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| _unlogo | **Convention on the Rights of Persons with Disabilities** | | Distr.: General  13 September 2017  Original: English |

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

**Eighteenth session**

**Summary record of the 349th meeting**

Held at the Palais des Nations, Geneva, on Thursday, 24 August 2017, at 10 a.m.

*Chair*: Ms. Degener

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*Initial report of the United Kingdom of Great Britain and Northern Ireland* (*continued*)

*The meeting was called to order at 10 a.m.*

Consideration of reports submitted by parties to the Convention under article 35 (*continued*)

*Initial report of the United Kingdom of Great Britain and Northern Ireland* (*continued*) (CRPD/C/GBR/1; CRPD/C/GBR/Q/1 and Add.1)

1. *At the invitation of the Chair, the delegation of the United Kingdom of Great Britain and Northern Ireland took places at the Committee table*.
2. **The Chair** said that, at the invitation of the Committee, other members of the delegation would be speaking via video link from London.

Articles 11-20

1. **Ms. Jochelson** (United Kingdom) said that, before replying to the questions raised by Committee members at the previous meeting regarding the implementation of articles 11 to 20 of the Convention, her delegation wished to expand on the information already provided in response to the questions concerning articles 1 to 10.
2. An example of disability engagement was the consultative process that had been adopted in the development of the transport accessibility action plan in order to identify gaps in existing transport services; disabled people, carers, providers and local authorities had been involved. Quarterly consultative reviews of the functioning of the personal independence payment system were also conducted with stakeholders, including representatives of disabled people’s organizations. Consultation on the employment and support allowance had resulted in the simplification of the work capability appointment letter, questionnaire and decision letter and the publication of a new fact sheet. The Global Disability Innovation Hub, which had been set up after the London 2012 Paralympic Games with the involvement of disabled people, academics and the community, was set to become the leading place for disability innovation.
3. **Ms. Harvey** (United Kingdom) said that the Government was committed to ensuring that disabled people were systematically included in and benefited from international aid and humanitarian assistance initiatives, as was shown by its funding of programmes to support civil society organizations and foster innovative development solutions and grass-roots development.
4. **Mr. Dear** (United Kingdom) said that the Well-being of Future Generations (Wales) Act required the public authorities in Wales, in their decision-making, to reflect the diversity of the community and to take account of the possible long-term effects of their decisions. The Disability Equality Forum brought together all stakeholders to advise the public sector on the key issues affecting disabled people in Wales.
5. **Mr. Jack** (United Kingdom) said that the Scottish government had made over ₤2 million available to disabled people’s organizations for each of three years to enable them to work with it in shaping public policy. The funds had also been used for intiatives such as the Access to Elected Office Fund, which had supported 39 candidates in the recent local elections, of whom 15 had been elected.
6. **Ms. Henderson** (United Kingdom) said that legislative provisions obliged all public bodies in Northern Ireland to take account of the impact of their policies on disabled people. The Equality Commission for Northern Ireland monitored the action taken to promote positive attitudes towards disabled people and encourage their participation in public life. Engagement sessions had been held to discuss the draft programme for government framework 2016-2021, and many of the issues raised, including that of the inadequate availability of data on disability-related matters, had been included as cross-cutting themes in the wider draft delivery plan or as specific aspects of the draft delivery plan for disabled people. A proposal had been made to establish a regional disability forum to influence the development of public policy.
7. **Mr. King** (United Kingdom), speaking via video link from London, said that, in 2016/17, a total of 3,781 cases concerning discrimination on grounds of disability had been brought before employment tribunals. Although no breakdown of the figures was available, it could be assumed that cases for reasonable adjustment formed a significant proportion of that number. Regarding the uncommenced provisions of the Equality Act 2010, the Government had recently implemented the provisions requiring drivers of wheelchair-accessible hire vehicles to provide assistance as necessary without making any extra charge. Each of the remaining provisions raised different issues with regard to regulatory complexity, implementation, compliance costs and new burdens for both the private and public sectors; the situation would be kept under review. He wished to reiterate that, while the Act did not offer any specific protection from multiple discrimination, claims could nevertheless be brought on more than one ground; they could be presented on the same form and might be heard by the court in the same sitting.
8. **Ms. Gibby** (United Kingdom) said that, in the justice system, issues related to disability were taken into account in the case management process and judges were able to allow adjustments to assist participants with disabilities. Where a person had problems with understanding the proceedings, a communications specialist known as an “intermediary” would be brought in to provide support. The fees for bringing a case to court were established on the premise that individuals who were capable of paying should do so. Those eligible under the means-tested system could apply for partial or full waivers of such fees. Employment-related disability claims were generally dealt with by employment tribunals. The Supreme Court had recently ruled against the fee system used for those tribunals, and so the Government had taken immediate steps to stop charging fees and refund those already paid. It would now take time to consider the judgment before deciding how to proceed. The Mental Capacity Act 2005 offered support with decision-making for disabled people where it was needed, empowering those capable of taking decisions and protecting those who could not. The National Mental Capacity Forum had held an action day on the subject in February 2017 that had been attended by 140 stakeholders from sectors ranging from social care to banking and the police.
