment in exceptional circumstances. This may occur only when the medical condition of the patient does not allow for obtaining her/his consent, and there is no indication of objection to undergo such treatment by the patient or her/his legal guardian, and there is no possibility to obtain the consent of the patient or of the legal guardian. Furthermore, in the case of a severe medical risk, the Law allows compulsory medical treatment which is subject to certain conditions, including the assessment of the case by an Ethical Committee established under the Law. In a medical emergency with imminent danger to life or severe irreversible disability, the Law allows providing medical treatment without obtaining consent if the consent cannot be obtained in due time, subject to written approval by three physicians, or less if circumstances do not allow it.

Sterilization and abortions

184. Any invasive medical treatment, including such treatment that may lead to sterilization can only take place after receiving informed consent as explained above. There is no policy of forced sterilization.

185. According to Sections 312-321 of the *Penal Law*, each termination of pregnancy requires the approval of a committee which consists of two doctors and a social worker (one of them must be a woman). The Law specifies a few legal grounds for termination of pregnancy, including if the woman is a minor, or unmarried (at all ages), or if the pregnancy might cause her severe mental harm. Minors are authorized to decide on the termination of such a pregnancy by themselves and there is no requirement for informing or receiving the approval of their parents. There is no obligatory presence of a parent or a partner at the committee as they have no legal status or any other status there. The committee is obligated to ensure that the woman or the minor requesting to carry out the termination of pregnancy received the relevant information and gives her informed consent to the procedure. Termination of Pregnancy until age 33, for all reasons in the Law, is covered by the National Health Insurance. The MOH initiated a special social-work program designed to engage with minors after abortion, to help prevent recurrence of teen-pregnancies.

186. According to existing practice in Israel, a guardian's consent is not satisfactory for the termination of a pregnancy of a person for whom a guardian has been appointed. In the appropriate cases (such as statutory rape, an at-risk minor, or domestic violence), the medical institutions involve certified representatives from the social welfare system. These rules apply for every woman or girl, regardless of whether she has a disability.

Article 18

Liberty of movement and nationality

187. Section 6 of the *Basic Law: Human Dignity and Liberty*, stipulates that "All persons are free to leave Israel. Every citizen of Israel has the right of entry into Israel from abroad". This right is granted to all persons, regardless of the existence of disabilities.

188. No distinction on the grounds of disability is made with regards to the right to obtain Israeli citizenship or residency. No distinction on the grounds of disability is made with regards to the registering of births.

Article 19

Living independently and being included in the community

189. Section 2 of the *Equal Rights Law* states that the objective of the Law is to establish the right of PWD to participate equally and actively in society in all spheres of life, and also to provide an appropriate response to their special needs, in a manner that will enable PWD to live their lives with maximum independence, privacy and dignity, while fully realizing their abilities. Furthermore, Section 4 of the *Equal Rights Law* allows PWD to make decisions that relate to their lives according to their own wishes and preferences, subject to the provisions of any other law. Guided by these basic principles as set out in the *Equal Rights Law*, current Israeli policy and practice are supportive of the inclusion of PWD in the community and encourage their participation in Israeli society.

190. Measures have been put in place, aiming to allow a person with disabilities to live in the community and to avoid separating children from their families. The State provides financial support and a wide array of services in order to enable PWD to live in the community. The State provides disability benefits (see Article 28), mobility benefits (see Article 20), public housing and rent subsidies (see part 2 of Annex II, Article 28). Additionally, the State assists in making certain adaptations to apartments in order to accommodate them for PWD. Regarding children, various programs and services exist with the aim of aiding families of children with disabilities to keep their child at home, for example, the State provides benefits for children with disabilities (see Article 28), rehabilitative day-care (see Article 7), family counselling centers and support programs (see part 2 of Annex II, Article 23). Families of children with severe care needs, PWD meeting the criteria, and elderly persons with severe care needs, are eligible for an additional financial assistance for the purpose of hiring a personal assistant.

191. In addition to this general policy, out-of-home services are provided for PWD by State Authorities, as follows:

Intellectual disabilities

(a) According to Section 7A(b) of the *Welfare Law (Treatment for Persons with Intellectual-Developmental Disabilities)* (amended in 2000), every person with an intellectual-developmental disability has a right to an out-of-home placement, if needed, and community services according to her/his needs, fully funded by the State. The Diagnostic Committee dealing with diagnosis and modes of treatment under this Law is under a statutory duty, when deciding upon the type of out-of-home placements, to give priority to living in the community. The services provided include: apartments, foster families, communal homes, residential facilities and full care facilities as well as community services. The Diagnostic Committee evaluates and decides on modes of treatment for each person according to her/his needs, along with taking into consideration her/his desires, and her/his guardians desires;

(b) In its implementation of the *Welfare (Treatment for Persons with Intellectual-Developmental Disabilities) Law*, the MOLSASS aims to maximize the potential of each individual, strengthen their independence, including their ability to choose the services they wish to receive. Inclusion and participation in the community are guiding principles which are applied in a variety of spheres, programs and service provisions, such as integrated educational settings, general day-care facilities, leisure activities, and employment;

(c) Following a HCJ Decision in 2010, on the integration of persons with intellectual disabilities in the community (H.C.J. 3304/07 Lior Levi et. al. v. State of Israel, Ministry of Social Affairs and Social Services (3.2.2010)), the MOLSASS expanded the criteria for eligibility for living in the community so as to include all persons with intellectual disabilities (subject to the decision of the Diagnostic Committee on a case by case basis), with the exception of the following two categories:

(i) Medical condition: Persons who due to their medical condition require immediate accessibility to medical services, and who cannot receive appropriate

medical services within the community, in order not to endanger their health and lives;

(ii) Behavioural problems: Persons with intellectual-developmental disabilities who have severe behavioural problems and require continuous supervision, whose situation pose a danger to themselves or others and therefore cannot use general services in the community.

(d) The process of implementing the statutory duty to give priority to out-of-home placements in smaller housing arrangements within the community is being implemented gradually.

Mental disabilities

(a) The MOH, which is in charge of the implementation of the Rehabilitation of Mentally Disabled Persons in the Community Law 5760-2000, works to rehabilitate and integrate persons with mental disabilities into the community. The MOH is guided by the goal of enabling persons with mental disabilities to have the highest level of functional independence and quality of life, while preserving their dignity according to the Basic Law: Human Dignity and Liberty. The continuum of housing services assists such persons with living in the community. The guiding principle is that every mentally disabled person eligible to these services should be able to live an independent life in the community, so long as she/he receives the support suited to her/his needs, as well as assistance in best utilizing the services offered by the community, and proper and dignified living conditions;

(b) In addition, services to support living in the community are provided. The range of services includes services aimed at employment rehabilitation, support for higher education, and other individual and communal projects aimed to assist in their rehabilitation process;

(c) Persons with more complex mental disabilities, who are unable to take part in the rehabilitation housing services, live in larger institutional settings provided by the MOH and in chronic psychiatric wards (hospitalized over one year). These include persons with complex disabilities, such as persons with both intellectual and mental disabilities, as well as persons with complex behavioral problems. There are approximately 2,000 persons living in such settings.

Physical disabilities

(a) The out-of-home placement service provides a home for persons who are unable to live independently in the community. At the same time, the out-of-home placement facilities allow persons with physical disabilities to acquire skills with the goal of maximizing their potential. The services address many aspects of their daily life, including interpersonal relationships, primary everyday living skills, secondary everyday living skills, cognition, employment, etc. Thus, if possible, and the person desires to live independently in the community, the program supports her/him in this process. The treatment plan of every participant in the out-of-home placement program is meant to allow her/him to better realize her/his potential as she/he desires, as well as assist her/him in transitioning to an independent life, according to her/his abilities;

(b) Additionally, in some placements, there are services aimed to assist PWD to live independently in the community, including "Preparatory Programs for Independent Life", centers for independent living, support for persons who live in their homes through house visits by professionals, and coaching towards independent living in the community.

Dual and complex disabilities

(a) In response to a petition submitted to the HCJ regarding persons diagnosed with "dual disability" – persons with both mental and physical disabilities, the MOH stated that it will establish a unit aimed to treat persons with "dual disability" by a rehabilitative-ecological model. The rehabilitative-ecological model includes activation of treatment and rehabilitation programs to each person according to an intervention model based on an ecological method. The MOH's procurement tender has been published and the new

treatment model has been set out in an internal procedure of the MOH (H.C.J. 1596/12 Bizchut v. The MOLSASS and the MOH (4.5.16));

(b) Another petition concerns persons with complex physical disabilities or dual disability who according to the MOH and MOLASASS policies are not able to live independently within the community since their medical situation requires full care. Currently they are placed in geriatric facilities, even though they are younger than the retirement age (under 65 years old), and there are no community services available for them. An inter-ministerial committee appointed in 2013, issued a report in 2015, recommending a pilot program, comprising nine apartments, each housing 6 persons, within the community, two additional residential facilities housing 14–18 persons and hospitalization departments for those who have medical problems that require their extended hospitalization, and who cannot be integrated in other care facilities. The MOLSASS and the MOH are currently working on the implementation of the pilot program, and the petition is still pending (H.C.J. 5723/12 Anonymous v. The MOLSASS and the MOH (pending)).

Autism

(a) The MOLSASS provides out-of-home placements for autistic persons, and also develops designated programs to enable independent living for persons located on the higher level of functioning on the autism spectrum. Such programs include a project for employment integration in the work force, supported housing, a project for preparation and transition to an independent life as an adult, and national service and integration into the IDF (with appropriate assistance);

(b) For statistical data on out-of-home services, see Annex I. and for related case-law, see part 1 of Annex II.

