Committee on the Rights of Persons with Disabilities
Twenty-fourth session
8 March–1 April 2021
Consideration of reports submitted by parties to the Convention under article 35

 Replies of France to the list of issues in relation to its initial report* **

[Date received: 30 September 2020]

* The present document is being issued without formal editing.
** The annexes to the present report are available from the web page of the Committee.
I. Purpose and general obligations (arts. 1–4)

Reply to paragraph 1 (a) of the list of issues (CRPD/C/FRA/Q/1)

1. Providing persons with disabilities with opportunities for self-determination and support to express their own choices are the bedrock of the commitment and efforts of France in this area.

2. The departmental centres for persons with disabilities respond to requests and examine people’s needs in terms of their life goals with a view to providing the most appropriate solutions.

3. A new request form makes it easier for the persons concerned to express their expectations and needs. The establishment of the common information system for departmental centres provides the basis for a set of core professional practices, in keeping with the law passed in 2005. The teams at every departmental centre have received guidance on change management. Training now covers the consideration of life goals, the range of available services and information on impairments and conditions. Tools are being introduced to harmonize assessments.

4. With regard to autism, the following two initiatives will improve needs assessments based on the good practices recommended by the National Health Authority, which are in line with international recommendations:
   • Early detection and intervention platforms for children under the age of 7 (there were 27 in 2019; nationwide coverage planned for the end of 2021)
   • The identification of undiagnosed adults in institutions (nationwide roll-out planned for the end of 2021)

5. In order to bolster the role of persons with disabilities as actors in their own right and develop a vision of regional solutions created in partnership with them, 360-degree platforms are currently being rolled out across the country at the community level, thus further building the local response to needs. Relying on the methodology of “A supported solution for all”, launched in 2018, the platforms provide an online service enabling each individual to find a solution irrespective of what they need.

Reply to paragraph 1 (b) of the list of issues

6. France did not make any reservations when it ratified the Convention. However, it did make several interpretive declarations, including one on the term “consent” in article 15. France recalls that it interprets the term “consent” in conformity with international instruments, such as the Council of Europe Convention on Human Rights and Biomedicine and its additional Protocol on Biomedical Research, and with national legislation, which is in line with those instruments.

Reply to paragraph 2 (a) of the list of issues

7. The issue of disability is increasingly being taken into account in impact evaluations:
   • Of the 24 laws adopted by the fifteenth legislature in 2017, 9 deal with public policy and 6 examine the consequences of provisions on disability
   • Of the 42 laws adopted in 2018, 18 deal with public policy and 13 examine the expected consequences
   • Of the 46 laws adopted in 2019, 14 deal with public policy and 10 examine the expected consequences

8. Since January 2018, each ministry has appointed a senior public servant as disability focal point to ensure that this issue is taken into account in the design of public policies.

Reply to paragraph 2 (b) of the list of issues

9. Since 2017, France has been expanding its proactive policy on the inclusion of persons with disabilities and the improvement of their living conditions. Sectors such as urban
planning, construction and goods and services are progressively and organically incorporating the concepts of universal accessibility and functionality.

10. European directives on the accessibility of the Internet and goods and services, which are being transposed into domestic law, have been catalysts for the implementation of the principle of universal design.

Reply to paragraph 2 (c) of the list of issues

11. Persons with disabilities will hold most of the seats in the 2020–2023 term of the National Consultative Council of Persons with Disabilities, whose role in the design of public policies has been strengthened. The Council’s new Territories and Citizenship Committee will liaise with local actors, including Departmental Citizenship and Autonomy Councils, and will initiate public consultations. The French Council of Persons with Disabilities on European Issues is a member of the National Consultative Council.

12. Provision is made for the participation of associations of persons with disabilities in several entities, including:

• The board of the National Solidarity Fund for Independence
• At the local level, the executive board of the departmental centres for persons with disabilities and the commissions for the rights and autonomy of persons with disabilities
• The national monitoring committee for inclusive schools, established in 2019
• The monitoring committee for the strategy on carer support
• The monitoring and assessment committee for the policy on employment of persons with disabilities
• The commission for the promotion of good treatment and the prevention of ill-treatment

13. More generally, persons with disabilities now have to be consulted on all major reforms.

Reply to paragraph 2 (d) of the list of issues

14. The rights of persons with disabilities have been introduced into the basic and in-service training of officials in a number of ministries.

15. Activities in connection with the Diversity Label (fight against discrimination and promotion of diversity, including disability) were stepped up in 2019. Over a million people work for entities that have been awarded the Label, including more than 500,000 public officials.

16. Following the National Disability Conference of 2020, a mechanism is progressively being set up to monitor the inclusion of disability in the competency framework used by the national agency France Compétences, which regulates the quality of accredited training programmes listed in the national directory.

II. Specific rights (arts. 5–30)

Equality and non-discrimination (art. 5)

Reply to paragraph 3 (a) of the list of issues

17. The Criminal Code enumerates the circumstances in which disability-based discrimination is an offence (e.g. denial of goods and services, recruitment or internship; interference with the exercise of an economic activity) (art. 225 (1) and (2)). Failing or

---

refusing to make reasonable accommodation may be considered discriminatory unless it is deemed legitimate and proportional. There is no case law on reasonable accommodation for reason of disability.

18. In the area of education, there is a confirmed right to accommodation for examinations and competitions. The refusal to make an accommodation ordered by the administrative authority on the advice of a doctor may be challenged as a form of discrimination.

19. In the area of construction, denial of accommodation cannot be raised in relation to new builds, as the Building Code mandates that they meet accessibility standards. The only exception to this requirement is if the topography of the site makes it impossible to put in place accessibility measures.

Reply to paragraph 3 (b) of the list of issues

20. Multiple and intersectional forms of discrimination are increasingly being taken into consideration. For instance, in the field of gender equality, a major national cause, some of the measures proposed in the context of the national consultations on domestic violence, launched in 2019, highlight the need to acknowledge intersectional discrimination.

21. Although the law does not provide for harsher penalties depending on the number of grounds for discrimination involved, there are two examples in civil case law (the decisions of the Paris Court of Appeal of 21 February 2018 and the Montpellier Court of Appeal of 27 October 2010) that recognize the concept of multiple discrimination, though not specifically in respect of persons with disabilities. The criminal courts have adopted the same approach.

Reply to paragraph 3 (c) of the list of issues

22. Like any other victims, persons with disabilities who believe they have been subjected to discrimination of any kind may file a criminal complaint with the competent investigative body or directly with the public prosecutor.

23. For instance, in a judgment of 19 January 2017, the Bayonne Court fined the airline Easy Jet €60,000 for refusing to let a passenger with disabilities board for so-called security reasons.

24. In civil cases, if the facts have been established, depending on the approach adopted by the public prosecutor, the complainant may apply for reparation.

25. Alternatively or in addition, a person may also petition the Defender of Rights.

Women with disabilities (art. 6)

Reply to paragraph 4 (a) of the list of issues

26. In the area of employment, the first-ever consultation with associations representing persons with disabilities, including women, was held in 2018. Several of the resulting recommendations focus on the specific situation of women with disabilities.

27. Women with disabilities, women health-care practitioners, people working in the voluntary sector and women victims took part in the work of the national consultations on domestic violence. A disability expert ensured that the 11 working groups systematically took into account disability issues. An ad hoc group on disability considered the matter of sex education, as well as indicators and gender-disaggregated data.

Reply to paragraph 4 (b) of the list of issues

28. Since 2012, the senior public servants in every ministry appointed as focal points for gender equality and anti-discrimination ensure, together with the focal points for disability and inclusion, that the equality policy is mainstreamed across relevant ministerial policies and entities.
Children with disabilities (art. 7)

Reply to paragraph 5 (a) of the list of issues

29. The Child Protection Strategy 2020-2022 aims to guarantee the enjoyment of children’s rights and contains a specific focus on children and parents with disabilities.

30. An interministerial monitoring committee ensures that the measures are implemented. Every year, public prosecutors report on the monitoring of local actions and identify good practices.

31. Regarding child asylum seekers or refugees with disabilities, under article L.744-6 of the Code on the Entry and Residence of Foreigners and the Right of Asylum, the French Immigration and Integration Office is responsible for assessing the specific needs and vulnerability of persons seeking asylum at all stages of proceedings. The Office also administers the asylum seeker allowance, which is calculated taking into account whether the asylum seeker is accompanied by any children.

32. The French Office for the Protection of Refugees and Stateless Persons, which rules on the applications of asylum seekers and stateless persons, takes the same approach to all asylum seekers accompanied by children with disabilities, who have priority status in the national reception system.

33. Unaccompanied child asylum seekers with disabilities fall within the remit of the child social welfare and disability systems.