9. **Mr. Nuttall** (United Kingdom) said the Mental Capacity Act 2005 ensured that persons could only be deprived of their liberty when that was deemed to be in their best interests and under conditions that were as unrestrictive as possible. The decision was subject to independent assessment and could be challenged in court. The views of all concerned, whether family members, professionals — including an independent mental capacity advocate — or the persons themselves, were taken into account. The Care Quality Commission was responsible for monitoring use of the Act in care settings and published its results in an annual report.
10. Where a patient was judged incapable of giving consent, and after proper consultation of family and carers, antipsychotic drugs and other treatments considered to be in the patient’s best interests could be administered for up to three months without his or her consent. Thereafter, the opinion of a second medical professional, appointed by the Care Quality Commission, was required. An independent mental capacity advocate could also be appointed, and the previous beliefs and attitudes of the patient were taken into account where possible. The Government was committed to a reform of the Mental Health Act 1983 and, as part of that process, would examine the reasons for the disproportionate representation of certain ethnic groups, notably black persons, among the persons detained under the Act.
11. In promoting independent living, local authorities were required under the Care Act 2014 to carry out an assessment of the support needs of disabled people. Where the needs identified were considered eligible, the authorities must meet the associated costs if the person was unable to do so, unless the needs could be met in a care home.
12. **Mr. Wolfe** (United Kingdom) said that the new personal independence payment offered non-means-tested financial support for those individuals with long-term health conditions who faced the greatest barriers to independent living. One third of the recipients of the previous disability living allowance had already been assessed, with 75 per cent qualifying for the new payment, most of them at a higher level than previously. It might be noted that 28 per cent of recipients of the new benefit, including 38 per cent of those who had received the previous allowance, now received the highest level of the payment, at ₤141.10 per week.
13. **Mr. Jack** (United Kingdom) said that the Scottish Independent Living Fund had been introduced in 2015 to help disabled people with high support needs to live independently in the community if they so chose. By March 2017, 2,591 persons had been benefiting from the ₤47.2 million annual funding. Another new scheme developed by the multi-department Independent Living Fund Working Group provided ₤5 million to help young people with support needs.
14. **Mr. Dear** (United Kingdom) said that the Welsh government had announced in November 2016 that all persons who had received support from the Independent Living Fund would, by 2019, have their needs assessed and met through normal local authority social care provision. A care plan and desired outcomes would be agreed with the persons concerned, to allow them to choose how they wanted to live.
15. **Ms. Henderson** (United Kingdom) said that, in Northern Ireland, electroconvulsive therapy could be given without a person’s consent only with a second medical opinion arranged through the regulatory authority, the doctor having met the patient and reviewed the case history before giving his or her opinion. Forthcoming legislation would prohibit the second medical opinion procedure if the person had the capacity to give consent. In 2015/16, 121 persons had been given 137 courses of electroconvulsive therapy, of which 94 with the individual’s consent and 43 with a second medical opinion.
16. **Ms. Gibby** (United Kingdom) said that prospective jurors with disabilities could visit the court concerned and request reasonable adjustments prior to service; if the adjustments could not be made, the person could instead be allowed to serve at another nearby court. Persons requiring third-party support such as a sign language interpreter were currently disqualified from jury service, as no one but jury members could be admitted to the jury’s deliberations for more than a short period. The Ministry of Justice would conduct and publish a post-implementation review of the recent legal aid reform when it was assessed to have reached a steady state. A 2014 review of the Civil Legal Advice gateway had found that it operated effectively and was able to accommodate persons with additional needs. The number of persons who decided to represent themselves in court had risen since the changes to the eligibility criteria for legal aid. However, new measures covered the proper provision of information and training for judges in dealing with such persons. In addition, funding of ₤5 million had been allocated since 2015 to encourage the provision of advice from voluntary organizations and pro bono legal support. The prison service offered support for prisoners with hearing impairments, with prison staff able to request interpretation services.
17. **Ms. White** (United Kingdom) said that asylum claimants with disabilities were provided with accommodation and medical support before any decision was taken on their case. Mental health problems or learning difficulties were taken into account in evaluating asylum claims and, where it was not possible to conduct an interview, medical evidence could be used in support of a case. Information leaflets were available at the point of asylum claim, giving the details of Asylum Help UK, an experienced support organization, and government staff received training on safeguarding issues and ensured that reasonable adjustments were made where necessary. Unaccompanied children were interviewed as soon as possible to identify their needs and assess their health.