Community living for veterans with disabilities

192. The *Persons with Disabilities (Allowance and Rehabilitation) Law 5719-1959*, applies to IDF soldiers in mandatory service, military reserve service, and regular military service who were injured or fell ill during and/or as a result of their service. The Law also applies to those who serve in the Israeli Police, IPS, Israel Security Agency, Israeli Secret Intelligence Service and the Knesset's Guard.

193. In order to enable disabled veterans to reintegrate into society, the *Persons with Disabilities (Allowance and Rehabilitation) Law* allows eligible IDF veterans with disabilities to receive personal support, nursing and coaching, in addition to needed medical equipment and assistance in adapting their housing for their individual disability.

194. Additionally, there are projects which place veterans with disabilities into protected accommodations and residential facilities. Veterans with disabilities may qualify for this assistance if they are not in need of hospitalization and yet are unable to live with their families or unable to live independently in the community, and need support and assistance in areas of their daily life. There are several options for veterans with disabilities to live in the community, such as residential facilities, assisted living, small group homes, and apartments.

195. The purpose of the rehabilitation process is to work with veterans with disabilities towards integrating them into the community, according to their personal ability. Those who decide to live with their families are eligible for specialized services for support and assistance in areas of their daily life.

Article 20

Personal mobility

Assistive aids and equipment publicly provided

196. The MOH assists in providing PWD with various forms of personal mobility assistance after carefully examining its quality and according to international standards, including equipment such as wheelchairs, motorized wheelchairs, as well as assistive

devices such as canes, artificial limbs, special shoes, etc. During 2015–2016 there has been an increase of 20% in the number of requests for such aid and equipment, and currently there are 40,000 requests. Furthermore, the Ministry reduced the amount of the deductible with respect to various devices and equipment. The MOH's yearly budget for these aids and equipment in 2017 is over 180,000,000 NIS (4,945,054 USD), and includes new technologies that are approved each year, to the benefit of PWD.

197. Assistance in purchasing a personal vehicle as well as assistance with personalized modifications and installations of the vehicle is provided. A special allowance provides the necessary funds for operating the vehicle and mobility. These funds are provided to adults with disabilities and to families of children with physical disabilities of the lower limbs, according to set criteria. For further information, see Article 28. For information on the provision of services for the blind and visually impaired, see part 2 of Annex II.

Public transportation for PWD

Subsidized public transportation

198. Persons who are eligible for disability benefits receive a 33% discount in public transportation costs. Visually impaired persons, guide dogs and guide dogs in training receive full discount on buses and trains, and anyone accompanying them receive discounts.

Transportation to State services

199. The State provides transportation for children and PWD attending special education services, and to some of the day services, and sheltered employment facilities.

Accessible taxis

200. The *Equal Rights to Persons with Disabilities (Reduced License Fee for Operating Accessible Taxis) Regulations 5774-2014*, stipulate that the MOTRS shall provide up to 1,000 operators of disability accessible taxis, with a payment discount. The aim of these Regulations is to encourage the operation of accessible taxis. By November 2015, hundreds of such accessible taxis began to operate all across Israel.

Disability parking

201. The *Parking for Persons with Disabilities Law 5753-1993*, sets criteria for entitlement to a disabled person parking permit and allocation of parking spaces. The Law entitles persons with physical or visual disabilities, as well as the parents of a child with disabilities, according to certain criteria, to receive disabled person parking permits. A person entitled to such parking permit may receive permits for two vehicles, provided that both vehicles are used by the person with disabilities. One of the two vehicles shall also be exempted from a license fee.

202. Holders of a disabled person parking permits are entitled to free parking in public parking lots and in designated disabled persons parking spaces, provided that the person with disabilities is in the vehicle, whether as a driver or as a passenger. Furthermore, a person with disabilities may request that a specific parking area near her/his residence be marked for her/his exclusive use.

203. Public places are required to set aside a certain proportion of their parking spaces for disabled persons' vehicles, as specified in the Accessibility Regulations.

Accessibility of public transportation

204. Pursuant to Chapter E of the *Equal Rights Law*, a person with disabilities is entitled to public transportation services that are accessible and suitable for her/his use, at a reasonable frequency, including allowing access to stations and ports where such public transportation services operate. For the purpose of implementing Chapter E of the Law, the Minister of Transport and Road Safety published the *Equal Rights for Persons with Disabilities (Access to Public Transport Services) Regulations 5763-2003*, which define the accessibility requirements for public transport buses, bus stops, central facilities, trains,

aircraft, sea craft, airports, and ports, to include accessible bus stops, accessible signage at stops and on the buses, audio announcements, etc. According to these Regulations, only inner-city buses and trains should be accessible to all persons with disabilities.

205. The process of accessibility according to these Regulations was formally finalized in 2014, so that inner-city buses and most central bus-stations are accessible, as well as 90% of the inner-city bus stops. The light rail is also accessible. On 2017, the MOTRS added 23,000,000 NIS (6,284,153 USD) to the 75,000,000 NIS (20,491,803 USD) already paid in order to make inner-city bus stops fully accessible.

206. According to data from the Israel Railways, there has been a large increase in the number of PWD using public transportation since these accessibility provisions have been applied. PWD who wish to use the Railway are requested to notify of their arrival six (6) hours in advance.

Article 21

Freedom of expression and opinion and access to information

207. All persons in Israel have freedom of expression, which is protected by the Courts. This fundamental right can be restricted if there is a “near certainty” of endangerment to the public order and there are no other means to lessen the severity of a public peace violation.

Accessibility of television broadcasting

208. The accessibility of television broadcasting is regulated by the *Television Broadcast (Subtitles and Sign Language) Law 5765-2005*, which applies to all broadcasting bodies in Israel. According to the Law, since 2015, 100% of all programs in Hebrew and Arabic must include real time captioning or sign language, up to 5% can include sign language without captioning. In addition, at least 5% of prime time programs, at least one daily evening newscast, at least one daily children’s program and all emergency announcements must include sign language interpretation. Television franchisees are required to advertise the times and dates of broadcasts, accompanied by sign language and captioning.

209. The Second Authority for Television and Radio supervises the fulfilment of these provisions by television franchisees; specification is published in the Authority annual reports online. The Commission conducts annual examinations of the Second Authority’s reports, as well as sample inspections of television broadcasts and has enforcement power in cases of violations.

Accessible information

210. According to the *Equal Rights Law*, a public service is a service provided to the public or to an unspecified part thereof by a public body or at a public place, including, among others: commercial, social services, health, education, leisure, sport, tourism, accommodation, culture, entertainment, religion, energy, communication (telecommunication), bank, credit, insurance, allowance, financial and car rental services. According to the Law, private bodies, public authorities and societies providing public services are required to be accessible. This requirement also applies to judicial instances and quasi-judicial instances.

211. According to the *Service Accessibility Regulations*, all service providers have to provide accessible information as follows:

(a) Adjustment of the information provided as part of the service-producing alternatives to printed information such as forms, personal data printouts (such as: bank account reports, etc.), brochures, shall be provided with either enlarged text, in Braille or orally, in coordination with the recipient of the service;

(b) In complex, protracted matters of high importance, such as financial or legal services, information must be provided in sign language at the request of the person with disabilities, to be presented a reasonable time in advance;

(c) Adjustment of technological means for the use of PWD-computerized information stations, interactive voice response systems, devices and means for queue management and accessibility of websites;

(d) Service provision by alternative technological means, such as telephone, facsimile, electronic mail and text messages. Oral information should also be made accessible by alternative means such as recording, writing or simplified language.

Accessibility of Internet sites

212. The *Service Accessibility Regulations* set requirements for providing accessibility to information, including access to service and information regarding services provided on online websites. Israeli Standard IS 5568 has adopted the international web content accessibility guidelines of the international organization W3C. Accessibility adjustments allow persons with various disabilities such as visual impairment, physical disability of the hands, hearing disabilities, cognitive and learning disabilities, to make effective use of the services and information offered on the website. These regulations mandate gradual accessibility of websites.

213. The owner of the service or the service provider is required to provide the accessibility of services provided online. When a service is provided by a third party platform, the service provider shall conduct the required accessibility adjustments that can be implemented by the platform.

214. The obligation of accessibility applies to documents, pages, applications and any service or information regarding a service provided online. An exemption from accessibility may be requested due to economic burden or lack of technological feasibility.

215. For further information, see Article 9.

Article 22

Respect for privacy

216. The *Protection of Privacy Law 5741-1981*, includes provisions on the protection of the right of privacy and personal information of all persons, including PWD. The Law does not specifically reference PWD, but the personal information that is protected by this Law includes data about a person's health condition. The Law contains a general obligation not to infringe upon the privacy of a person without consent (even without regarding databases), including prohibiting breaking the obligation of confidentiality prescribed by Law with regard to the personal matters of a person, prohibiting the use of knowledge of the private matters of a person or passing it to another person for any reason but the one for which the information was given, and prohibiting publishing matters regarding a person's private life, including her/his health condition.

217. Additionally, Section 19 of the *Patient's Rights Law 5756-1996*, establishes the obligation of medical confidentiality for patients. According to this Section, a caregiver or medical institution shall keep confidential all information related to the patient that was attained while performing their duty or during the course of their work.

218. For additional laws regarding this issue, see part 2 of Annex II.

219. Although due respect is given to the privacy rights of PWD, services for PWD do not adopt a policy of concealment. For example, most out-of-home services for PWD are open to family visits most hours of the day, as well as for visits from supervisors and volunteers. Furthermore, various activities are held in the community as part of the general aim to include PWD.