34. An action plan on assistance for vulnerable asylum seekers, including those with disabilities, is being rolled out.

Reply to paragraph 5 (b) of the list of issues

35. The purpose of the policy to diversify support services is to:

• Introduce new support options closer to where beneficiaries live, for instance through the creation of mobile teams who visit schools and homes and the provision of support in recreation centres.

• Open up medico-social establishments to their communities, turning them into gathering places that promote social innovation, thus fostering the development of inclusive areas and neighbourhoods.

Reply to paragraph 5 (c) of the list of issues

36. The authorities are constantly seeking to involve young people in the development of public policies of concern to them.

37. Some 1,200 responses were collected during consultations with young people regarding the Child Protection Strategy 2020-2022. Their representation in the expanded monitoring committee provided for in the Strategy will be guaranteed.

38. In administrative and court proceedings, children may request a hearing with the judge. Such requests may be denied only when the child lacks discernment or standing in the case. Judges have the discretion to assess discernment.

39. In all proceedings, children with disabilities, like all other children, may be accompanied by an interpreter or a person able to transmit their statements made under oath.

40. The views and participation of children with disabilities are being sought during the development of the children’s project by the departmental centres for persons with disabilities.
Awareness-raising (art. 8)

Reply to paragraph 6 of the list of issues

41. There are several initiatives to combat stereotypes, prejudices and harassment against persons with disabilities:

- In 2019, the Broadcasting Authority and its partners signed a charter on the representation of disability and persons with disabilities in audiovisual media.
- A national awareness-raising campaign to speed up changes to how disability is represented will be launched in 2021.
- Project DuoDay has been widely taken up at the national level since 2018.
- An annual study of the impact of the national strategy on autism and neurodevelopmental disorders on the life of affected persons and their families (Ipsos survey) was designed and publicized in June 2020.
- A national awareness campaign on detecting developmental delays in children will be launched in October 2020 in the media and elsewhere (nine 30-second videos have been produced).
- There was large-scale media coverage of the 2020 National Disability Conference and strong public mobilization: over a 24-hour period, everyone in France was exposed to the topic an average of approximately three times (media impact score 337), and some 15,000 tweets and 79,000 Facebook interactions were observed.

Accessibility (art. 9)

Reply to paragraph 7 (a) of the list of issues

42. Approximately one million establishments open to the public are involved in accessibility efforts, compared to 333,000 in 2015. The overseas departments are equally involved, except for Mayotte, where the situation is more mixed.

43. Small public establishments have not sufficiently subscribed to the planned accessibility agendas owing to inadequate information and the perception that accessibility is complex and costly.

44. Within two years, a digital service will identify and geolocate all public establishments and indicate their level of accessibility with a view to encouraging managers and owners to join accessibility efforts.

45. In the area of transport, the Accessibility Guidelines have significantly sped up efforts to make services accessible, in particular at priority stops. The universal right to mobility is guaranteed in stations that are not yet accessible through accommodations, in-station assistance and alternative transport.

46. In terms of the accessibility of the train network, the law establishes a time frame of three 3-year periods. The train accessibility guidelines concern 800 stations to be made accessible by 2024; there are currently 300 accessible stations. Rolling stock is made accessible with every renewal.

47. As for transport by bus, 50 to 70 per cent of urban priority stops are accessible compared with 15 to 30 per cent of inter-city stops.

48. Finally, the Mobility Act of 2019 facilitates independent living by providing for the systematic collection and publication of data on transport accessibility.

Reply to paragraph 7 (b) of the list of issues

49. In 2020, 534 France Services hubs – one-stop, community-based centres – facilitate access to public services, especially in rural areas and priority neighbourhoods. Each canton will have one such hub by 2022. The hubs’ terms of reference provide for good quality,
accessible assistance for persons with disabilities. A staff member is available to help with digital access.

50. Five of the ten commitments contained in the Manifesto for an Inclusive State adopted in 2019 deal with strengthening the physical, digital and telephone accessibility of public services.

51. In order to ensure easier access to housing, the installation of an elevator was made compulsory for new apartment buildings of three or more storeys in 2019. As of 1 January 2021, bathrooms will be built with threshold-free showers in order to better adapt housing units to specific needs.

52. With regard to education, a helpline for parents has been set up in every department (15,000 calls were placed at the start of the 2019/20 school year).

Reply to paragraph 7 (c) of the list of issues

53. The total conversation service has been operational since February 2019. It is available in the overseas departments, regions and territories, subject to the signing of agreements with local providers for the transmission of text messages overseas.

54. In 2019, the service received 16,864 calls, including 4,648 on relay.

Reply to paragraph 8 (a) of the list of issues

55. Digital accessibility standards are updated regularly. The fourth edition of the general reference guide to improving accessibility was published in July 2019. The guide was originally for government departments only but has now been extended to businesses contracted to provide a public or community service and businesses with a turnover of at least €250 million.

Reply to paragraph 8 (b) of the list of issues

56. The following measures are in place to promote the use of alternative and augmentative technologies:

- The eAccessible State Label recognizes the incorporation of digital accessibility standards in government Internet sites and applications
- The site design.numerique.gouv.fr raises awareness among government departments of the issues around digital accessibility, their obligations, training and available public contracts to have their sites audited
- Opquast certification of the quality of online projects is available to government officials
- Free e-training is available for managers of digital projects
- Pursuant to the 2019 Act on engagement in local public life and community-based government action, localities of more than 10,000 inhabitants should, on a trial basis of no more than three years, provide at least one official with training in French Sign Language as part of in-service training

57. The 2019 implementing decree of the Act on creating a digital republic provides for financial penalties for failure to fulfil the obligations to make an accessibility statement, to publish a multi-year accessibility plan and to state the level of accessibility of websites subject to accessibility requirements.

Situations of risk and humanitarian emergencies (art. 11)

Reply to paragraph 9 (a) of the list of issues

58. The coronavirus disease (COVID-19) crisis has illustrated the need to develop support measures for lockdown and reopening periods together with persons with disabilities and

---

2 See annex 1.
their representatives. In that regard, the National Consultative Council of Persons with Disabilities issued recommendations for the implementation of government actions. Drawing on the Council’s expertise, the accessibility of official information on the health crisis (presidential statements, daily press briefings by the Ministry of Health, Easy Read documents, digital accessibility of the Government’s website) was enhanced.\(^3\)

59. The Council, under the aegis of the Government, is behind the platform solidaires-handicaps.fr, which lists local support initiatives.

60. In addition, the Departmental Citizenship and Autonomy Councils have taken up the issue, ensuring that people’s rights are being respected.

Reply to paragraph 9 (b) of the list of issues

61. The COVID-19 crisis has changed support practices regardless of people’s individual situations. Initial reception has been strengthened to include a tailored, broad search for a solution, followed by a second tier involving a needs analysis and the processing of the most complex situations. In such situations, local responses mobilizing a person’s entire network have proved effective. Support and housing solutions have been found.

62. The health crisis has expedited the establishment of an accessible national helpline for persons with disabilities and carers who are experiencing serious difficulties they cannot resolve and whose situation requires coordinated or community-based responses.

63. Access to housing for asylum seekers is ensured through a vulnerability assessment whose purpose is to propose suitable housing and support. All asylum seekers are entitled to accommodation in a reception centre for asylum seekers or an emergency housing facility. Two circulars (dated 31 December 2018 and 27 December 2019) encourage chief administrative officers to increase the availability of housing for asylum seekers with disabilities.

Equal recognition before the law (art. 12)

Reply to paragraph 10 of the list of issues

64. The representation and free consent of persons with disabilities are guaranteed through the legal measures provided for in the 2019 Justice System Planning Act, which is based on the 2018 report on trends in the legal protection of adults, thus marking progress towards the effective recognition of the rights of persons with disabilities. Prior judicial authorization is no longer required for certain property-related acts and the exercise of fundamental rights, such as marriage, civil union, divorce and voting, or for giving consent for medical care.

65. The lifting of this requirement, aimed at enabling protected adults to directly express their will, does not entail the loss of guarantees, as judges still have a duty to continuously oversee protection measures.

66. A complementary approach is also being taken based on the principles of self-representation and self-determination.

67. Steps taken as part of the “A supported solution for all” initiative have brought about a marked change: persons with disabilities now take part in meetings to develop solutions tailored to them. Peer support is also promoted. Recognizing user knowledge changes the relationship between persons with disabilities, their families and professionals and ensures that persons with disabilities are seen as actors in their own right.