18. In order to protect women and girls in institutions, among others, the offence of wilful neglect had been introduced into legislation and cases could be reported to the Care Quality Commission or a social care ombudsman. A strategy had been developed to ensure the accessibility of services to protect disabled women and girls, including those affected by gender-based violence.
19. The Independent Police Complaints Commission paid close attention to complaints of violence involving the use of taser guns, all of which had to be referred to it. A new system for police to record cases of taser gun use included data on the characteristics of the persons on whom they were used; the first such data would be included in a 2017/18 Home Office report. Mechanisms were to be introduced at local level to scrutinize the use of taser guns in mental health settings and the resulting information would be shared between authorities.
20. **Ms. McNamara** (United Kingdom) said that, under the Civil Contingencies Act 2004, local authorities and emergency services were responsible for drawing up emergency response plans that took into account the needs of disabled people. Local responders received guidance on identifying vulnerable persons in an emergency, and police officers were trained to give consideration to the needs of such persons when planning operations.
21. New social housing in England was required to have entrances and emergency exit routes that were accessible to disabled people. Under the newly established Building Safety Programme, unsafe buildings were being identified and landlords were taking the necessary steps to ensure the safety of all residents. Social housing landlords were required to meet national safety standards, which were enforced by local authorities.
22. The national building regulations contained standards on the provision of accessible public toilets, including Changing Places toilets, which were equipped with additional accessibility features. There were now 1,029 Changing Places toilets, compared with around 140 in 2007; those toilets could be located quickly and easily thanks to a State-funded website.
23. Efforts were under way to improve the accessibility of buildings and to promote inclusive planning. The National Planning Policy Framework stipulated that local authorities should plan for a mix of housing, based on the needs of different groups, including disabled people.
24. **Ms. Wadimba** (United Kingdom) said that the accessibility of railway stations had been improved through the provision of step-free access, tactile pavements and other services. Bus accessibility requirements were met by 94 per cent of all buses. The Civil Aviation Authority had established quality standards for the provision of assistance to disabled people during air travel.
25. **Mr. Eridani-Ball** (United Kingdom) said that schools received regularly updated guidance on bullying prevention. The Government had provided £1.6 million over the course of two years to four anti-bullying associations. Parents who believed that a school had discriminated against their child on the basis of disability could file a complaint through the school complaints procedure or bring the case before the Special Education Needs and Disability tribunal. The Government supported organizations that provided assistance to parents in that regard, such as the Coram Children’s Legal Centre. There was a mandatory qualification for teachers wishing to work with children with visual impairments; once qualified, those teachers provided support in homes, early years education, schools and post-16 settings.
26. **Mr. Jack** (United Kingdom) said that local authorities in Scotland were required to take into consideration the needs of disabled people in planning and development. Scotland’s Accessible Travel Framework, published in 2016, had been prepared in consultation with disabled people and their representative organizations; it set out ways to address major barriers to accessible travel.
27. The number of Changing Places toilets in Scotland had increased significantly since 2013, to a total of 151. The administration had recently invested in mobile Changing Places toilets and a Changing Places champion had been appointed.
28. Since 2015, the Scottish government had provided annual funding of £45,000 to the national charity Equality Network, to increase the involvement of intersex persons in policy development. The upcoming consultations on gender identity would encompass the rights of intersex persons.
29. **Mr. Dear** (United Kingdom) said that the Social Services and Well-being (Wales) Act had introduced safeguards against abuse and neglect in health and care settings, including a duty for local authorities to investigate any suspected abuse. Healthcare Inspectorate Wales carried out unannounced inspections of health services to verify their compliance with the Act.
30. In 2011, the Welsh government had issued guidance for schools on combating bullying of disabled people; that guidance was currently being reviewed. Quality standards for social housing in Wales stipulated that homes must be safe, well maintained and adapted to the needs of residents, including those with disabilities.
31. **Ms. Henderson** (United Kingdom) said that the Northern Ireland Executive had recently provided funding for 11 persons to complete a Master’s degree in sign language interpreting and for 15 persons to obtain a sign language teaching qualification. Consultations had been held on a framework to promote British and Irish Sign Language. The Northern Ireland Department for Communities organized training for adults and children in areas such as deaf awareness and was working with two universities to develop sign language courses.
32. **Mr. Nuttall** (United Kingdom) said that the Care Quality Commission had reviewed the way in which unexpected deaths of mental health patients were investigated by National Health Service (NHS) trusts and had issued recommendations in that regard, which were being implemented in coordination with NHS Improvement and NHS England. Decisions to reduce care packages could be challenged through local complaints procedures or through independent bodies such as the Parliamentary and Health Service Ombudsman. Complainants could also request a judicial review of the decision.