Article 23

Respect for the home and the family

Marriage in Israel

220. Marriage and divorce in Israel are regulated according to the religious law of each religious community: Jews, Muslims, Christians and Druze.

221. The SOI has expressed its reservation regarding Article 23(1)(a) as stated in the Introduction above. However, Israel has no legislation preventing PWD from marrying, raising a family, parenting and establishing relationships.

Marriage, partnerships and parenthood

222. In order to promote the rights of PWD to establish a family and to enjoy family life, some support programs in the field of marriage and partnership, parenthood with disabilities, “Special families” – support of families with disabled children and additional projects involving parental empowerment, are provided. For further information, see part 2 of Annex II.

Provision of alternative care to children or parents with disabilities in specific cases

223. According to the Convention on the Rights of the Child (CRC), Israeli law concerning the care of children treats the welfare and best interests of the child as a paramount consideration in determining and supporting care arrangements.

224. As a rule, the MOLSASS makes every effort to allow parents to raise their children at home in the best possible way and to avoid separating children from their families. Various programs exist with the aim of preventing the abandonment or neglect of children with disabilities by their parents. All programs and services for parents and their children have been developed with this view, with full cooperation and consent of the families involved.

225. Disability of the parents or the minor does not serve as grounds for the separation of a child from her/his parents. In general, such separation can only occur when a court defines the minor as a “minor in need”. This determination is based on the capability of the parents to treat the child and to provide for her/his needs. Only in cases where it is proved that there is no such parental ability, even following the provision of assistance by the MOLSASS, such separation might be considered by the Courts. For information on benefits for families aimed at assisting children to live with their families, see Article 19.

226. The *Children Foster Care Law 5776-2016*, was approved by the Knesset on 23 February, 2016. This Law was legislated to better protect the welfare and interests of foster children. Section 18 of the Law regulates the rights of children with disabilities who are assigned to foster care according to their best interest and benefit. This Section states that a foster care family caring for a child with disabilities is responsible to provide for her/his needs and ensure the realization of her/his rights, while considering her/his disabilities and making the necessary adjustments. Section 36(a)(3) of the *Children Foster Care Law* stipulates that a general treatment plan will be prepared for every child assigned to a foster care family by the official authority. Such treatment plan will include, *inter alia*, the needs of the child for special education, or special adjustments if it is a child with disabilities. According to Section 46(a) of the Law, a foster care family will receive payments which will be calculated according to the needs of the child, including her/his special needs. Section 46(g) of the Law states that a child with disabilities assigned to a foster care family will receive the same benefits as other children with disabilities.

Article 24

Education

Access to education

227. On the basis of equality established under the *Equal Rights Law*, children with disabilities have the same rights as other children. The guiding principle in the provision of equal rights to children with disabilities is allowing the exercise of their rights, as much as possible, in general education. In addition, there are provisions of the Law that refer to the relevant accessibility needs of children with disabilities in order to mainstream them into general education.

228. According to the *Special Education Law 5748-1988*, every person with disabilities between the ages of 3 to 21 is entitled to receive free special education services. On 24 July, 2002, this Law was amended to include Chapter 4A according to which PWD are also able to integrate into the general education system and receive the same services as the general population, according to the *Compulsory Education Law 5709-1949*.

229. Section 2 of the *Special Education Law* establishes that the purpose of special education is to promote the skills and abilities of the child and to grant her/him knowledge in order to facilitate her/his participation in society and the workforce. Section 7(b) of the *Special Education Law* stipulates that as a first priority, a child with special needs should be placed in an official educational institution which is not an institution for special education.

230. The overarching goal is to integrate PWD into society. In the case of a child with disabilities, this takes the form of integrating her/him into an official educational institution and providing various adjustments according to the child's individual needs. There is no differentiation made between the education of girls and boys with disabilities in the various educational stages.

231. The Ministry of Education (MOE) has initiated a pilot project to enhance inclusion, the "Dorner Project". This project adopts the principles of personal budget, parents' choice and budget according to functioning and not according to impairment type, and has been implemented in 12 Municipalities (5%).

Special provisions for enhancing education

232. Special education and general educational institutions are obligated to accommodate the unique needs of each child. This is done in the following ways:

(a) Formulating a Personal Program – Section 20(g) of the *Special Education Law* imposes the obligation on educational institutions to create an individualized educational program for every pupil with disability;

(b) Additional Teaching Hours – Section 20(b) of the *Special Education Law* stipulates that a pupil learning in a general educational institution is entitled to additional teaching hours and special services, including diagnostic instruction, paramedical treatment, psychologist services and more;

(c) Increasing The Educational Staff – the MOE assigns personal assistance to children with special needs who study in special education institutions as well as in the general educational institutions, according to the *Special Education Law* and Circulars of the MOE Director General;

(d) Transportation – children with certain disabilities and according to specific criteria are entitled to receive transportation to and from school.

Accessibility to educational institutions

233. According to the *Equal Rights Law* and the MOE guidelines, schools are to be made accessible on an individual basis for a disabled pupil or disabled parent. These adjustments include installing an acoustic classroom, ramps or lifts, accessible toilet, or any other adjustments that a child may need.

234. All new educational institutions are to be built with certain adjustments. According to the Chapter H of the *Planning and Building Law*, a permit will be denied for the construction of a school without accessibility for PWD. The requirements are to make at least one story accessible, as well as access routes to it and its outside areas, including accessible parking. Required accessibility adjustments include accessible routes inside the building for mobility disabled persons, including entryways, doorways, partitions, ramps, as needed. In addition, bathrooms, water fountains, light and other switches, public phones and alarm systems must also be accessible. Furthermore, new educational institutions must comply with all requirements that apply to existing schools.

235. As for existing schools – an elevator shaft, an accessible passage between different parts of the institution and accessible toilets for PWD are required according to the provisions in the *Equal Rights of Persons with Disabilities (Adjustments for Access to an Existing Educational Institution) Regulations 5771-2011*.

236. In order to ensure that a child can attend an accessible school; parents are allowed to register their child a year prior to other pupils in order to enable the school time in advance to install the required accessibility adjustments in advance of the child's arrival.

237. The MOE allocated a budget of 470,000,000 NIS (123,036,649 USD) (over 10 years 2010–2019), for such individual and general accessibility measures.

238. The Commission informed all the local authorities of their obligation to make the schools generally accessible, and received their accessibility plans in order to proceed with enforcement.

Measures taken to ensure education is delivered in the most appropriate languages, modes, means of communication, and environment for the individual

239. The MOE has a training and support system for education personnel that provide guidance to education staff working with pupils with disabilities on how to effectively accommodate the environment and learning materials for these pupils. For further detailed information on this system by type of disability, see part 2 of Annex II.

Training provided to professionals in the education system

240. In Israel, the training of university or college students for special education is conducted in schools of education and academic institutions. A dedicated study track for hearing impairments is offered at several academic institutions in Israel, including to the Arab population. Likewise, an obligatory 3-year course is held to expand the competence and accreditation of teachers working with visually impaired pupils. A system of advanced study courses for professional development also exists.

241. PWD are integrated into the educational staff of the special education system in Israel. In 2015, the MOE allocated 200 weekly hours dedicated for the absorption of disabled education workers. In 2016, the MOE absorbed 20 education workers with various disabilities into several schools around the country, both in the Jewish and Arab populations.

242. For statistical data on children with disabilities within the Israeli education system, see Annex I.

Students with disabilities in higher education

243. Higher education facilities in Israel are open to the public, and discrimination on the basis of disabilities is prohibited. The *Equal Rights of Persons with Disabilities (Accessibility Adjustments to Existing Public Places which are Institutions of Higher Education and for the Higher Education Services they Provide) Regulations 5776-2016*, include provisions on physical accessibility adjustments and services required at higher education institutions. These Regulations also promote accessibility and equal rights for PWD in the acceptance process for these institutions. These Regulations are implemented gradually.

244. The rehabilitation services of the National Insurance Institute (NII), and the Ministry of Defence (MOD) fund professional trainings and higher education tuition to persons who are eligible, as well as provide assistance and needed adjustments during their studies. For further information, see Article 26. The MOH provides support to 140 students with disabilities studying in universities and to another 100 students in vocational training annually.

Article 25

Health

Prohibition of discrimination in medical treatment

245. According to the *National Health Insurance Law 5754-1994*, every Israeli resident enjoys comprehensive health insurance coverage that provides good quality healthcare corresponding to international standards. The health tax which funds the National Health Insurance is a progressive tax linked to income-level, and not to the range of required health services. The enjoyment of medical services is not conditional upon payment of the health tax. There is a requirement for a minimal co-payment for certain services, but in order to avoid harming the least capable socio-economic groups, the following are exempt from the co-payment requirement: residents receiving supplemental income payments pursuant to the *National Insurance Law*, residents receiving support payments pursuant to the *Maintenance (Assurance of Payment) Law 1972-5732*, residents receiving invalidity or disability allowances pursuant to the *National Insurance Law*, and residents who have HIV/AIDS, cancer, dialysis or other specified illnesses (partial exemption).

246. Section 21(a) of the *National Health Insurance Law* specifies that health funds shall provide its members with all health services prescribed by Law, whether itself or through other service providers, without discrimination, and shall not condition any of the services included in its basket of services by joining or by membership in any program of additional services.