---

\(^3\) See annex 4 on the main strategic lockdown and reopening measures for persons with disabilities in the context of the COVID-19 crisis.
Reply to paragraph 11 of the list of issues

68. The latest available data on persons under legal protection (more than 700,000) date back to 2015. At that time, the average age of the 332,000 people under wardship was between 50 and 59 years. There were 2 per cent more men than women. The trend is reversed as of the age of 70 (5.1 per cent more women). The same is true for the 383,000 people under guardianship: under the age of 29 the proportion of men was highest (5.9 per cent more men than women), then dropped at age 30 (2.5 per cent more men). The peak for women under guardianship is age 90 years (15.2 per cent more women).

69. The concept of disability does not appear as a variable in the databases on legal protection for adults available at the Ministry of Justice.

Access to justice (art. 13)

Reply to paragraph 12 (a) of the list of issues

70. The accessibility of courts is covered by a planned accessibility agenda (deadline end of 2024).

71. Currently, over 300 judicial premises are accessible. A further 40 courts, 13 prisons and 18 facilities of the youth judicial protection system will be accessible by the end of 2020.

72. Some of the 1,632 legal advice centres and 147 law centres are specialized in disability law and use signage in Braille, Easy Read and sign language interpretation.

73. Access to documents and procedures will be made easier through increased digitization by 2022, in keeping with the general reference guide to improving accessibility.

74. Conciliation and mediation are encouraged and are popular among persons with disabilities.

75. The recent requirement to attempt a non-adversarial procedure before turning to the courts promotes the concept of support.

Reply to paragraph 12 (b) of the list of issues

76. Compulsory training on the legal corpus on disability, including the Convention, is provided to judges responsible for children, family law, guardianship and the protection of adults and to directors of court registry services who oversee reception services. Following the 2019 legislative reform, a module on disability has been added to the mandatory training of educators working in the youth judicial protection system.

77. The module centres on three themes: identifying disability, knowing the relevant legal mechanisms and providing support.

78. In 2019, 310 judicial trainees took modules related to disability and 50 completed internships at organizations in the sector.

79. More than 550 judges have completed in-service training on the issue of disability. Some of that in-service training is also open to senior managers of social welfare bodies, doctors and members of the Office of the Inspector-General of Places of Deprivation of Liberty.

80. Fifty staff of reception services have completed specific training.

81. Ten court registry staff were trained in French Sign Language in 2019.

82. Under the leadership of the Defender of Rights, in cooperation with the National Consultative Commission for Human Rights, an educational toolkit is being developed for all schools where legal professionals are trained, to be issued in 2020.

---

4 See Annex 2 – Protected groups as of 31 December 2015, by sex and age.
83. The National Solidarity Fund for Independence organizes training sessions through the Legal Service Training College for guardians and persons with disabilities and their families to safeguard their rights.

84. The basic training of all law enforcement personnel includes modules on disability issues. Training partnerships have been established with representative associations of persons with disabilities (the National Union of Associations of Families and Friends of Persons with Intellectual Disabilities (Unapei) and the National Union of Families and Friends of Persons with Mental Illness or Disabilities (Unafam)). Specific massive open online courses are available as part of in-service training, for example for persons staffing reception desks at police stations.

Reply to paragraph 12 (c) of the list of issues

85. Persons with disabilities, like any other litigants, do not have to pay lawyer’s fees if eligible for legal aid (the maximum income for a single person is €1,018 in order to qualify for full legal aid).

86. Some 1.2 million people receive the adult disability allowance of €900 and are thus eligible for full legal aid.

87. Of these, 68,000 also receive supplemental income and are therefore eligible for partial legal aid (55 per cent).

88. As a consequence of the review of the income-related eligibility criteria for legal aid in 2020, the adult disability allowance will be removed from the range of benchmark taxable income. The number of persons with disabilities who will be eligible for full legal aid will therefore rise.

89. Persons with disabilities who are under guardianship may either be represented or assisted by their guardian throughout proceedings, depending on the guardianship regime. They may also be assisted by a French Sign Language interpreter appointed by the court and paid by the State or by any other qualified person with command of a language or mode of communication that can be used with deaf persons.

Liberty and security of the person (art. 14)

Reply to paragraph 13 (a) of the list of issues

90. Psychiatric care undertaken with the free consent of the person concerned is always the preferred option where the person’s condition allows (Public Health Code, art. L.3211-2).

91. A patient’s free and informed consent is systematically sought. When such consent cannot be obtained, patients may be treated without their consent in keeping with the conditions set forth in article L.3211-3. Any restrictions must be adapted, necessary and proportional to their mental condition and to the administration of the requisite treatment. Under all circumstances, the dignity of persons must be respected and their return to society sought. Persons must be informed, in a manner suited to their condition, of every planned decision to extend their treatment (art. L.3213-4) so that their views may be expressed and taken into account. Such decisions can be challenged, with, where necessary, the support of a lawyer or adviser, under the supervision of the liberty judge.

Reply to paragraph 13 (b) of the list of issues

92. No seclusion measures may be ordered on the basis of disability.

93. The mental health and psychiatry road map of June 2018 made reducing the use of restraints, seclusion and non-consensual treatment one of the major focuses of relevant national policy to be implemented by the local authorities.

94. An action plan has been launched to reduce the use of the forms of seclusion, restraints and non-consensual treatment that are most injurious to patients’ rights. The idea is to improve data collection, further scale down the practices covered in the instruction of March
2017 and continue mobilizing actors in the field, as urged by a delegation of the Psychiatry Committee and already begun in half the country’s regions.

95. The priority objectives for 2020 are the following:

- Identify and foster ways of organizing prevention, treatment and medico-social services across territories so as to encourage less frequent use of non-consensual treatment and promote human rights.
- Ensure better understanding of when to resort to non-consensual treatment, seclusion and restraints.
- Identify and publicize good practices in crisis prevention and management with a view to significantly reducing practices that are most injurious to patients’ rights.
- Develop mechanisms to increase the enjoyment of patient rights.
- Promote training in recognized alternative practices (specific training module under the QualityRights programme).

96. In theory, there is effective oversight of all seclusion measures through a dedicated register that can be checked at any time by the departmental psychiatric care commission and the Inspector-General of Places of Deprivation of Liberty, among others.

97. When non-consensual hospitalization needs to be extended, the liberty judge reviews the grounds for hospitalization and the proportionality of the measures.

98. The Constitutional Council, in a matter of constitutional priority on the competence of the liberty and custody judge to supervise restraint and seclusion measures, ruled in its decision of 19 June 2020 that article L.3222-5-1 of the Public Health Code was in breach of the Constitution because it did not provide for judicial oversight beyond a certain duration of such measures. The Constitution Council requested that the article be brought into line with its decision by 1 January 2021.

99. No restraint practices are permitted in prisons.

Reply to paragraph 13 (c) of the list of issues

100. The Public Health Code establishes that persons who are hospitalized without their consent may at any time apply to the liberty judge to have the measure immediately lifted. The judge ascertains whether the measure is necessary and proportional to the patient’s condition. The judge receives such applications regularly and acts promptly.

101. In the criminal justice system, anyone can appeal a decision, including persons with disabilities, regardless of whether they are migrants or children (Code of Criminal Procedure, arts. 497 and 380-2). Lawyers can meet with their detained clients.

102. The safeguards applicable to convicted persons, whether or not they have a disability, are strengthened by the importance attached to respecting the principles of informed consent and free will.

103. By law, the country’s 187 prisons have rights bureaux where detainees and their relatives can learn about their rights for free and obtain answers to personal legal matters (family, housing, labour and immigration law).

104. All migrants, whether or not they have a disability, have access to the same remedies.

Reply to paragraph 14 (a) of the list of issues

105. The Act of 18 January 1994 on public health and social security assigned all services related to the prescription and administration of treatment to the public hospital system. These provisions were reproduced in articles 45 to 56 of the Prison Act of 24 November 2009. The administration of treatment implies the consent of detainees in line with the principle contained in article L.3214-3 of the Public Health Code.
Reply to paragraph 14 (b) of the list of issues

106. The Code of Criminal Procedure provides for the personalization of the conditions for serving custodial sentences.

107. A methodological guide on sentence adjustments and release on medical grounds was developed in 2018 to provide people with guidance.

108. A 2019-2022 road map on the health of detainees aims to improve the detection of disability, vulnerability and loss of autonomy, as well as access to assistance for activities of daily living while in detention. Thus, providers of home support and nursing care services can attend to detainees. Moreover, social workers employed by the prison integration and probation services help detainees apply for the allowances to which they are entitled.

109. When foreign nationals with disabilities are placed in administrative holding, they are entitled to:

- Tailored material assistance at the administrative holding centre.
- Medical assistance. Every administrative holding centre has an on-site medical unit and an agreement with a hospital for times when the medical unit is closed.
- Emotional and psychological support throughout their placement in administrative holding with the aim of preparing the material conditions for their departure.