Articles 21-33

1. **Mr. Kim** Hyung Shik said that he would like information on physical barriers that prevented persons with disabilities from accessing quality mainstream health care and steps taken to combat discrimination against persons with disabilities in the field of health care, especially persons with intellectual disabilities and women with disabilities.
2. He asked what measures would be taken to ensure the successful implementation of the Improving Lives: Work, Health and Disability green paper; how wide the pay gap was between workers with disabilities and those without disabilities; how that pay gap would be addressed; and what steps would be taken to promote the recruitment of persons with disabilities, to eliminate discrimination against persons with disabilities in the field of employment and to ensure the provision of reasonable accommodation in workplaces.
3. Lastly, he asked what was being done to ensure that persons with disabilities and their representative organizations were fully involved in designing, implementing and monitoring disability-inclusive international cooperation projects.
4. **Mr. Buntan**, pointing out that there was no nationwide system ensuring the full participation of persons with disabilities and their representative organizations in decision-making, asked what legislative or structural changes would be introduced to remedy that situation. He also wished to know whether non-binding European Union guidelines, such as Directive (EU) 2016/2102 of the European Parliament and of the Council of 26 October 2016 on the accessibility of the websites and mobile applications of public sector bodies, would be incorporated into national legislation following the State party’s withdrawal from the European Union.
5. He asked what criteria were used to determine whether a child with a disability could attend a mainstream school; whether a mainstream school’s decision to reject a child on the basis of disability was considered a form of discrimination; and whether the State party intended to reform special schools to support the development of an inclusive education system. With regard to employment, he wished to know how many persons with disabilities were employed in sheltered workshops and whether there were plans to transfer those persons to the open labour market.
6. Noting with concern the reports that up to 18 per cent of claimants of the employment and support allowance were sanctioned each year and that the mandatory reconsideration procedure was lengthy and often resulted in the upholding of the initial decision, he asked whether the Government had evaluated the effectiveness of the procedure in ensuring that all persons with disabilities received the benefits they needed in order to live independently. Lastly, he enquired whether the State party intended to ratify the Marrakesh Treaty to Facilitate Access to Published Works for Persons Who Are Blind, Visually Impaired, or Otherwise Print Disabled following its withdrawal from the European Union.
7. **Mr. Basharu**, emphasizing that the requirement for television channels to provide sign language interpretation for 30 minutes of programming per month was inadequate, asked what measures would be taken to increase the amount of broadcast information that was accessible to deaf persons. He also wished to know what steps were being taken to facilitate access to sexual and reproductive health services for women with disabilities, what efforts had been made to include persons with disabilities fully in the electoral process and how many persons with disabilities sat on the Electoral Commission.
8. **Mr. Chaker** asked how the State party guaranteed the voting rights enshrined in article 29 (a) of the Convention.
9. **Mr. Ruskus**, noting that the number of children with disabilities in mainstream education had declined since the State party’s ratification of the Convention in 2009, said that he would like to know what was being done to incentivize mainstream schools to adopt an inclusive approach and to build their capacities in that regard. He would welcome more detailed information on the content, monitoring and geographical distribution of the Disability Matters training programme, including clarification as to whether it reflected a gender-sensitive approach and whether it involved organizations of persons with disabilities. Lastly, he asked how medical professionals communicated with deaf and hard-of-hearing persons, as well as persons with dementia; what health-care services were available for persons with dementia; and what efforts had been made to address the lack of mental health services and community-based services, especially in Northern Ireland.
10. **Mr. Parra Dussan** asked whether the State party intended to maintain two parallel education systems or to adopt a single model of inclusive education.
11. **Mr. Babu** asked how the State party would take into account the Committee’s general comment No. 4 (2016) on the right to inclusive education and the relevant provisions of the Convention in its efforts to implement Sustainable Development Goal 4, especially targets 4.5 and 4.A, and how it would be guided by article 31 of the Convention, on statistics and data collection, in its work towards Sustainable Development Goal 17, especially target 17.18. He would like the State party to illustrate what it had learned from the dialogue by identifying three comments made by the Committee that would inform its future policymaking.