247. *The Equal Rights of Persons with Disabilities (Accessibility Adjustments to Health Services and Places providing these Services) Regulations 5776-2016*, stipulate that health services, as an integral part of services provided to the general public, shall be provided to a person with disabilities in an equal, dignified, and safe manner, while maintaining the same level and quality of services provided to the general public. These Regulations address the physical accessibility requirements that need to be made in existing medical institutions.

248. Furthermore, according to the *Patient's Rights Law*, every member of the health system is committed to refrain from all forms of discrimination and maintain the patient's privacy, in the spirit of the Law. Section 4 of the Law prohibits any persons providing medical service to discriminate on the basis of religion, race, gender, nationality, country of origin, sexual orientation, age or for any such other reasons.

Prohibition of discrimination in health insurance

249. Section 10 of the *National Health Insurance Law* regarding "additional health services", allows health funds to offer their members, under certain conditions, additional health services. Section 10(c)(1) of the Law explicitly specifies that a health fund shall allow any member to join the program, regardless of her/his medical or economic status, and shall not limit her/his ability to join or her/his rights when joining by any condition, except by reasonable qualification periods, to be prescribed for all members of the program regarding the various services provided under such program, and provided that such qualification period is not prescribed regarding services included in the basket of services of the health funds to persons who were members and who joined the program not later than one year after any changes to the basket of services of the health fund. The MOH is not aware of any cases where a health fund has violated the provisions of this Section in respect to a person's disability.

250. Furthermore, Chapter 5A Mark H of the *Equal Rights Law* is designated to ensure that PWD shall not be discriminated against when conducting insurance contracts. For further elaboration, see Article 5.

Early detection of impairments and illness and awareness-raising

251. Various procedures of the MOH exist for the early detection and intervention of secondary disabilities, such as: instructions for annual comprehensive examinations, screening examination according to the guidelines of the MOH, specific follow-up examinations in accordance with the instructions of an expert (level of medication in the blood, ECG), identification of Poly-Pharmacy populations, and reference of the population to expert advice at a national level.

252. Screening examinations are conducted at hospitals, Mother and Child Health Care Stations and child development institutions, and these include birth genetic testing, hearing tests, communication and motor skills and language testing at Mother and Child Health Care Stations. These examinations allow for early referral for treatment. Continued developmental observation takes place in child development centers and in schools.

253. The MOH acts to increase awareness among various professionals (Mother and Child Health Care Stations, child development centers) for the need of early detection of impairments among toddlers.

Training of medical personnel and the Ministry's website

254. The MOLSASS and MOH work together to develop training and enrichment programs regarding the rights of PWD, in cooperation with relevant experts, in order to develop the knowledge and professional skills of medical teams in this area. These trainings are conducted within the health system, in the academia, in various health, advance trainings and advanced education for nurses, courses in nursing schools, medical students training, and more.

255. The MOH is acting to make its services accessible. In addition, the MOH has made its website and the website "All Health", providing information on all services for which insured persons are entitled, available in an accessible and user friendly manner.

Raising awareness of HIV/AIDS

256. The MOH has guidelines strictly forbidding any kind of discrimination against HIV/AIDS patients in all health facilities. All cases brought to the attention of the Ministry are addressed and actively dealt with.

257. In addition, the MOLSASS has developed a long-term program for the prevention and treatment of infections that includes training teams, developing educational software, developing modules for caregivers training courses, and guidelines for all personnel involved in these facilities.

258. The subject of HIV/AIDS is also addressed in social sexual education workshops conducted in various facilities to PWD.

Sanitation facilities

259. Chapters H and H1 of the *Planning and Building Law, Equal Rights for Persons with Disabilities (Site Accessibility Adjustments) Regulations, Equal Rights for Persons with Disabilities (Accessibility Adjustments for a Public Place which is an Existing Building) Regulations*, Israeli Standard No. 1918 issued by the Israeli Standards Institution (as mentioned in Article 9 above), all refer to the subject of sanitation facilities (public restrooms) and their accessibility. In principle, any public place is required to install accessible restrooms within reasonable distance, except places which are exempted (such as small restaurants). The Commission enforces the implementation of this requirement and provides assistance and technical materials.

Specification of services provided to the elderly

260. Services for the elderly are provided by the MOLSASS to elderly persons who require assistance in their everyday functioning. For additional information, see part 2 of Annex II.

Article 26**Habilitation and rehabilitation****Rehabilitation services**

261. The Government funds a wide range of services that contribute to habilitation and rehabilitation, and in turn, also serve to support independence. These are provided by MOH, MOD and NII. Participation in these programs is voluntary and takes into account the person's requests. Habilitation and rehabilitation are mostly provided in community settings.

262. The rehabilitation division of the NII informs persons who might be eligible for their services in writing that they can submit requests for the services. Furthermore, the rehabilitation division of the NII is promoting awareness by conducting round-tables, seminars etc.

263. The service providers are trained regularly. The rehabilitation division of the NII, for example, regularly provides professional enrichment for its employees at least once a year, through seminars, conferences, excursions at places of work, introduction to various community programs, as well as regular guidance and feedback from senior rehabilitation instructors. In addition, care services for persons with autism maintain professional trainings to personnel in various professions.

Accessibility of professional and vocational training

264. According to the *Equal Rights for Persons with Disabilities (Accessibility to Professional Training Services) Regulations*, PWD have access to the professional training services offered to the general public under the supervision of the Ministry of Economy and Industry (MOEI), provided they meet the acceptance terms. According to the Regulations, the provider of such training shall conduct the necessary adjustments for PWD, at no additional costs and in a respectful manner. The Regulations also apply to written or oral, theoretical or practical exams conducted according to the curriculum.

Training services and existing plans

265. Rehabilitation services and programs are provided to PWD by various relevant bodies, including the Rehabilitation Department at the MOD, the Rehabilitation Department at the MOLSASS and others. For additional information, see part 2 of Annex II.

266. As for the rehabilitation of minors, see Article 7.

Availability of rehabilitation aids and assistive technologies

267. Aid devices are provided directly to PWD by various service providers, and indirectly by accessibility requirements in the *Service Accessibility Regulations*. The MOH provides rehabilitation and mobility devices pursuant to the third Addendum to the *National Health Insurance Law*. This equipment includes wheelchairs of different types, walkers, special wheelchair pillows, wheelchair seating systems, beds, mattresses, home lifts, walking aids, stair climbers, stair chairs, standing aids for children and youth and also hearing aids for children and for the elderly. The MOH also operates a number of rehabilitation centers.

268. The MOD rehabilitation department provides assistive technologies in relevant cases, such as reading technology for the visually impaired and the blind, adjusted computer equipment, and more. The services of the MOD rehabilitation department include medical rehabilitation, adjusted vehicles, rehabilitation aids required for mobility, service animals, technologies and aid devices. The MOD rehabilitation department continuously examines the possibility of adding new technologies to the basket of services provided to PWD and

provides disabled IDF veterans with high quality technologies free of charge. For additional information on this issue, see part 2 of Annex II.

International cooperation for assisting technologies exchange

269. Israel, through MASHAV – Israel’s Agency for International Development Cooperation within the Ministry of Foreign Affairs (Mashav), implements several programs in the field of rehabilitation, both in Israel and abroad. For additional information, see part 2 of Annex II.

Article 27

Work and employment

Prohibition of discrimination and required adjustments

270. According to the *Equal Rights Law*, discrimination on the grounds of disability in employment is unlawful.

271. Section 8(a) of the *Equal Rights Law* prohibits employment discrimination against a person with disabilities, by reason of her/his disability. Discrimination is prohibited in hiring, employment terms (including payment), promotion at work, setting irrelevant conditions, and dismissal. The prohibition on discrimination in employment applies where a person with a disability is qualified for the job or the position in question; and under Section 8(c) of the *Equal Rights Law* that any act or any omission of an act, made necessary by the substantive requirements of the position or job, is not deemed to be discrimination.

272. Section 8(d) of the *Equal Rights Law* prohibits discrimination against family members of PWD (e.g. spouse, parent or child), by reason of her/his disability, as well as against a person who is regarded as having a disability even if she/he has none, or against someone who had previous disabilities.

273. According to Section 12 of the *Equal Rights Law*, a person who suffered from discrimination in employment is entitled to the protection of the Law and may apply to the Labor Courts independently or may be represented by the representative employees’ organization at the workplace, by the Commission or by an organization that engages in the advancement of rights of PWD, provided she/he consents thereto. The Commission provides legal aid to persons who have experienced discrimination, assisting in employer-employee mediation proceedings and in submitting petitions to the relevant courts. The commission receives 500 complaints each year, uses legal actions, and in some cases has submitted cases of discrimination at the workplace to courts.

274. Recognizing the great need for adjustments at the workplace in order to maximize integration of PWD in the world of work, Section 8(e) defines discrimination so as to include the failure to make adjustments required by virtue of the special needs of a person with disability in order to facilitate her/his employment. It is important to emphasize that an employer is not obligated to implement adjustments at the workplace if they affect the essence of the job or the position or if they would impose an “undue burden” in the light of a number of factors including the cost and nature of the accommodation, the size and structure of the business, the scope of activity, number of employees, composition of the staff and the existence of external or State sources of financing for the adjustment.

275. Adjustments measures at the workplace can be of various forms. Thus for example, they can be physical adjustments, such as the installation of a lift or an accessible lavatory or a ramp, or adjustment of the personal work station, including the adjustment of equipment or provision of auxiliary tools and aids; or they can be non-physical adjustments, such as a change in work procedures, adjustment of the job requirements, enabling of flexible work hours, adjustments in instruction and training, etc.