Reply to paragraph 14 (c) of the list of issues

110. France is of the view that the purpose of the draft additional protocol to the Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine is to guarantee respect for the fundamental rights of persons subject to involuntary treatment and committal in the exceptional cases where such measures are applied. France is also of the view that there is no incompatibility between the draft additional protocol and other international instruments, in particular the Convention on the Rights of Persons with Disabilities.

111. France supports amending the draft to further promote alternative measures with the aim of guiding States in applying the principle that administering treatment without consent should be a last resort.

Freedom from torture or cruel, inhuman or degrading treatment or punishment (art. 15)

Reply to paragraph 15 (a) of the list of issues

112. Regarding the use of various methods of restraint in health-care services, see the reply to paragraph 13 (b) of the list of issues.

113. “Packing” is not among the practices recommended by the National Health Authority for use in health and medico-social establishments. France has reaffirmed this position in the national strategy on autism and neurodevelopmental disorders.

114. Providing autism education to health-care practitioners is among the national in-service training priorities for the period 2020-2022. An action plan is being put in place to improve the assessment of the training offered by the national in-service training agency.

115. Lastly, the actions taken pursuant to the national health strategy and the National Disability Conference to enhance access to physical care for persons with disabilities are improving the ability to anticipate, manage and reduce problematic behaviours.

Reply to paragraph 15 (b) of the list of issues

116. A parliamentary amendment to the bill on bioethics currently in the adoption process aims to introduce systematic referral of intersex children to the four referral centres on rare genital development disorders in Lille, Lyons, Montpellier and Paris. For all treatment or non-treatment, children’s consent must systematically be sought if they are able to express
their will and participate in decision-making. The amendment provides for a report to be drawn up within 12 months containing data on the number of persons concerned.

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

Reply to paragraph 16 (a) of the list of issues

117. The measures adopted in 2019 to combat violence against women systematically take into consideration the specific needs of women and girls with disabilities. The measures are complemented by specific actions, for instance an upcoming online certificate training course designed to significantly increase the skills of professionals working in health and medico-social establishments.

118. Acts of violence committed in health-care establishments, including psychiatric facilities, can be reported to the National Observatory for Violence in Health-Care Settings. The Observatory also disseminates tools and good practices and fosters coordination among actors in the field.

Reply to paragraph 16 (b) of the list of issues

119. With a view to supporting women with disabilities in their private and sexual lives and as parents, the measures arising from the national consultations on domestic violence provide for the establishment in each region of a resource centre to coordinate a network of local actors and bolster the agency of women through peer exchanges.

120. A thousand new housing and accommodation solutions will become available in 2020, along with indicators on their level of accessibility.

121. In health and medico-social establishments, the response to cases of violence requires tailored assistance consisting of a welcoming approach, health-care services and psychosocial support.

122. Current reception structures have been made permanent and new ones are being set up nationwide.

Reply to paragraph 16 (c) of the list of issues

123. Any violence at health and medico-social establishments has to be reported to the regional health agency, and a remedial action plan is drawn up. The monitoring authorities are mindful of the need to identify and promptly address cases of violence.

124. An instruction and good practices in the provision of support will be transmitted to all health and medico-social establishments in 2020 to remind them of the obligation to respect the privacy and sexual and reproductive rights of the women under their care.

Reply to paragraph 16 (d) of the list of issues

125. Since 2008, the national hotline 3919 refers reports of abuse to a local network, which then follows up on cases. In 2018, of the 5,024 cases of alleged ill-treatment, 724 involved persons with disabilities (55 per cent women).

126. A commission was set up in February 2018 to promote good treatment and prevent ill-treatment.

127. A briefing note of January 2019 on integrated action to promote good treatment while supporting autonomy in the home and institutions made tangible suggestions that will serve as a basis for a national strategy and action plan.

Reply to paragraph 16 (e) of the list of issues

128. Tracking “serious undesirable events”, which all health-care establishments are supposed to do, enables regional health agencies to initiate inspections. Administrative and criminal action are also possible.
129. The departmental commission on psychiatric care is notified of all decisions of committal to psychiatric care, as well as decisions to extend or end committal. It looks into the situation of persons admitted into psychiatric care without their consent and receives their complaints.

130. Respect for rights is guaranteed by:
   • The effective participation of the persons concerned and their carers through the appointment of representatives within the establishment.
   • The National Health Authority is working on a user pathway, including indicators on quality, in the area of psychiatry and mental health to be ready in 2021.

Protecting the integrity of the person (art. 17)

Reply to paragraph 17 (a) of the list of issues

131. The Public Health Code prohibits the sterilization of children and allows the sterilization of adults only with the person’s free, reasoned and express consent based on clear and complete information. For adults under judicial protection, there is a further condition that contraceptive methods must be medically contraindicated or unable to be used. A judge makes a ruling after gathering the views of the person’s friends and family.

Reply to paragraph 17 (b) of the list of issues

132. The recommendations of the National Health Authority specify that any cochlear implantation must be preceded by a prosthetic test whose results confirm or not the decision to implant. The decision to opt for oral rehabilitation through implantation after age 5 depends on the level of motivation of the child’s family, or of the child him or herself, to communicate orally. After implantation, the child must be put in contact with other people who have undergone the procedure. The 30 accredited centres are required to keep an exhaustive register of complications (post-registration study of cochlear implants).

133. A forthcoming recommendation by the French Otorhinolaryngology Society and the National Health Authority, based on the outcomes of implantation and post-implantation follow-up entered in the post-registration study of cochlear implants, will contain an assessment of the benefits of implants for patients in terms of oral communication and learning French Sign Language. The recommendation will also enhance the safety of implantations.

Liberty of movement and nationality (art. 18)

Reply to paragraph 18 of the list of issues

134. There is no specific monitoring of the issue of the right of Roma persons with disabilities to freedom of movement, a nationality and appropriate living conditions. Pursuant to the principle of equality, enshrined in article 1 of the Constitution of 4 October 1958, specific policies targeting a category of people on account of their ethnic origin are prohibited.

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

Reply to paragraph 19 (a) of the list of issues

135. Minors, whether or not they have a disability, may be placed in an institution only if a juvenile court judge has ordered protection.

136. The Child Protection Strategy provides for the creation of shared tools for actors in the fields of child protection and disability in order to avoid unjustified institutionalization.
Reply to paragraph 19 (b) of the list of issues

137. France is pursuing efforts to simplify and improve the daily lives of persons with disabilities so that they may fully exercise their rights and choose their lifestyle. This requires an overhaul of the system involving all stakeholders.

138. Strategies are already under way in the areas of education, employment, housing, health, sports and culture in order to drive change at ordinary and specialized facilities alike.

139. Those working in non-specialized settings receive capacity-building support as part of this process. In the development of support and assistance services, professionals in the medico-social sector must lend their expertise to complement general systems.

Reply to paragraph 19 (c) of the list of issues

140. France has not introduced a moratorium on new admissions to institutions but does promote freedom of choice by strengthening inclusive support services with a view to the deinstitutionalization of:

- Children, through increased community-based services and the mobilization of medico-social expertise to facilitate education in mainstream schools by setting up an integrated territorial structure combining schools and medico-social establishments and by deploying mobile teams (there were 65 covering two thirds of the country in the autumn of 2019).

- Adults, through enhanced community-based services, the expansion of inclusive housing and the supported employment scheme.

Reply to paragraph 20 (a) of the list of issues

141. According to the 2014 ES-Handicap survey, on 31 December 2014, there were 107,200 children with disabilities and 281,900 adults with disabilities in dedicated facilities.

142. Specific diagnosis and identification efforts are under way in the field of autism.

Reply to paragraph 20 (b) of the list of issues

143. Of the 10 million persons with disabilities, 506,949 received support from the medico-social sector in 2019.

Reply to paragraph 20 (c) of the list of issues

144. As at the end of 2018, 314,859 persons with disabilities were receiving the disability allowance, which encourages at-home living and the provision of support in the community, and 48,330 were receiving the stipend for third parties, which is progressively being replaced by the disability allowance.

145. In 2018, community-based services were providing support to 52,384 adults and 53,849 children with disabilities in ordinary settings.

Reply to paragraph 21 (a) of the list of issues

146. Support costs are capped at 10 per cent of net income after taxes, within the limits of the resources of the departmental compensation funds.

147. The cap sets a shared, transparent framework for the use of the funds. A decree will be issued six months after the publication of the Act of 7 March 2020.

Reply to paragraph 21 (b) of the list of issues

148. The disability allowance covers the cost of assistive devices and technical aids. The amounts allocated are: €832 for technical aids, €2,861 for home modifications and €2,541

---

5 See https://handicap.gouv.fr/, specifically the sections “Dossiers de presse” and “Comité interministériel du handicap".
for vehicular modifications. In 2020, a national task force will be proposing ways of improving access to and quality of technical aids.