12. **Mr. Kabue** said that he would welcome further information on the measures that the State party would take to create 1 million jobs for persons with disabilities, as outlined in the delegation’s opening statement the previous day. He asked whether recipients of the State party’s development assistance were required to take account of the disability dimension, as was the case with gender. Noting with concern reports that the implementation mechanism for the Convention was not effective owing to underfunding and that persons with disabilities and their representative organizations were not adequately involved in the monitoring and implementation processes, he enquired what measures would be taken to remedy that situation.
13. **Mr. Martin** said that he was deeply concerned about reports that parents with learning disabilities were not receiving the support they required and that their children were often removed from their care. He would like to know how many families had been affected since the ratification of the Convention by the State party and what steps the Government was taking to help such families stay together. During the recent general election in the United Kingdom, some voters with learning disabilities had been turned away from polling stations and told — incorrectly — that they were prohibited from voting under the Mental Capacity Act 2005. He asked what protections would be put in place to ensure that persons with learning disabilities could exercise their right to vote, to which they were entitled as citizens of the United Kingdom. He would also appreciate a response to his earlier question on graded guardianship. He noted that guardianship would not be necessary if the State party introduced a system of supported decision-making.
14. **Mr. Alsaif** said that he would like up-to-date information on the development of data-collection systems based on the human rights model of disability, as well as the latest data available on persons with disabilities and their exercise of their human rights. He wished to know how the State party planned to mainstream disability into its efforts to implement the 2030 Agenda for Sustainable Development.
15. **Mr. Rukhledev** said that he would welcome information on any State programmes to promote inclusive education for deaf children and on the efforts of staff in mainstream schools to encourage interaction between children with and without disabilities. In addition, he would appreciate clarification of the statement in the replies to the list of issues (CRPD/C/GBR/Q/1/Add.1, para. 103 (a)) that there were circumstances in which the educational needs of children with disabilities were best met through specialist provision outside the local community. In that connection, he wished to know whether the State party intended to withdraw its reservation to article 24 of the Convention. He asked whether the Electoral Commission involved organizations of persons with disabilities in efforts to ensure accessibility of polling stations and electoral campaign material; whether sign language interpretation was available for political statements and televised political debates; and whether the campaign budgets provided to persons with disabilities running for office were sufficient to fund such accommodations and services as they might need. Lastly, he enquired whether the State had introduced programmes to develop adaptive sports for persons with disabilities; whether measures would be taken to ensure that sport for deaf persons received State financial support; and whether the prizes for winners at the Deaflympics were the same as those awarded to winners at the Paralympics.
16. **Mr. Lovászy** asked whether the State party was considering removing from its laws on education and disability the caveats that allowed children with disabilities to be refused access to mainstream schools if it was believed that their presence would adversely affect the education of children without disabilities. He also wished to know whether the reports that funding for sign language interpretation for university students had been cut were correct and, if so, whether alternative support measures had been introduced, and whether there were universally applicable standards for the provision of reasonable accommodation for students with disabilities in general. He wondered whether the Welsh government would take account of the Convention in the Additional Learning Needs and Education Tribunal (Wales) Bill. Lastly, while he was aware that, if the National Health Service refused the application of a person with a disability for funding for reasonable accommodation, the individual could seek remedies, he would appreciate more information on the related procedure, which was reportedly burdensome and not free of charge.