Affirmative action in employment

Affirmative action by large employers in the private and public sector

276. Section 9 of the *Equal Rights Law* stipulates that if an employer with over 25 workers finds that PWD are not appropriately represented among her/his employees, she/he shall act to promote such appropriate representation, including making adjustments to the workplace.

277. According to the current data, only 34% of the large employers (both public and private) employ more than 3% of PWD. A number of steps have been taken in order to give effect to the basic obligation under Section 9 of the *Equal Rights Law*:

(a) Implementation of Section 9 in the Private Sector: On July 6, 2014, the Minister of Economy and Industry³ signed the Expansion Order for Promoting Employment of PWD which came into effect on October 5, 2014. This Order applies to the entire Israeli workforce and expands the agreement that was signed between the employers and the largest trade union in Israel, the "Histadrut". The Order defines the term "appropriate representation" in Section 9 in relation to employers with over 100 employees as 3% of PWD in the workforce. Under the Order, employers are to appoint a designated employee to supervise the implementation of Section 9. The purpose of the Order is to increase the number of employees with disabilities in the Israeli job market, by obligating the employer to verify that her/his organization/business is employing PWD within the scope determined in the agreement and/or to take steps to promote and integrate additional workers with disabilities in the workplace;

(b) Expansion of Section 9 in Relation to Large Public Sector Employers: On August 16, 2016, Amendment No. 15 to the Equal Rights Law concerning appropriate representation for PWD by public sector employers was published in the Official Records. This Amendment entered into force in January 2017. According to this Amendment, public sector employers (principally: local authorities and statutory corporations) with more than 100 employees who do not have in their employment at least 5% persons with significant disabilities, are obligated to prepare and post on their website an annual work program designed to promote the employment of persons with significant disabilities in her/his workforce including affirmative action and outreach measures as detailed in the Amendment. The Commission is authorized to issue affirmative action orders to Public Sector employers covered by the Amendment, who do not comply with their obligations to prepare and post on their website their annual program, or who do not implement their program. In addition, every Public Sector employer with 25 or more employees will have an obligation to appoint an Equality Officer, who will be charged with promoting employment of PWD by that employer;

(c) On 22 December, 2016, Amendment No. 34 to the *Government Companies Law*, 5735-1975, entered into force. This Amendment sets an obligation of government companies to have appropriate representation of several population groups among its directors, including PWD. The Government Companies Authority declared its wish to reach a goal of 3% representation for PWD among the directors of the companies.

Affirmative action in the CS

278. The *Civil Service (Appointments) Law* 5719-1959, established the duty of appropriate representation for PWD in the CS workforce and to this end directs the CS to take steps which are likely to promote the employment of PWD. The Law provides two main employment promotion tracks for PWD in the CS:

(a) Giving preference in hiring and promotion to PWD, or persons with certain types of disabilities, over other candidates, provided they have similar qualifications to those of the other candidates;

³ In July 2016, the function and powers of the Ministry of Economy in relation to employment were transferred to the Ministry of Social Affairs and Social Services which became Labor, Social Affairs and Social Services.

(b) Designating certain positions for the employment of PWD, or persons with certain kinds of disabilities, provided they are qualified for the job.

279. Since the enactment of these provisions in the Civil Service (Appointments) Law a number of measures have been put in place in order to give them practical effect:

(a) The CS code, known as the “Takshir”, was amended in 2003, to include operative provisions on the making of adjustments in the workplace and the implementation of positive discrimination of persons with severe disabilities;

(b) GR No. 4193 (2012) allocated 45 special positions in the CS to PWD;

(c) Following a more recent decision, GM have to allocate 1 in 3 posts to appropriate representation groups, including PWD;

(d) By virtue of Amendment No. 15 to the Equal Rights Law mentioned above, the CS must reach the 5% goal for employment. The same Amendment also gives authority to the CS Commissioner to take enforcement action with a view to achieving the 5% goal.

Incentivizing employment through a change in the allowance payment system

280. In order to allow PWD to work without losing their disability allowances, an Amendment in the *National Insurance Law* was enacted in 2009 (Amendment No. 109). In the past, a monthly income of more than 2,500 NIS (654 USD) ruled out entitlement to the allowance, and it was therefore not worthwhile to seek employment. To date, the allowance is not ruled out for someone who earns this amount, but rather it is gradually diminished by small amounts so that a person’s total income from work and allowance combined together will always be more than the amount of the allowance alone. In addition, entitlement to fringe benefits according to the established rules and regulations are not harmed. A safety net is provided for three years if a person stops working, or if income decreases one can return to receiving the disability allowance as she/he did before, without additional examinations.

Programs and projects for the encouragement of employment

281. The Administration for the Integration of PWD at the Workforce in the MOLSASS (hereinafter: the “Administration”) was established for the purpose of improving the employment situation of PWD in Israel, and operates numerous programs and projects to accomplish this. The projects reviewed henceforth are mostly implemented by the Administration:

(a) Funding of Adjustments. In order to implement the provisions of the Equal Rights Law with regard to adjustments for PWD at the workplace, and to ease the financial burden on employers, Regulations were enacted in 2006, for State participation in the funding of adjustments under the Equal Rights for Persons with Disabilities (State Participation in Financing Adjustments) Regulations 5766-2006. These Regulations allow an employer of an employee with disabilities, or an employer who intends to hire a person with disabilities, to apply to the Administration in order to receive government participation in funding of the adjustments required in the employee’s workplace environment, based on her/his disability, needs and attributes, so that the employee will be able to perform her/his job and to function in the workplace like other employees. Participation in the funding of the adjustments that an employer is required to implement by Law for an employee with disabilities is a key tool in encouraging employers to employ PWD. The reduction in costs helps to remove a major barrier to employment by employers who fear the high extra costs entailed in employing PWD. The Regulations also serve as the basic tool for funding various programs focusing on the optimal integration of employees with disabilities and their promotion in the workplace. Adjustments are also provided for an employee with disabilities who works from her/his home and not on the employer’s premises – both physical adjustments of the work environment in the employee’s home and participation in the cost of technological means for maintaining contact with the employer and the customers. At times, adjustments have also been approved both in the workplace and in the employee’s home in cases where the employee was working from both locations – subject to the provisions of the Regulations and to the maximum amounts set by them. The total

amount of Government participation in the funding of adjustments for employees with disabilities that were approved until December 2015, was approximately 20,900,000 NIS (5,471,204 USD);

(b) Employer Centers. The MOLSASS has opened three centers providing long and short term support to employers who want to employ PWD, assisting them with all the processes required for employing new workers with disabilities and keeping those employed at the workplace. Beyond providing information and working on attitude changes, the centers provide substantial assistance. For example, the centers assist employers to receive a subsidy for accessibility adjustments, run seminars for the employers providing them with relevant information about employing PWD, assist in filling required forms, actively seek new employers and offer their services, and assist employers in building a suitable plan to enhance employment. The centers also assist the employer in locating workers with disabilities for filling positions and in implementing a suitable plan for the business, provide guidance as necessary during the period of employment, and follow up on the achievement of the goals. An examination of the centers' performance data and compliance with their aims shows a significant impact of their activities, as reflected in an increase in the number of employers who applied to the center and who are willing to employ workers with disabilities, as well as an increase in the number of positions and variety of jobs available to PWD;

(c) Classified Ads Website. The MOLSASS, in cooperation with the Commission and other GM, has funded the development of a website which provides a platform for employment. The internet site includes information for employers and employees and allows employers to publish jobs for PWD. Employees can register to the site and receive job offers that fit their qualifications;

(d) Programs for Working Placement and Inter-Sector Cooperation. For information on the "Revadim", "Rampa", "Siftah" and other programs, see part 2 of Annex II.

Facilitating real work for real pay sheltered employment

282. Sheltered employment is a rehabilitation vocational service provided by the Government (MOH and MOLSASS) and established in internal procedures of the relevant Ministries. Persons in sheltered employment receive some remuneration for their work but are not part of an employer-employee relationship and as such the labor laws do not apply to them.

283. Currently, the MOH has been working to develop significant sheltered production infrastructures that will allow for more profitable rehabilitation payment (5-15 NIS (1.3-3.9 USD) per hour). Another highly developed area is that of social entrepreneurship, which enables the establishment of integrating sheltered employment enterprises.

284. The MOLSASS is promoting sheltered employment that would promote rehabilitation by taking several actions: Firstly, adding social workers in the sheltered employment to improve employment ability. Secondly, creating training programs in order to reduce the number of PWD working in sheltered employment and advance them into the work field. Thirdly, development of entrepreneurship with the business market in the sheltered employment in order to try to employ persons within the sheltered factory.

Supported employment

285. In the past years, there has been a continuing shift away from sheltered employment into supported employment in the general workforce, with additional support and guidance where required.

286. The MOLSASS has developed models for supported employment in the open employment market, which essentially deal with the preparation for employment and placement of a person with disabilities in supported employment in the open employment market and supportive services provided during the course of employment. Similar supported employment programs are also maintained for IDF veterans.

287. Thus for example, there are programs for placement of highly functioning persons on the autistic spectrum into the workforce. Until February 2014, roughly 200 persons have been enrolled in these programs.

288. Supported employment programs are also operated by the MOH. For example, as part of the basket of services included in the *Rehabilitation of Persons with Mental Disabilities in the Community Law 5760-2000*, persons with mental disabilities receive an array of support which are intended to assist them in realizing their full occupational potential.