149. Since their introduction in 2018, over 3,000 comprehensive support plans have been designed to enable people to find alternative support solutions when their normal medico-social services are unavailable.

Reply to paragraph 21 (c) of the list of issues

150. In December 2018, 7,892 French nationals (6,457 adults and 1,435 young people) were receiving assistance in the Walloon Region. There is no information available on their return to France.

151. The Social Security Funding Act of 2020 provides for:

- The adoption of an agreement to regulate the activities of Walloon establishments for adults on the qualitative and quantitative levels
- Speeding up the introduction of alternative support solutions in the most affected regions (Ile-de-France, Hauts-de-France and Grand-Est), through a commitment of €90 million over three years, so that people do not have to seek services abroad

152. As a result of the agreement, the number of joint inspections, both scheduled and unannounced, conducted by the Belgian Agency for Quality of Life and the regional health agency of Hauts-de-France is growing.

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

Reply to paragraph 22 (a) of the list of issues

153. In 2017, the National Solidarity Fund for Independence, in partnership with Unapei and the association Nous Aussi (Us Too), developed a kit for departmental centres for persons with disabilities and family allowance funds that helps document writers to present information in Easy Read format. The kit contains 17 fact sheets on the rights of persons with disabilities, the benefits to which they are entitled and various administrative procedures.

154. In 2019, the Ministry of Education added French Sign Language to the list of optional subjects taught by general and technological upper secondary schools.

Reply to paragraph 22 (b) of the list of issues

155. Five universities offer courses in interpreting between French Sign Language and spoken French: University of Paris 8, University of Paris 3, University of Toulouse-Jean Jaurès, University of Lille and University of Rouen Normandy. Between 20 and 40 interpreters are trained each year. The sign language interpreting profession suffers from a lack of organization. However, local solutions are emerging, with the creation of booking platforms, for example.

156. At the end of 2019, the Fondation Pour l’Audition (Foundation for Hearing) launched a project, in coordination with the Government and relevant stakeholders, with a view to:

- Sharing information and raising awareness about how to use these new systems among users and the general public.
- Helping to facilitate the work that is to be carried out on the relevant professions plan by inviting the actors concerned to set common objectives.

Respect for privacy (art. 22)

Reply to paragraph 23 of the list of issues

157. Public authorities and bodies have an obligation to protect personal data and privacy. The regional health agencies and Cap Emploi have each appointed a data protection officer whose main task is to ensure that they comply with data protection regulations. They are held
responsible for any breaches of the regulations and for carelessness and negligence, under a system of graduated sanctions.

Respect for home and the family (art. 23)

Reply to paragraph 24 (a) of the list of issues

158. The rights held by protected adults in their capacity as parents are strictly personal. They exercise these rights independently. Their independence in this regard was strengthened by the Justice System Planning Act of 2019 (see the reply to paragraph 10 of the list of issues).

Reply to paragraph 24 (b) of the list of issues

159. In order to directly address the needs of parents with disabilities, a parent allowance will be incorporated into the personal disability benefit scheme in 2021. The amount granted will depend on the needs of the parent. A total of €184 million will be set aside between now and 2022 to finance this new allowance.

160. One of the aims of the Child Protection Strategy is to strengthen existing cooperation and co-financing arrangements between various institutions (such as departmental authorities, family allowance funds and regional health agencies) to enable them to find appropriate solutions.

161. The Strategy provides for the development of tools and assistance programmes to support parents.

Education (art. 24)

Reply to paragraph 25 of the list of issues

162. As of the start of the 2019/20 school year, 431,500 children with disabilities are enrolled in school. Of these, 361,500 are enrolled in mainstream schools, accounting for 2.9 per cent of all students. Medico-social and health institutions provide schooling for 70,000 children with disabilities, of whom almost 8,000 are taught in specific teaching units in schools. A total of 86 per cent of students with disabilities therefore attend mainstream schools.6

163. Seventy per cent of students with disabilities are boys. This gender distribution is identical across all age groups and varies little from one year to the next. There are no data available on the ethnic or national origin of students with disabilities (see Constitution, art. 1).

164. Students with disabilities are distributed as follows: 9 per cent are in preschool, 45 per cent are in primary school, 35 per cent are in lower secondary school, 7 per cent are in vocational upper secondary school and 3 per cent are in general and technological upper secondary school.

165. The proportion of students with disabilities who attend school on a full-time basis (with or without a special needs teaching assistant) is 91 per cent. This figure is 87 per cent in pre-primary and primary education and 96 per cent in secondary education. Part-time attendance is most common among children with disabilities who are starting preschool; at that level, the proportion who attend school full-time is 85 per cent.

166. Surveys conducted among the families of a sample group of students with disabilities born in 2001 or 2005 show that social background has an impact on the type of education received and the level of education reached. Across all types of disability, the gap between the most disadvantaged and the most advantaged persons widens in medico-social institutions but narrows in school settings. In schools, students with disabilities from advantaged backgrounds are more likely to reach the third or fourth year of secondary education than those from disadvantaged backgrounds (32 percentage points difference). Most children with

6 See annex 3.
disabilities from disadvantaged backgrounds are in the years below the third year of secondary education.

167. Since there has been no census of persons with disabilities, the exact number of children with disabilities who are excluded from the education system is not known. At the end of 2014, 15 per cent of school-age children in medico-social institutions (11,000) were receiving educational support without access to school-based learning (mainly children with multiple or severe disabilities). More recent data for the period up to 2018 are not yet available. Lastly, under the policy aimed at supporting persons with disabilities who are considered to be “without a solution”, 1,500 persons under 20 years old were identified as such and provided with a comprehensive support plan in 2017 and 2018.

168. The roll-out of the new information system for departmental centres for persons with disabilities will improve the collection of data on children with disabilities, irrespective of whether they are enrolled in school.

Reply to paragraph 26 (a) of the list of issues

169. Building on the progress made towards greater access to schools (7 per cent increase in students with disabilities per year), a law passed in July 2019 sets out a new approach that has led to:

- The establishment of a public service for inclusive education in order to allow families to enrol their children in school from 3 years old, to be able to raise questions and concerns and to be able to meet with their child’s assistant and the teaching staff at the beginning of the school year. A total of 208,790 students, or 58 per cent of all students with disabilities, have an assistant (an increase of 14 per cent per year). There are 101 support units, as well as preliminary meetings between parents and assistants, and adjustments depending on the level of education.
- Better training and support for teachers, including assistance from professionals in the field of disability.
- The diversification of forms of schooling and educational support in order to accommodate the specific needs of students.
- Improvements in the status, working conditions and recruitment of special needs teaching assistants. There are currently more than 106,000 assistants of that kind.

170. At the beginning of the 2019/20 school year, there were:

- 39,000 students with (declared) autism spectrum disorder, accounting for 11 per cent of students with disabilities in mainstream schools
- 24 newly established teaching units in preschools and 20 in primary schools

171. Specifications for teaching units for persons with multiple disabilities were signed in September 2020, with a view to giving all children and young persons in special facilities access to school-based learning, while taking into account their needs.

172. In 2019, a total of 34,553 persons with disabilities entered university, compared with 7,557 in 2005.

173. For each student with disabilities, a personalized support plan is drawn up by a multidisciplinary team, on the basis of a needs assessment carried out with the student. The action taken to accommodate the student’s needs mainly consists of ensuring that universal design and accessible teaching methods are used or taking compensatory measures.

174. Eighty per cent of universities have a disability master plan. The universal accessibility and educational support policy of each university can be found via an interactive map on the following website: https://www.etudiant.gouv.fr/.

175. As a result of the reform of the university application process, certain applicants, including applicants with disabilities who have not been offered a place on any course or who have received an offer that does not meet their needs, can request a review of their situation by the Commission for Access to Higher Education. In 2018, there were 504 requests for a
A total of 471 new offers were made, of which 408 were accepted (corresponding to 86.6 per cent of the offers). In 2019, 307 requests were examined.

There is a practical guide on the new university application process for teachers and principals of upper secondary schools. The guide includes a section on providing support to students with disabilities.

Reply to paragraph 26 (b) of the list of issues

School management staff have access to various training programmes, all of which include an inclusive education component and an online course on creating an inclusive school.

As of 2019:

- The new framework for primary and secondary school teacher training, entitled “Training teachers for the twenty-first century”, defines inclusion as a separate area of focus. All trainee teachers will receive training in this area from now on.
- Teachers can find information about teaching students with disabilities and appropriate teaching materials on the Cap École Inclusive national online platform. The platform had 10,000 active users at the start of the 2019/20 school year.