17. **Mr. Tatić** said that he would welcome more information on how the Accessible Transport Strategy in Northern Ireland would be funded and when it would be implemented. He would also appreciate data on the number of persons with disabilities who had availed themselves of the legal remedies available to challenge cuts to their care packages and on the number of cases in which the benefits paid to persons with disabilities receiving the new personal independence payment had decreased in comparison to those received under the previous disability living allowance scheme. He would like to hear more about the accessibility of tourist and cultural venues across the United Kingdom; the delegation should share information regarding the Government’s efforts to improve the accessibility of historic sites, which would provide an example of good practice for other countries to follow.
18. **Mr. Ishikawa** said that he would like to know which categories of persons with disabilities were most affected by the negative attitudes towards those receiving State benefits, attitudes that were fuelled by the media and government representatives. He asked what steps the Government was taking to promote positive attitudes towards persons with disabilities who were unable to earn a living through paid employment.
19. The United Kingdom and its overseas territories had a number of sites on the World Heritage List of the United Nations Educational, Scientific and Cultural Organization (UNESCO). Such sites were often considered untouchable and were therefore not adapted to the needs of persons with disabilities. He wished to know whether the State party would take measures to adapt its UNESCO World Heritage Sites so that they met accessibility standards.
20. **Mr. Pyaneandee** said that, despite the ambition of the State party to place mental health care on a par with physical health care, patients with mental health needs still had to travel great distances in order to receive treatment. Moreover, the suicide rate among persons with mental health conditions, particularly in Northern Ireland, was a cause for concern. He would appreciate a comment from the delegation on what the Government intended to do in order to address the issue.
21. He asked why individual awards under the Access to Work scheme were capped at just over £42,000 a year, even though the scheme was self-funding; how the delegation could explain the pay gap between persons with and without disabilities; and how the Government intended to create 1 million jobs for persons with disabilities.
22. **The Chair** said that she would like to hear about efforts to tackle the harmful practice of intersex genital mutilation. While significant funding was being directed to initiatives to benefit the lesbian, gay, bisexual and transgender (LGBT) community in the United Kingdom, which was commendable, not enough was being done to address the needs of intersex persons.
23. If the United Kingdom withdrew its reservation to article 24 of the Convention, other countries could well be encouraged to follow suit. With regard to Northern Ireland, she wished to know what steps were being taken to guarantee the right to inclusive education and why 80 per cent of children with disabilities in 2015/16 had not obtained a statement of special educational needs within the 26-week time frame prescribed by law. She would remind the delegation that the provisions of the Convention extended to all parts of States parties without exception.
24. The drastic social cuts introduced by the Government in recent years had had a catastrophic impact on the lives of persons with disabilities. She wished to have more information about the efforts that the Government would make to monitor the effects of the cuts and of schemes such as the Fit for Work programme on persons with disabilities, and about the outcomes of cases in which complaints had been filed against employers who refused to provide persons with disabilities with reasonable accommodation. She would also like details of any measures taken to implement the recommendations made in the Committee’s 2016 report on the inquiry carried out under article 6 of the Optional Protocol to the Convention and in reports of national legislative bodies pertaining to the impact of social protection reforms on persons with disabilities.
25. **Mr. Langvad** said that he would appreciate information on measures to prevent the termination of pregnancies based on the potential impairment or disability of the foetus. He asked whether the State party intended to withdraw its reservation to article 18 of the Convention, on liberty of movement and nationality; how the State party calculated the costs of independent living for persons with disabilities; whether the Office for Disability Issues and the Equality and Human Rights Commission would receive increased funding in order to strengthen their capacities; what actions were taken by governmental coordination mechanisms pursuant to article 33 (1) of the Convention; how efforts to mainstream the rights of persons with disabilities were aligned with efforts to realize Goals 8 and 10, and targets 8.5 and 10.2, of the Sustainable Development Goals; and how organizations of persons with disabilities were involved in that process.