289. In recent years, the MOH has paid a bonus to sheltered employment entrepreneurs for the integration of rehabilitated persons into the free market through supported employment. In recent years, more than 5,000 persons with psychiatric disabilities have been integrated in the free market, and they are accompanied by the supported employment services which assist them in fully exercising their rights vis-à-vis the employers who are responsible for accommodating suitable physical and welfare-related conditions.

Adjusted minimum wage

290. As part of the move away from sheltered employment, and as an incentive to employers in the open market, there is a plan for individually assessed exemptions that allows reduced wages to be paid according to individual productivity. According to the *Equal Rights of Persons with Disabilities Employed as Rehabilitated Persons (Temporary Provision) Law 5767-2007*, the individual worker must approach the MOLSASS and request an evaluation. The evaluation is carried out by professionals, which determine whether the salary may be less than minimum wage. This is stipulated in the *Minimum Wage (Adjusted Wage for a Disabled Employee with a Diminished Working Capability) Regulations 5762-2002*.

291. An additional plan defines special provisions for PWD that are recognized as being in the process of rehabilitation (rehabilitée). These are persons that have been evaluated to have less than 81% of the regular work capacity in the same job and workplace. These persons are employed without a worker-employer relationship, yet they receive part of their rights under labor laws which employees are entitled to, such as a certain amount of remuneration (occupational remuneration) and are provided with certain benefits given to other workers such as days of leave, sick days, travel expenses, and maternity leave.

292. Apart from these exceptions (i.e. rehabilitées and persons with reduced work capacity), PWD are entitled to the same rights as any other employee, and must be compensated with a suitable wage that is at least the minimum wage. Failure to pay the minimum wage, or if applicable the adjusted minimum wage, constitutes an administrative violation which is subject to a financial sanction of 35,000 NIS (9,162 USD) and in appropriate cases prosecution of the violator. The violator is liable to a penalty of up to one year imprisonment or a criminal fine of 226,000 NIS (59,162 USD).

293. For statistical information, see Annex I.

Article 28

Adequate standard of living and social protection

Benefits of the NII and supporting system of the MOLSASS

294. Primarily through the NII, Israel provides a safety net for PWD through various long term allowances, benefits, and programs. These include:

(a) General Disability Allowance – given to persons with 60% medical disability (or 40% disability under certain conditions) who have lost at least half of their earning capacity due to their medical condition. The allowance is paid also to persons who earn a salary up to a certain level. The maximum allowance for a single person is 2,342 NIS (641 USD), an extra 937 NIS (256 USD) is added for up to two children each, and for a married person an additional 1,172 NIS (321 USD) will be provided under certain circumstances;

(b) Special Attendance Allowance – paid to cover the cost of long term care for persons with severe disabilities who are below the retirement age and evaluated as requiring care. This allowance is between 1,095 and 4,115 NIS (300–1,127 USD), certain additions were updated in January 2017;

(c) Long Term Care Allowance – paid to senior citizens who need assistance with activities of daily living;

(d) In addition, persons with severe physical mobility disabilities that meet the eligibility requirements may receive an additional Mobility Allowance to assist in transportation expenses; this allowance is higher for PWD who are employed;

(e) Various other allowances are paid to certain target populations of disabled persons, such as persons disabled by Polio, work-related disabilities, and survivors of terrorist attacks.

295. To support persons living in the community, children with specific disabilities and medical conditions are eligible for Disabled Children's Allowance. In some cases, the allowance can be received even from the age of three months to assist the family in providing care to the child at home.

296. The NII assists persons with physical disabilities to purchase a vehicle by exempting them from paying taxes for the vehicle and providing them with a grant and loan worth 2/3rds of the vehicle's value.

297. Additionally, the MOLSASS provides a variety of services such as personal and nursing care, support workers, and day-care centers that are provided according to the existing disability and either free of charge or for a minimal fee by the person receiving the service. The services are available nationwide and assist persons with different levels of disabilities, all according to the annual budget.

298. On August 5, 2015, the *National Insurance Law 5755-1995*, was amended to include a regulation on the limitation of fees for handling cases by lawyers and/or other bodies. According to this Amendment, legal aid will be provided free of charge and regardless of financial eligibility tests in claims or execution procedures against a person in the matter of fees for handling certain allowance claims, including disability allowances.

299. In the State budget for 2017–2018 few measures aimed to improve the economic condition of persons who are entitled to disability allowance were inserted and 300,000,000 NIS (78,534,031 USD) were allocated. These measures are aimed on the one hand to increase the income of severely disabled persons who are not able to work, and on the other hand to encourage PWD who are able to work, to integrate into the labor market, in order to increase their income.

Benefits for IDF disabled veterans

300. The *Persons with Disabilities (Allowance and Rehabilitation) Law* applies to IDF soldiers in mandatory service, military reserve service, and military regular service with injuries or sickness during and due to their service. Currently, the Law also applies to those who serve in the Israeli Police, IPS, Israel Security Agency, Israeli Secret Intelligence Service and the Knesset Guard – approximately 56,000 persons with different levels of disabilities. According to this Law, PWD are eligible to a number of living-benefits if they are unable to work, temporarily or permanently, due to their disabilities. Additionally, those who do not qualify under the conditions set by the Law, but have lost their capability to work, may request a special remuneration. There are also medical, rehabilitative, welfare, and housing benefits, including making housing more accessible, providing grants to purchase apartments, subsidized loans, assistance in funding the rent, etc. The Department for Rehabilitation of PWD at the MOD assists in finding housing solutions by providing special rental conditions in State-owned apartments, according to the supply of apartments and eligibility criteria set by the Department.

Equal access by PWD to clean water services

301. The State recognizes the importance of access to clean water for PWD. This issue is regulated by several sets of Rules and Regulations. For additional information, see part 2 of Annex II.

Access to housing

302. The Ministry of Construction and Housing operates a unique assistance project in order to make self-owned or State-owned apartments accessible to PWD found eligible to the specific program. This assistance is given as a grant or loan, according to an income test and family size. Some PWD are eligible to loans, rent assistance and apartments that are purchased as assets for assistance in acquiring public housing. For additional information, see part 2 of Annex II.

Article 29**Participation in political and public life**

303. PWD in Israel are fully eligible to vote, be elected to political position, and participate in public life.

Voting

304. According to *Basic Law: The Knesset* 5718-1958, every Israeli citizen over the age of 18 (with few exceptions) who is present in the country on the day of elections has the right to vote for the Knesset (the Israeli Parliament). There is no distinction on the basis of disability.

305. The right to vote in elections for a local authority is established in Section 6A of the *Local Authorities (Elections) Law* 5725-1965, which stipulates that a person who is registered in the voters' registry of a particular local authority is eligible to vote in the elections of that local authority. This Section also applies to elections for a municipal quarter. There is no distinction on the basis of disability.

Ensuring access to vote

306. The *Knesset Elections [Consolidated Version] Law* 5729-1969, and the *Local Authorities (Elections) Law* establish several arrangements aimed to ensure that PWD are exercising their right to vote, including by a making polling stations physically accessible, enabling voting in hospitals and in institutions by persons with limited mobility, allowing voting with the assistance of another person and providing transportation to polling station, as detailed in part 2 of Annex II.

307. The Central Elections Committee acts constantly to ensure that each voter with disabilities is able to exercise her/his right to vote, *inter alia*, by providing relevant information, lists and deployment of accessible polling stations and regarding the development of a new related website. For additional information, see part 2 of Annex II.

Right to be elected

308. According to the *Basic Law: The Knesset*, every Israeli citizen over the age of 21 has the right to establish a political party and run in elections for the Knesset (with few exceptions). There is no distinction on the basis of disability. Currently, there are at least three Israeli members of parliament who are PWD and involved in promoting the rights of PWD.

Support for civil society organizations dealing with rights of PWD

309. In Israel there are a myriad of representative organizations for PWD and DPOs, many of which have a distinct focus. For example, there are organizations of the blind and visually impaired, hearing impaired, deaf, those with psycho-social disabilities, as well as several coalitions, "umbrella" organizations, and parent organizations. In addition to

representing their members' interests, the representative organizations also provide some services and leisure activities. Israel recognizes that the organizations are vital to promoting the rights of PWD and alleviating the challenges that they may experience. The MOLSASS and the MOH provide some financial support to these organizations, as well as funding for self-advocacy activist groups within the local authorities ("Accessible Community" nationwide program).

310. For example, in 2014, the MOLSASS allocated approximately 3,500,000 NIS (916,230 USD) of its annual budget toward various disability-related NGOs.

311. Legislative measures have been taken to strengthen the capacity of such organizations and facilitate their participation in relevant decision-making processes. Thus for example, pursuant to the *Persons with Disabilities (Allowance and Rehabilitation) Law*, the Minister of Defence designated the IDF Disabled Veterans Organization as the representative organization of IDF disabled veterans, and membership fees for the organization are deducted from the benefits paid to them. The organization promotes the full realization of the rights of disabled veterans by maintaining an on-going dialogue and conducting negotiations with the MOD. Other organizations represent the rights of PWD as a result of work-related accidents and victims of hostile activities.

312. Israel views the participation of PWD and their representative organizations in decision-making as highly important. Such persons face numerous challenges and the organizations representing them are key to protecting their rights and eliminating discrimination that they may endure.

313. Engaging and consulting with the public is an efficient and effective way of identifying the main challenges faced by PWD and providing a platform for their voice in legislation and policy making. Israel strives to further protect and improve the current dialogue with PWD and their representative organizations at the national and international levels.