Over the course of 2019 and 2020, over 2,500 teachers will receive in-service training on disability issues under the training plans at the level of the educational district or department.

In 2018, a total of 1,397 people in 83 departments obtained a vocational training certificate in inclusive education practices.

The effectiveness of the compulsory modules will be evaluated once they are actually being taught (the course plans for teacher training institutes are currently being prepared and will apply from the start of the 2020/21 school year). The Government is working with representatives of universities and of the National Consultative Council of Persons with Disabilities on the inclusive education competency framework that is to be used in initial training courses.

Special needs teaching assistants receive 60 hours of initial training, followed by in-service training.

Reply to paragraph 26 (c) of the list of issues

Young persons and adults with disabilities have full access to all courses offered within the national and higher education systems. Measures may be taken to facilitate access and provide support as needed. Compensatory measures may also be taken. Employers are incentivized to ensure access to apprenticeships. Every training centre has a disability focal point.

Reply to paragraph 26 (d) of the list of issues

The collection of data that directly indicate racial or ethnic origin and the inclusion of the variables of race and religion in administrative records are prohibited.

Health (art. 25)

Reply to paragraph 27 (a) of the list of issues

In 2021, measures to further improve access to mainstream health-care services for persons with disabilities will include:

- The introduction of graduated rates for complex outpatient consultations in order to ensure that the fee charged corresponds more closely to the patient’s specific situation.
- Support for and assistance with the roll-out and structuring of both a dedicated consultation network and reception and care units for deaf persons.
186. In 2020, a national survey was conducted to take stock of these systems; the results will be used to draw up a plan to support their roll-out to all regions.

187. The COVID-19 crisis has sped up the introduction of telehealth services for health care, expert assessments and follow-up, thus improving access to health care for persons with disabilities.

Reply to paragraph 27 (b) of the list of issues

188. The National Sexual Health Strategy promotes the development of sexual health policies on topics ranging from sex education and reproductive health to the prevention and detection of sexually transmitted infections and HIV. The Strategy takes into account the specific needs of persons with disabilities.

189. The 2018–2020 road map includes two specific measures:

- Promote the sexual health of persons living with a mental health condition who are cared for by health, social or medico-social teams.
- Better address issues relating to personal lives, relationships and sex that affect persons with disabilities and older persons in medico-social institutions and services.

190. The issue of sexual health is covered in a guide entitled “Violence against women with disabilities: detecting violence and providing support, care and guidance to victims” that was published in 2020. The guide is aimed in particular at professionals who work in health facilities, medico-social institutions or non-hospital settings.

Reply to paragraph 27 (c) of the list of issues

191. Under the solidarity health insurance scheme that was introduced in November 2019, persons with disabilities on a low income have access to a range of medical services without any co-payment and either for free or in exchange for a small monthly contribution. The procedures are simplified and all recipients of the adult disability allowance are contacted by their social security fund to check whether they are eligible for this additional health insurance.

Reply to paragraph 27 (d) of the list of issues

192. The 2018 road map for mental health and psychiatric care promotes a cross-cutting approach to mental health policy, which is implemented locally through territorial mental health plans. The overall objectives of the road map are better living conditions, inclusion in society and civic life and access to health care and support for people living with a mental health condition.

193. Its second area of focus, namely ensuring that care pathways are coordinated and supported by an accessible and diverse range of quality psychiatric services, relies on territorial mental health plans. The aim is to respond in the right way at the right time by creating links between all the relevant skilled professionals in the region and to ensure the quality, safety and continuity of care pathways and daily lives.

194. The six priorities addressed by territorial mental health plans include the following three:

- Respecting and promoting the rights of persons with a mental health condition
- Increasing their power to make decisions and to take action
- Combating the stigmatization of mental health conditions

Work and employment (art. 27)

Reply to paragraph 28 (a) of the list of issues

195. The goal of increasing the proportion of workers with disabilities to 6 per cent and integrating persons with disabilities into the labour market remains a priority, as reiterated in the 2019 Strategy for the Employment of Persons with Disabilities.
196. The proportion of directly employed workers with disabilities is 3.5 per cent in private entities that are subject to the obligation to employ workers with disabilities and 5.61 per cent in the public sector.

197. In 2018, persons with disabilities accounted for 4.8 per cent of apprentices in the civil service.

198. Fifty per cent of jobseekers with disabilities are aged 50 years or over.

199. In 2019, the number of workers with disabilities who started a training course increased by almost 15 per cent, to 90,000, under the Investment in Skills Plan.

200. Almost 3,000 persons are in supported employment. Half of them now hold long-term positions.

Reply to paragraph 28 (b) of the list of issues

201. In November 2019, 130 companies signed a charter that set out a number of operational commitments, including:

- Strengthen and preserve the link between schools and companies
- Help young persons to develop a career plan through internships and apprenticeships
- Raise awareness of disability-related issues among employees
- Develop a managerial culture of diversity
- Commit to sustainable procurement
- Establish links with employment rehabilitation establishments and services and disability-friendly companies

Reply to paragraph 28 (c) of the list of issues

202. Efforts to promote training and apprenticeships are being stepped up under the 2019 Strategy for the Employment of Persons with Disabilities. The personal training account allowance has been increased to €800 per year. The provision of support has been simplified and improved thanks to the merger between the Cap Emploi and Pôle Emploi employment offices.

203. March 2020 saw the introduction of “springboard” fixed-term contracts in disability-friendly companies for persons recognized as workers with disabilities.

204. An annual event called DuoDay was launched in 2018 with the aim of encouraging jobseekers with disabilities not to limit themselves and mobilizing companies. At the second DuoDay event in 2019, a total of 12,900 duos (a person with a disability shadowing a professional mentor) were formed, involving 25,800 people.

Reply to paragraph 28 (d) of the list of issues

205. In 2019, disability focal points were appointed, within the civil service and in all companies with more than 250 employees, to provide guidance, information and support to persons with disabilities.

206. The 2019 charter of operational commitments aims to promote a proactive approach to the employment of persons with disabilities. The 130 companies that have signed the charter are required to run internal awareness-raising campaigns on a regular basis in order to combat stereotypes and discrimination against persons with disabilities.

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

Reply to paragraph 29 of the list of issues

207. On 1 November 2019, the maximum adult disability allowance was increased to €900 per month. It has risen by a total of 11 per cent over three years, the equivalent of a thirteenth
monthly payment for recipients. This new maximum allowance is received by 1.1 million persons with disabilities, or 90 per cent of all recipients of the allowance.

208. The last survey conducted by the National Institute of Statistics and Economic Studies on the standard of living of persons with disabilities dates back to 2010 and does not take into account the personal disability benefit scheme. According to this survey, which was based on a sample group of 19,667 individuals, the median annual standard of living of persons with disabilities aged 15 to 64 years is €18,500, or €2,000 less than that of persons without disabilities.

209. A total of 30 per cent of persons with a severe mental impairment are living below the poverty line, compared with only 10 per cent of persons with a hearing impairment.

210. The proportion of persons with a severe motor impairment living below the poverty line is 19.6 per cent.

211. The proportion of persons with a psychosocial disability living in poverty is 22.6 per cent.

212. Overall, 11.5 per cent of persons with a visual impairment are living below the poverty line, compared with 27.8 per cent of blind persons and 30.3 per cent of persons with multiple disabilities.

Reply to paragraph 30 (a) of the list of issues

213. The main measures taken to address poverty among persons with disabilities include:

• Raising the adult disability allowance (see the reply to paragraph 29 of the list of issues).

• Launching the new solidarity health insurance scheme, which ensures that persons with disabilities on a low income have access to a wide range of medical services (including a selection of glasses, dentures and hearing aids under the “100 per cent Health” scheme), without any co-payment and either for free or for a small monthly contribution. In addition, under this scheme, the costs of certain types of medical equipment, such as catheters and dressings, are now fully covered for persons with disabilities.

• Five benefits are granted for life to persons with disabilities whose condition is unlikely to improve, namely the adult disability allowance, the mobility and inclusion card, the education allowance for children with disabilities up to the age of 20 years, recognition as a worker with disabilities and the personal disability benefit. The age limit of 75 years for applying for the personal disability benefit has been abolished.

Reply to paragraph 30 (b) of the list of issues

214. Inclusive housing is available alongside ordinary housing and as an alternative to living in an institution. This form of group housing is accompanied by a community living project.

215. In order to support the development of this type of housing for persons with disabilities, sources of financing are specified in the Housing, Planning and Digital Technology Act of 2018.