*The meeting was suspended at 11.55 a.m. and resumed at 12.20 p.m.*

1. **Ms. Jochelson** (United Kingdom) said that disabled people were entitled to request assistance with marking their ballot papers when voting in elections. Presiding officers, close family members over the age of 18 years or eligible support workers could perform that function. Tactile voting devices could be affixed to ballot papers for visually impaired people and large-print reference versions of ballot papers were also available. Polling stations were chosen in consultation with disabled people’s organizations and arrangements could be made to deliver ballot papers to persons who were unable to enter the polling station because of a physical disability. An electoral accessibility group was in place, in which leading charities in the field and key electoral stakeholders participated. An internal review of the accessibility of the voting registration website was currently under way.
2. Section 104 of the Equality Act 2010 addressed the underrepresentation of disabled people in elected bodies. Under the Act, political parties could, for example, reserve a specific number of seats for disabled people on election shortlists. The Access to Elected Office Fund 2012-2015 had provided financial assistance to disabled people seeking elected office. The Fund had been closed following the 2015 general election and an evaluation had been carried out, the results of which would be published in due course. No information was available on the number of disabled people working in the Electoral Commission. However, the Government was committed to increasing the appointment of disabled people to public bodies and a government code had been recently adopted for that purpose. Furthermore, the Centre for Public Appointments was cooperating with relevant sectors to modernize recruitment processes.
3. The Communications Act 2003 was regarded across the world as a good example of a legal framework for improving the accessibility of television services. Service providers were obliged to meet statutory targets. For example, the targets for the subtitling and sign language interpretation of broadcasts, as a percentage of all television services provided, were 80 per cent and 5 per cent, respectively. For the British Broadcasting Corporation (BBC), the subtitling target was 100 per cent excluding the BBC Parliament channel.
4. The Fulfilling Potential Strategy had been published in 2013. The Government had committed in 2016 to review the Strategy in order to assess its strengths and weaknesses. The concluding observations of the Committee would be used to inform the Government’s future approach to disability engagement and data collection. A number of reports providing disaggregated data on the situation of disabled people had been produced. The reports were based on a combination of periodic and ad-hoc surveys, as well as administrative data.
5. The Office for Disability Issues functioned as the focal point for matters relating to the implementation of the Convention. It facilitated direct discussion with disabled people in order to assess the impact that government policies would have on their lives. It comprised 16 staff members and was supported by lawyers, analysts and other specialists working in the Department for Work and Pensions. The budget for the Office was negotiated annually on the basis of future work to be carried out.
6. The Equality and Human Rights Commission would continue to receive sufficient funds to enable it to perform its statutory functions. A spending review was under way, and it was expected that the budget for the Commission would remain above the minimum required level, currently set at just over £17 million.
7. **Ms. Wadimba** (United Kingdom) said that the transport accessibility action plan being launched that day had been drafted with the input of the Disabled Persons Transport Advisory Committee. A final accessibility strategy would be launched in 2018 following further consultations.
8. **Ms. McNamara** (United Kingdom) said that building regulations required new sports, tourism and cultural venues to meet reasonable accessibility standards. Museums funded directly by the Government or via Arts Council England were expected to increase attendance by groups less likely to visit, including disabled people. The 15 government-sponsored museums and the British Library had already taken measures to make their buildings and collections universally accessible, installing level or ramped entrances, accessible toilets and lifts, making wheelchairs available, and providing audio description and touch tours for people with visual or hearing impairments as well as tailored events for people with physical or learning disabilities. The organization Attitude is Everything worked to improve disabled people’s access to live music events.
9. **Ms. White** (United Kingdom) said that, while the Government did not disagree with the essence of article 18, a reservation had been entered because of concern that the article might be interpreted as providing additional rights to nationality, residence and liberty of movement for people with disabilities compared to those without disabilities. Disabled people had the same rights to apply for British nationality or to enter or remain in the United Kingdom as non-disabled people.
10. **Mr. King** (United Kingdom), speaking via video link from London, said that the disability pay gap, which was likely attributable in part to a lack of opportunities for disabled people in more senior positions in business, was a priority issue for the Government and would be kept under careful review.
11. **Mr. Wolfe** (United Kingdom) said that there were currently 3.5 million disabled people in employment — an increase of over half a million in the past three years. Over the same period, the disability employment rate had risen by more than 5 percentage points to 49 per cent and the disability employment gap had decreased by 2.5 percentage points. The Government had committed to having an additional 1 million disabled people in employment within the next 10 years; progress towards that goal would be monitored using the Labour Force Survey. The Work and Health Unit had been established in 2015 to improve the health and employment outcomes of working-age people who had or might acquire a health condition or disability.