314. In addition to the Commission Advisory Board (see Article 4 above), the on-going efforts to consult with organizations of PWD during the law and policy-making process can be demonstrated by the composition of various public committees reviewing relevant policies of GM (such as the NII and the MOLSASS) which include representatives of PWD. Moreover, when the Knesset Committees discuss the rights of PWD, such individuals and organizations representing them, are invited to the sessions and their perspective is of great value when formulating policy concerning the protection of their rights.

Article 30

Culture and sports

General

315. The Second Addendum (Chapter H1)) of the *Planning and Construction (Request for a Permit, its Conditions and Fees) Law 5730-1970*, applies to any newly constructed building, including buildings intended for culture, leisure, and sport. Accessibility is made for the public, in order to ensure access for PWD to culture and sport events, as well as to ensure that PWD can be members of sport teams or participate in theatre shows. The Regulations relate to elements such as seats, parking spaces, accessible restrooms, stage accessibility, dressing rooms, accessible showers, and restrooms for actors. In addition, there are accessibility requirements regarding amplifier systems for the hearing impaired, audio visual information transfer, and warning and guideline strips. All new buildings are required to consult with an Accessibility Expert.

316. The *Service Accessibility Regulations*, as detailed in Article 9 above, require the accessibility of culture, leisure, and sport sites. In particular, detailed requirements are prescribed for museums and libraries. Movies are required to have subtitles to a certain extent. Plays and shows are required to be made accessible to a certain extent, for example by means of subtitles and amplifier systems for the hearing impaired. Regarding accessibility to television programs, see Article 21. The Commission supervises the implementations of these Regulations.

317. The various support actions taken regularly and visibly by the Ministry of Culture and Sport (MOCS) throughout the years contribute to an increase in public awareness of the rights of PWD in culture and sports, and assist associations that operate in this area to promote the rights of PWD.

Accessibility of sport and cultural facilities

318. The MOCS assists in making cultural institutes accessible to PWD, thus promoting their ability to take part in cultural life. In 2014, the MOCS approved support funds in the sum of 8,300,000 NIS (2,140,278 USD) used for renovation and extension of cultural institutes, and, among others, for making cultural institutes accessible. Moreover, the Ministry approved in 2014, support funds in the sum of 5,760,000 NIS (1,507,853 USD) for libraries for visual accessibility.

Accessibility of recreational, tourism and leisure

319. Section 11 of the *Equal Rights for Persons with Disabilities (Accessibility Adjustments for Public Places that are not Buildings) Regulations 5774-2013*, mandate accessibility of all new playgrounds, of all central playgrounds intended for the use of the entire city or town, and of at least 50% of other existing playgrounds. These Regulations require accessibility of other recreational establishments and places as well, including zoos, beaches, sport facilities, public parks, memorials, and wedding halls.

Cultural activities

320. The MOCS supports the field of culture through support tests prescribed in Section 3A of the *Budget Foundations Law 5745-1985*, and according to procedures set by the MOF. To encourage the artistic creativity of PWD, financial support is provided to non-profit organizations that are dedicated to promoting the arts and creativity among PWD. In 2014, the MOCS provided support to several Non-Profit Organizations that operate projects for artists with various disabilities, the total support approved was 623,700 NIS (163,272 USD).

Accessibility to information for PWD in copyrights laws

321. On March 21, 2016, Israel joined the *Marrakesh Treaty to Facilitate Access to Published Works for Persons Who Are Blind, Visually Impaired, or Otherwise Print Disabled*, administered by the World Intellectual Property Organization (WIPO). The purpose of this Treaty is to create an exception to the intellectual property laws that will enable the creation of a copy of a published work, in a format suitable for use and enjoyment by persons who are blind, visually impaired, or otherwise print disabled, without the need of consent from the right holder. The Treaty is meant to ease the accessibility of works of art, culture and information to persons with such disabilities, as well as to increase their freedom of information and freedom of speech and assist them in acquiring knowledge.

322. Israel's accession to this Treaty expresses the importance that Israel attributes to the rights of PWD and the efforts it invests in promoting their rights. Israel anchored the Marrakesh Treaty internally through the *Making Works, Performances and Broadcasts Accessible for Persons with Disabilities Law (Law Amendments) 5774-2014*. The purpose of these legislative Amendments to the *Copyrights Law* and the *Performers and Broadcasters Rights Law 5744-1984*, is to increase the accessibility of works of art to PWD. The exception will also apply where an accessible format copy exists, but is not adequate to meet the needs of a particular person with disabilities or particular disability.

323. Furthermore, this Law prescribes wider arrangements than the Marrakesh Treaty in several matters. For example, the Law allows the creation of accessible formats for all PWD, and not only for persons who are visually impaired, as the Treaty mandates. In addition, entities that are currently obligated by law to make accessible format copies are specifically recognized as entities entitled to make use of the new permitted use exception, as well as GM and certain educational institutions.

Measures taken to promote deaf culture

324. As part of the promotion of culture for the hearing impaired the MOLSASS finances club activities for adults, children and youths with hearing impairment. The Ministry also aids in financing the activities of a musical band of deaf dancers, as well as the “Invitation to Silence” exhibition at the Children’s Museum in Holon. This exhibition exposes visitors to the world of deaf persons.

325. In addition, the MOCS supports the “Please Touch” center that operates various activities for persons with hearing impairments and vision impairments (the center operates a musical ensemble and produces various shows). In 2014, the Ministry’s support for the center amounted to 320,000 NIS (83,769 USD).

Sports activities

326. The MOCS acts to enable PWD to participate in various sports by financing associations that encourage and promote athletes among PWD and operates programs intended for the promotion of disabled children and youth. For additional information, see part 2 of Annex II.

Situation of disabled boys, girls and women

Article 6

Women with disabilities

327. All women with disabilities in Israel are entitled to enjoy their rights on an equal basis as men with disabilities and non-disabled persons. Israel is a party to the Convention on the Elimination of All Forms of Discrimination against Women.

328. The *Equal Rights Law* does not distinguish between men and women and treats all PWD equally, including women and girls. Thus, in practice, the rights of PWD are promoted and advanced in Israel in a gender neutral manner.

329. Statistical data indicates gaps between women with disabilities and men with disabilities in the areas of education and employment; it seems women with disabilities are less educated and less employed. Thus, for example, 38.5% of employed women with disabilities have been assessed by the MOEI for workplace adjustments, as opposed to 61.5% of men.

Article 7

Children with disabilities

330. 9% of children (ages 0–17) are children with disabilities (representing 246,300 children). Children with disabilities are entitled to the same health, education and other services as non-disabled children receive. Furthermore, the best interest of the child principle, anchored in the CRC, to which Israel has been a party to since 1991, is a primary guiding principle under Israeli law in the majority of child-related legal issues (including legislative, administrative and judicial issues), and applies to all children, among them disabled children.

331. The *Equal Rights Law* contains provisions requiring accessibility to kindergartens and schools, including general accessibility requirements, personal adjustments, and support for inclusive education according to the needs of the child. Furthermore, there are special educational systems for children with disabilities that are regulated under the *Special Education Law*, in addition to the provisions of the *Safe Transportation for Children and Infants with Disabilities Law 5755-1994*, that guarantees that the relevant local authority is responsible for providing children with disabilities transportation to educational institutions. For further elaboration, see Article 24.

332. There are a number of benefits and services which purpose is to support the child's right to live with her/his family. The NII provides disabled child benefits in order to assist the family in coping with extra expenses according to Chapter 9, Mark 6 of the *National Insurance Institute Law*. The *National Insurance Institute (Disabled Child) Regulations 5770-2010*, stipulate that additional payment is provided if the child is in need of constant care, in order to cover the cost of care to the child at home. Additionally, a parent of a disabled child, who is eligible according to the set criteria, may receive a vehicle benefit enabling the purchase and maintenance of a special vehicle.

333. The social services policy is based on the adjustment of the service to the specific needs of the person with disabilities, and less on her/his age. Therefore, in general when determining eligibility for different services that are given to PWD, there is no consideration of the age of such a person. However, an example of an arrangement determining eligibility for specific services for specific ages is the *Rehabilitative Day-Care Centers Law* which expanded the basket of services provided to infants with disabilities to include not only treatment and educational services available in rehabilitation day-care centers, but also the infants' transportation from their private residence to day-care center and back. When transported, the infant is accompanied by an adult, other than the driver, who is available to assist the infant when necessary. According to the Law, a rehabilitation day-care center provides treatment and education throughout the day to a minimum of ten infants with disabilities, either through the central rehabilitation day-care center or through one of its smaller branches. A rehabilitative day-care extension is considered to be one which provides treatment to a minimum of six infants with autism, hearing impairment, visual impairment or other recognized impairment, or an infant with other disabilities, whose place of residence is located over 25 kilometres outside the area of the original rehabilitation day-care center. The day-care centers provide services to over 1,500 children annually throughout the country.

334. In addition, the Fund for Development of Services for PWD in the NII provides assistance to day-care centers for children with disabilities. The assistance is given to child focused services, day-care centers, special education facilities (preschools, schools), treatment centers, workshops, clubs and learning improvement centers. The main assistance is in adapting treatment rooms and introducing unique and innovative equipment for the population with special needs. Due to the advantages of early diagnosis and treatment, this Fund aims to develop services for young children with special needs in order to help them realize their full potential and capacities.

335. Furthermore, Israel has a network of development clinics and various rehabilitation and medical services and equipment which children with disabilities are entitled to receive. For example, the Israeli national medical insurance covers the cost of a cochlear implant and hearing aids for children up to the age of 18 as well as adults, and the MOH provides a variety of mobility equipment. For further elaboration, see Article 25.