216. As an experiment, each regional health agency has contributed a fixed sum of €60,000 to fund a specific inclusive housing development in its own region. This sum is intended to cover the costs associated with the community living project (coordination, administrative management and organization of community life). In 2019, a sum of €15 million was invested into new and existing inclusive housing developments, of which €2 million was set aside for housing for autistic persons.

Reply to paragraph 30 (c) of the list of issues

217. No survey has been conducted among local and regional governments.
Participation in political and public life (art. 29)

Reply to paragraph 31 (a) of the list of issues

218. The Justice System Planning Act restored the right to vote to persons under guardianship. Of the 300,000 persons who regained the right to vote, 3,000 registered to vote ahead of the European elections.

219. Under national law, persons with disabilities must be allowed to vote independently at polling stations. Voters with disabilities may be assisted by a voter of their choice when putting their ballot paper in an envelope, putting the envelope in the ballot box and signing the register.

220. As regards the accessibility of election campaigns, since 2015, candidates have been able to upload their election manifesto to a website hosted by the Ministry of the Interior that is accessible to persons with visual impairments. Candidates standing in the last European elections could put online a version of their manifesto in Easy Read format.

221. An online voting system is being developed for French people living abroad.

222. The bill on audiovisual communication provides for measures that would increase the accessibility of programmes relating to election campaigns.

223. Consultations will be held with political parties with a view to ensuring that the 2022 presidential and legislative election campaigns are accessible.

Reply to paragraph 31 (b) of the list of issues

224. The National Consultative Council of Persons with Disabilities has been reformed in order to ensure the full participation of persons with disabilities in the conduct of public affairs and in the evaluation of measures taken, through their representative organizations (see reply to paragraph 34 of the list of issues).

225. Public consultations are held and panels are set up to allow persons with disabilities to participate in the early stages of policy development.

226. In addition, persons with disabilities are members of various national committees (see the reply to paragraph 2 (c) of the list of issues).

III. Specific obligations (arts. 31–33)

Statistics and data collection (art. 31)

Reply to paragraph 32 of the list of issues

227. Efforts are continually being made to improve data collection so as to be able to adjust public policies to the needs of persons with disabilities.

228. The State has two systematic and harmonized means of collecting data:

• Centralized administrative databases, for example, the new common information system for departmental centres for persons with disabilities that is being rolled out; the national cross-system sample of recipients of earned income supplements and basic welfare benefits, which includes recipients of the adult disability allowance; the national health database, which contains information on the medical expenses and hospital treatment of persons with disabilities; and the RESID-ESMS database, which contains medical and administrative data on persons with disabilities in medico-social institutions and is in the process of being set up.

• Two types of survey:

  • Annual thematic self-report surveys on informal aspects (such as feelings, non-take-up of benefits, family networks, informal carers and living conditions) and formal aspects (such as employment and income).
• General surveys that provide an overview of disability-related issues. The most exhaustive survey is conducted every 10 years and will next be undertaken from 2021 to 2023.

International cooperation (art. 32)

Reply to paragraph 33 (a) of the list of issues

229. Following on from the adoption of the Charter on Inclusion of Persons with Disabilities in Humanitarian Action, France took part in the Arria-formula meeting on the situation of persons with disabilities in armed conflict that was held in December 2018. France noted that there are four priorities to be addressed in this area:
  • Protecting persons with disabilities
  • Including them at every stage, from the needs assessment to the humanitarian response (call for ratification of the Charter)
  • Addressing their needs, which requires access to specific data (call for the collection of specific data on persons with disabilities in conflict situations, especially children)
  • Prevention, including through mine clearance

230. France co-sponsored Security Council resolution 2475 (2019) on the rights of persons with disabilities, which was adopted under the agenda item on the protection of civilians in armed conflict.

231. France also endorsed a joint commitment to ensuring that refugees with disabilities are taken into account in humanitarian response plans.

Reply to paragraph 33 (b) of the list of issues

232. Several of the projects financed by the European Regional Development Fund and the European Social Fund during the 2014–2020 programming period are related to disability and accessibility.

233. The European Regional Development Fund is being used to finance:
   • Special facilities at tourist spots and in public places
   • The development of digital and e-inclusion services
   • Research projects

234. The specific needs of persons with disabilities are consistently taken into account in all infrastructure projects.

235. The projects financed by the European Social Fund mainly relate to:
   • Training and apprenticeships
   • Integration into the labour market
   • Integration through cultural, physical and social activities

236. The drafting of the partnership agreement between France and the European Commission on the use of European funds over the period 2014–2020 and the monitoring of its implementation have involved consultations with the National Body for Consultations on the Partnership Agreement, whose members include the French Council of Persons with Disabilities on European Issues.

National implementation and monitoring (art. 33)

Reply to paragraph 34 (a) of the list of issues

237. Since 2017, an interministerial policy has been pursued with the help of a network of senior officials responsible for disability and inclusion, coordinated by the general secretariat of the Interministerial Committee on Disability. These officials are tasked with ensuring that
disability-related issues are taken into account in the policies of their respective ministries and that provisions relating to the Convention are implemented.

238. The Interministerial Committee on Disability meets annually to draw up a ministerial road map that is in line with the commitments made under the Convention.

Reply to paragraph 34 (b) of the list of issues

239. The National Consultative Commission on Human Rights is an independent administrative authority that includes representatives of associations of persons with disabilities. It advises public decision makers on issues relating to human rights and international humanitarian law and monitors the State’s fulfilment of its international commitments.

240. The Defender of Rights, a role established in 2008, is an independent constitutional authority responsible for both combating discrimination and promoting and monitoring the implementation of the Convention. In collaboration with civil society, the Defender of Rights has set up a joint committee on disability that brings together the main associations that represent major categories of disability.

241. The implementation of the Convention is tracked by a monitoring committee that comprises representatives of the Defender of Rights, the National Consultative Commission on Human Rights, the French Council of Persons with Disabilities on European Issues and the National Consultative Council of Persons with Disabilities.

Reply to paragraph 34 (c) of the list of issues

242. The general secretariat of the Interministerial Committee on Disability also serves as the secretariat of the National Consultative Council of Persons with Disabilities, which has a committee that focuses on European and international issues. The general secretariat of the Interministerial Committee on Disability provides human resources and technical and logistical support, with financial support from the Directorate General for Social Cohesion.

IV. COVID-19 – Additional information relating to the Convention, particularly article 11

The main measures taken in France under the lockdown and easing strategies in order to support persons with disabilities during the COVID-19 crisis

A. The principles that shaped the inclusive policy pursued by France during the COVID-19 health crisis

243. The crisis faced by our country has been a challenge for everyone.

244. It has been a particular challenge for the 10 million persons with disabilities and the 8 million informal carers whose help was needed more than ever during the lockdown. The action taken by the Government with respect to these fellow citizens has been guided by a certain number of principles that are based on the Convention.

• Following an approach based on the rights of persons with disabilities that involved taking lockdown and easing measures with due regard for their specific needs but without discrimination and in a way that allowed them to make an informed decision about the way of life they should adopt during the health crisis.

• Formulating these measures in constant consultation with the National Consultative Council of Persons with Disabilities and disability associations.

• Supporting the initiatives launched by the National Consultative Council of Persons with Disabilities, such as the national solidarity platform at https://solidaires-handicaps.fr/, which was designed to facilitate contact between persons with disabilities, their informal carers, professionals and local support systems (1,500 visits per day on average during the lockdown).
• Communicating in an accessible and adapted way about the health crisis and the measures taken by the Government, including by ensuring the accessibility of all the main interministerial announcements; providing French Sign Language interpreting and subtitles for all presidential statements; increasing the accessibility of the government website; preparing and widely disseminating information materials in Easy Read format (drafted in close collaboration with persons with disabilities); and creating and updating daily two lists of frequently asked questions on issues relating to disability and autism as a source of information for persons with disabilities, their families and all relevant professionals (see https://handicap.gouv.fr/grands-dossiers/coronavirus/).

• Developing an inclusive crisis management policy through interministerial steering and coordination.

B. Measures taken under the lockdown strategy

245. The lockdown in France began on 17 March 2020. The aim of the lockdown strategy was to ensure that persons with disabilities could continue to exercise their social rights, to adopt measures that would meet their specific needs and to support informal carers.

1. Protection of rights

246. First of all, the Government took several measures to support persons with disabilities financially and to secure their rights:

• Throughout the health crisis, entitlements (such as the adult disability allowance, the personal disability benefit and the education allowance for children with disabilities) and adult protection measures were automatically extended, more than once if necessary, when they expired.

• Persons with disabilities who work in employment rehabilitation establishments and services continued to receive their pay.

• 260,000 recipients of the adult disability allowance and personalized housing support received a one-off payment of €100 per child.

247. Departmental centres for persons with disabilities were closed to the public except for emergencies; however, they expanded their telephone services and followed up on requests remotely using the means of communication that was most appropriate to the situation (telephone, email, etc.), in order to ensure that persons with disabilities continued to receive the support they needed. They also introduced an expedited procedure to assist with the return home of persons who had been staying in medico-social institutions.

2. Support for informal carers

248. Like mainstream schools, many medico-social day schools and day-care facilities had to close. As a result, when the crisis began, almost 65,000 children and 30,000 adults were sent home, in addition to the 360,000 students with disabilities. The Government therefore made sure to help family members who found themselves acting as carers on a daily basis.

Support for parents of children with disabilities with respect to childcare and learning continuity

249. Parents who stopped working to look after their child with disabilities at home received a daily allowance under the social security system.

250. Each educational district had a hotline that parents of children with disabilities could call if they had any questions relating to learning continuity.

251. Students who did not have access to the appropriate digital tools or could not use such tools because of their disabilities received their assignments via post under a homework scheme organized by the Ministry of Education and Youth in partnership with the postal service.
Meanwhile, all teachers who work in mainstream schools and teaching units, coordinators of local inclusive education units, teachers serving as focal points and medico-social staff stayed in contact with students and their families and provided accessible and adapted learning materials and documents, with support from volunteer special needs teaching assistants where necessary.

The Ministry of Education and Youth also made available on the Eduscol website a pack of teaching materials for teachers and families that would help them to adapt lessons to students with special educational needs.

Specialized teachers who work in medico-social facilities such as medico-educational institutes had access to the tools provided by the Ministry of Education and Youth and the National Centre for Distance Learning, whose “My Virtual Classroom” tool ensured learning continuity for students with sensory disabilities.

**Respite solutions for informal carers**

Informal carers who were looking after persons with disabilities who usually received support from a medico-social institution or service could report any home care-related problems using the standard or out-of-hours telephone number of the facility in question. The main forms of temporary assistance offered in such cases were home visits of one hour or longer and walks in the surrounding area accompanied by a professional.

A sufficient number of boarding schools and temporary care facilities were kept open to allow for the provision of respite solutions and emergency support, including residential care for a renewable period of 7 to 14 days.

Families were also entitled to a certain number of hours of assistance from an approved home help service, financed by their family allowance fund.

### Access to health care

Remote consultations covered by national health insurance

A National Health Insurance Fund telephone number for people who could not find a doctor or a rehabilitation professional

Simplified access to additional rehabilitation

Permission for pharmacists to refill prescriptions that had expired

Measures to facilitate the provision of home care by professionals from medico-social institutions and services

Appointment of disability focal points in the emergency medical services

Provision of tools to help health professionals (in the emergency medical services and in contact tracing teams) to handle cases involving persons with disabilities appropriately

### Relaxation of lockdown rules to accommodate the specific needs of persons with disabilities

The rules on leaving the house were relaxed for children and adults with disabilities in order to help those who had experienced major behavioural problems or a deterioration in their mental health as a result of the lockdown, especially persons with autism, intellectual disabilities, attention deficit/hyperactivity disorder or a mental health condition. Their outings, during which they could be alone or accompanied, were no longer limited to one hour in length or to within 1 km of their home or restricted in terms of frequency and purpose.

For medico-social institutions that had continued to provide residential services for persons with disabilities during the crisis, the applicable national lockdown rules were relaxed early, on 20 April, to enable visits to resume and family members to reconnect.
C. Measures taken under the lockdown easing strategy

261. The lockdown in France was eased gradually, starting on 11 May 2020.

262. From the start, persons with disabilities were able to resume their normal lives, on an equal basis with others. There was no question of imposing specific rules on them on account of their disabilities. However, additional measures were taken in order to adapt the lockdown easing process to their specific needs.

263. Persons with disabilities who had a health condition that made them particularly vulnerable according to the vulnerability criteria defined by the High Council on Public Health, such as a chronic respiratory disease, diabetes, kidney failure, cancer, a heart condition or obesity, could make an informed choice, based on the specific information provided, about whether to remain at home or to resume their normal activities.

264. A sum of €150 million was allocated to regional health agencies to allow them to personalize their support and respite solutions as far as possible.

1. Measures to simplify access to entitlements

265. Following on from the measures taken during the lockdown, further measures were taken after 11 May to facilitate access to entitlements, particularly in the area of educational guidance. This flexible approach allowed children with disabilities and their families to prepare for the 2020/21 school year in the best conditions and prevented any interruption in their education.

266. As the lockdown was eased, departmental centres for persons with disabilities continued to provide increased telephone support and to use remote communication tools for appointments, in line with the arrangements for the reopening of other public services, including those at the departmental level. They resumed their in-person services progressively, taking into account the local situation.

267. In cases where employment rehabilitation establishments and services could not resume their activities because of the restrictions linked to the health crisis, the State continued to pay wage subsidies in full and covered the salaries of workers with disabilities.

2. Returning to a mainstream school or to a medico-educational institute

268. Students with disabilities could return to their place of education on an equal basis with other students, in accordance with the timeline and the procedures established by the Government. Parents could choose whether or not they wanted their children to return to school. Since class sizes were limited to 15 students, children with disabilities were defined as a priority category by the Ministry of Education and Youth.

269. A specific protocol was drawn up to clarify the new responsibilities of special needs teaching assistants and the conditions governing their return to work.

270. The technical support teams of day schools and day-care facilities were mobilized before 11 May to help students with disabilities to prepare for the end of the lockdown, together with their families.

3. Returning to work

271. Workers with disabilities who had been sent home by their employer during lockdown, without the option of working from home, could return to work on an equal basis with other employees. Teleworking was still the recommended working arrangement for all workers where possible. The Fund Management Association for the Integration of Persons with Disabilities and the Fund for the Integration of Persons with Disabilities in the Civil Service therefore took exceptional measures to allow for teleworking equipment to be adapted to the needs of persons with disabilities where necessary in order that they could continue working.

---

7 For more information, see the website of the High Council on Public Health: https://www.hcsp.fr/explore.cgi/avisrapportsdomaine?clefr=807.
Employment rehabilitation establishments and services resumed their activities before 11 May, progressively and in compliance with the relevant health regulations. In order to ensure that the return to work was as smooth as possible, each worker had to be informed, through accessible means of communication, of the arrangements that had been made.

Professionals from employment rehabilitation establishments and services provided additional home support to workers with disabilities who had been advised to remain at home because of their state of health, in order to reduce the risk of isolation and loss of contact with colleagues.

The Ministry of Labour distributed a set of information sheets containing guidance for different types of workplace in the context of the COVID-19 pandemic, in order to help employers to make the necessary adaptations and adjustments to working conditions for workers with disabilities.

**4. Measures to support informal carers**

The measures taken during the lockdown to ensure the provision of respite care and emergency temporary care remained in place and were strengthened. Each regional health agency was required to designate at least one facility that could provide temporary care for children and at least one such facility for adults.

Respite solutions were also introduced for foster parents and adult foster carers of children and young persons with disabilities who have been placed in the care of the child welfare services.

**5. Access to health care**

The measures taken during the lockdown remained in place.

Preventive medical check-ups, fully covered by the national health insurance scheme, were introduced in order to re-establish continuity of care for persons at risk or suffering from long-term health conditions and to support them through the lockdown easing process.

**6. Measures to address the specific needs of persons with disabilities**

Journeys of more than 100 km were authorized for the purposes of obtaining respite care or accompanying persons with disabilities. This measure helped to provide relief for carers and to make it easier for persons with disabilities to, for example, have the treatment they needed or to attend necessary medical appointments in places far from their home.

Persons with disabilities that made it difficult for them to tolerate wearing a face mask could be exempted from the requirement to wear one, for example on public transport. Such persons were nevertheless required to obtain a medical certificate indicating that they should be exempt. Such persons were also required to take all possible health precautions, such as wearing a visor if possible and practising social distancing.

**D. Crisis support hotline for persons with disabilities and carers**

Some persons with disabilities decided to remain at home after the lockdown, while others found it difficult to resume their health treatment or simply to resume their daily activities. In some cases, the health crisis gave rise to different and more complex needs, because certain conditions were exacerbated by the lockdown. Carers, meanwhile, need support and respite solutions more than ever, having worked particularly hard during the lockdown.

In order to address these needs, the State Secretariat for Persons with Disabilities decided to launch the national hotline announced by the President during the National Disability Conference earlier than planned and to adapt the initiative to the current context; the launch had originally been scheduled for 2021.
283. The hotline 0 800 360 360 is for persons with disabilities and carers who, as a result of the crisis, are facing a major problem that they cannot resolve and do not know where to turn, and whose situation requires a coordinated or local response. It is accessible to persons who are deaf or hard of hearing.