336. The MOH, MOE and MOLSASS operate different projects aimed to enhance self-advocacy and assist families with children with disabilities. During recent years, different projects have been organized, such as: a club for teenagers with autism who are integrated into the general education system in order to prepare them for independence; a project whose purpose is to encourage teenagers with disabilities to volunteer; preparations for independence projects for Bedouin youth from the south with physical disabilities; and a transition project that focuses on preparing teenagers who are integrated in general schools to serve in the IDF. Furthermore, the integration of children with disabilities into youth movements and several other projects are currently expanding, due to the approval of an increase in funding by the MOE – from 1,000,000 NIS in 2016 (261,780 USD) to 6,000,000 NIS for 2017 (1,570,680 USD).

Specific obligations

Article 31

Statistics and data collection

337. The Central Bureau of Statistics collects data regarding PWD living in the community as part of its data collection on the general Israeli population. For the purposes of conducting surveys and national census of the population, the definition of a person with disabilities is based on recommendations of the Washington Group on Disability Statistics, a part of the UN Statistics Division.

338. Persons who are questioned by the Central Bureau of Statistics as part of the national “social survey” are asked if they have an impairment or health problem during the previous six months or more, and to what extent this interferes with their daily activities. Persons are also asked the disaggregated questioner (what functions this disability disturbs, such as vision, hearing, walking and climbing stairs, self-care, memory, concentration, etc.) The data gathered by the Central Bureau of Statistics is published and accessible to all, including researchers in the field.

339. The Commission utilizes the Social Survey of the Central Bureau of Statistics in order to produce updated and detailed statistical data reports on the condition of PWD in Israel. These reports were published annually between the years 2007–2011 and again in 2015 and 2017 (pending publication). For further statistical data, see Annex I. These reports are published on the Commission’s website in an accessible format and distributed to professionals, Knesset members, policy makers, at conferences, and as needed.

Article 32

International cooperation

The Commission activities in collaboration with the Ministry of Foreign Affairs

340. Israel was very much involved in the drafting of the Convention and each year sends a delegation to the Conference of States Parties to the CRPD. Furthermore, the Israeli Ambassador to the UN was a member in the CRPD Bureau during 2013–2014.

341. For information on side-events held by the Permanent Mission of Israel to the United Nations in New York and the Commission, in collaboration with NGOs and other state parties, see part 2 of Annex II.

Mashav’s activities

342. Israel’s contribution and technical assistance for the integration of PWD, especially children and youth, in developing countries focuses on training and capacity building programs. For additional information about MASHAV’s programs and activities, see part 2 of Annex II.

NGOs Recognized by ECOSOC

343. The organizations of Beit Issie Shapiro, Alut – the Israeli Society for Autistic Children, Access Israel and Al Manarah-Association for Arab PWD hold consultative status at ECOSOC. Consultative status at ECOSOC provides NGOs with access to not only ECOSOC, but also to its subsidiary bodies, the various human rights mechanisms of the United Nations, etc. This status assists these organizations to then create very useful programs or engaged in valuable advocacy on behalf of PWD in Israel.

Article 33

Implementation and monitoring of the convention

344. The Commission, established according to the *Equal Rights Law*, operates within the MOJ as a national body for advancing and ensuring the equal rights of all PWD. The

Commission acts through regulation, awareness-raising, information, counselling, promoting policies, legislation and litigation.

345. Upon the ratification of the Convention by the GOI in 2012, the Commission was appointed as a focal point and coordinating body relating to the promotion, protection and monitoring of the implementation of the Convention, according to Article 33 of the Convention.

346. The Commission has an independent voice in public discussions including Knesset meetings on legislation and other matters relating to the rights of PWD. The Commission also acts independently *vis-à-vis* the relevant authorities, with a view to promoting policy changes. According to a decision of the Attorney's General in 2006, the Commission, being part of the MOJ, is not authorized to submit petitions or sue any GM, and litigation against other public authorities and the private sector, requires the involvement of the Attorney General. However, these restrictions do not apply to proceedings filed by the Commission in the field of employment on behalf of individuals.

347. The Commission acts to promote awareness to the Convention by publishing written information, lectures and conferences.

348. The Commissioner and the management staff meet on a regular basis with decision-makers such as GM General Directors, heads of Municipalities, Knesset members and other relevant authorities in order to introduce the issues, discuss problems and highlight where actions to implement the CRPD are needed.

349. Regarding implementation of the Convention, in consultation with the Advisory Board, the Commission focused its efforts on Articles 12, 19, 24 and 27; this is in addition to its extensive work in regards to Articles 9 and 21, as described above. Specialized personnel were required in the fields of inclusive education, community living and employment. The role of these employees is to examine the existing practices and locate issues which form barriers for implementation of the CRPD and inclusion of PWD. They determine specific projects and work with all entities involved to promote change in policies and practices.

350. The Commission actions to promote the Convention include receipt of thousands of complaints annually regarding infringements of rights, and acting to mitigate them by legal action when necessary. The Commission also examines all relevant bills and raise concerns in light of the Convention.

351. In regards to monitoring, the Commission collects data on the situation of PWD in Israel, including a longitudinal statistical view. The Commission carries out inspections and unannounced visits to various out-of-home care facilities, institutions and psychiatric hospitals. The reports are submitted to the relevant ministries for correction and comments.

Current challenges

352. As demonstrated throughout this report, the SOI is committed to the Convention and has taken many of measures in order to achieve its implementation. However, there is more to be done in this field, there are discrepancies between the normative level and practice, and there are initiatives and procedures that are long-term and have yet to end.

353. Henceforth are some of our challenges.

General challenges

(a) PWD are still disadvantaged: While there have been, and continue to be, improvements, many PWD are still disadvantaged in education, employment and income;

(b) PWD still experience social discrimination and accessibility barriers: While the Government has taken many steps to promote equality of PWD and create accessible environments, many barriers still remain such as inaccessible environments and services, discrimination in employment and insurance;

(c) Awareness-Raising: in general PWD still suffer from negative, social attitudes and underlying discrimination, general media has not yet included persons with disabilities in public campaigns;

(d) Segregated rather than Inclusive Services: Although much effort has been put into promoting inclusion such as employment in the open market, community living and inclusive education, many PWD still receive services in segregated settings;

(e) Lack of Statistical Data: despite the annual reports published by the Commission, which include statistical data on PWD, there is not enough data in some fields, such as regarding violence, situation in care facilities, court proceedings, medical procedures etc. Information on specific populations such as the Arab population and women is currently limited.

Challenges related to accessibility (Article 9)

354. Although the Accessibility Regulations address both physical and service accessibility, and the Commission has held public campaigns and training in this field, the notion that accessibility is not only physical but includes also the accessibility of services is still not internalized by some authorities, and it is an ongoing process that the Commission is leading.

Challenges related to equal recognition before the law (Article 12)

355. The Amendment to the Capacity and Guardianship Law constitutes a significant change in the perception in Israel towards guardianship and places the person that a guardian was appointed to at the center. This is a new Amendment and part of the mechanisms for its implementation and monitoring its implication are yet to be established according to its provisions. The challenges we are facing in the following years include the following:

(a) Public awareness to the CRPD and equal recognition before the law is to be developed by the courts, service providers, families and PWD themselves. This is expected to result in a decline in the number of persons that a guardian was appointed to, and a wider use of other alternatives;

(b) The implementation of the Amendment, the enactment of its Regulations and creating functioning mechanisms in order to enable a person that has difficulties making decisions, to make decisions with the necessary support – and not by allowing another person to make her/his decisions for them;

(c) Currently, there are more hearings of persons in legal capacity issues than ever before, and representation by the LAA has proven to be efficient in the protection of rights and the exploration of creative solutions together with the persons involved. There is more to be done in order to improve and promote representation in these proceedings.

Challenges related to liberty and security of the person (Article 14)

356. Although the *Welfare (Treatment for Persons with Intellectual-Developmental Disabilities) Law* addresses cases of significant intellectual disabilities, it currently does not offer solutions for other PWD such as non-significant intellectual disabilities, and others. As a result, suspects with such disabilities are sometimes sentenced to long periods of incarceration, due to lack of adequate closed facilities for detention and treatment. These may include persons who suffered head injuries or persons whose impairment causes bursts of violence and lack of regulation in their behaviour. Currently, no therapeutic care facilities exist for their treatment.

Challenges related to living independently and being included in the community (Article 19)

(a) Even though the abovementioned practices emphasize the importance of living in the community, there is the practical difficulty in letting go of the long-held conception of placement in institutions, although the current Israeli policy of integrating PWD into the community is being gradually implemented;

(b) Community services are still lacking especially regarding young persons with complex disabilities who are in need of intensive supportive care, as well as persons with multiple disabilities (for example intellectual and mental disabilities) or complex behavioural challenges. Part of the challenge that we face in the next several years is to further change the practices and options allowing for living in the community;

(c) Furthermore, there is a need to expand the care facilities of post-hospitalization for minors after their release from psychiatric hospitalization in cases where the minors are not able to be integrated back into the community due to complex psychological and social needs.

Challenges related to education (Article 24)

357. Children with disabilities still face barriers when mainstreamed into general education. These barriers may include: accessibility of the school (as the accessibility process is not made in advance but only upon registration), educational teams awareness, and services (such as para-medical treatment and transportation) which are not always provided to children in mainstreamed settings.

Challenges related to employment (Article 27)

(a) Persons with disabilities still encounter discrimination in the labor market, in terms of admittance, wages and the extent of employment;

(b) The representation of persons with disabilities in the CS remains below the goals set on past Government Resolutions, and efforts are being made to raise these levels.