12. The Government encouraged employers to create inclusive workplaces and supported disabled people who had been employed in sheltered workplaces in making the transition to inclusive employment. The Disability Confident scheme encouraged employers to think differently about disability and to attract, recruit and retain more disabled workers. Disability Confident employers were expected to ensure that their employees were aware of disability equality requirements, that staff carrying out recruitment made the process fully accessible and proactively offered reasonable adjustments, and that managers and supervisors understood how to support their disabled staff. Almost 5,000 businesses had signed up to the scheme.
13. The Government had announced extra funding for the Access to Work scheme. The scheme provided for additional support for disabled employees, above and beyond the reasonable adjustments that employers were required to make in line with their obligations under the Equality Act 2010. The amount of help that individuals received depended on their needs. The sums disbursed were intended to provide a generous but reasonable level of support that was fair to employees, employers and the taxpayer. The Work Choice scheme was a voluntary employment programme specifically for those who found it difficult to find or keep a job owing to their disability or health condition. Since its introduction in 2010, nearly 110,000 people had started work through the programme, and the proportion of people who had achieved a sustained outcome had risen steadily. The Work and Health Programme, to be launched in 2017, would build on what had been learned from Work Choice.
14. The United Kingdom took very seriously its duty to protect the most vulnerable people in society while supporting those who could do so to find and retain work. It carefully considered the impact of policy changes on those with protected characteristics, including disability. The Government stood by its reforms to the welfare system, which had incorporated numerous protections to support vulnerable groups least able to increase their earnings, such as exemptions from the benefit cap and benefit freeze for disabled people. With respect to the employment and support allowance, mandatory reconsiderations were tracked to see trends and improve decision-making processes. A 2016 review by the independent Social Security Advisory Committee had supported the view that mandatory reconsideration was an effective process that aided dispute resolution, and recommended some improvements. A distinction should be made between the outcome of the work capability assessment, which determined entitlement to the benefit, and a sanction, which was a reduction in benefit for failing to deliver actions that had been agreed with the Department of Work and Pensions.
15. **Mr. Jack** (United Kingdom) said that improving the employment prospects of disabled people was a key priority for the Scottish government. The long-term aim was to halve the disability employment gap. In partnership with Skills Development Scotland, steps were being taken to make modern apprenticeships more attractive and accessible to disabled people. Other measures to increase the number of disabled people in the workforce would include the development and delivery of devolved employment services in Scotland as from April 2018, the integration of health and employability support, further action to promote and support the delivery of the supported employment model, publication of a youth employment strategy and of autism and learning disability strategies, and piloting of work experience projects for young disabled people.
16. **Mr. Dear** (United Kingdom) said that the Welsh government and the United Kingdom Government had a joint ambition to support all people who wished to work to find sustainable employment. The Communities for Work programme in Wales, which was jointly funded by the two administrations and the European Social Fund, provided bespoke support to those who faced significant and complex barriers that prevented them from taking up training or employment. The programme would provide over £70 million in employment support services in the most deprived communities until 2020. As at June 2017, advisors had engaged with 9,900 individuals, of whom 2,000 had work-limiting health conditions and 1,000 were disabled.
17. **Mr. Nuttall** (United Kingdom), replying to questions on article 25, said that the Department of Health had funded the development of Disability Matters, a free e-learning tool for professionals in the National Health Service, social care and other settings on understanding and supporting the needs of disabled people. The tool had been developed in partnership with disabled people and their families. The Government had given parity of esteem to the treatment of mental health conditions in the National Health Service, established waiting time standards for mental health appointments, and increased spending on mental health to a record £11.6 billion in 2016/17. It recognized the importance of equal access to sexual and reproductive health information and services for everyone, including those with disabilities. The Framework for Sexual Health Improvement in England provided for information and support tools. Data on the number of complaints or court cases brought against local authorities with respect to cuts to social care were not available. The Female Genital Mutilation Act made that practice a criminal offence but permitted surgical procedures if they were carried out by an approved person and necessary for a woman or girl’s physical or mental health; that could include interventions on intersex persons. Decisions on whether such procedures were necessary were made in consultation with parents or carers following careful assessment of the circumstances of each case. The Government did not base decisions on whether disabled people should be cared for in institutions or the community on the relative costs of each but determined the most appropriate setting on a case-by-case basis. Disability-selective abortions were permitted under the Abortion Act 1967 up until the moment of birth provided that two medical practitioners believed there to be a substantial risk that if the child was born it would, in the words of the Act, “suffer from such physical or mental abnormalities as to be severely handicapped”.
18. **Ms. Henderson** (United Kingdom) said that the Special Educational Needs and Disability Act (Northern Ireland) 2016 provided a statutory basis for identifying, assessing and providing support to all children who had special educational needs. A new special educational needs framework would be introduced during the 2018/19 academic year. A special educational needs programme board had been set up to address the recommendations made in the report of the Northern Ireland Audit Office, including the recommendation that the Education Authority must record and monitor the reasons for delays in issuing statements of needs in order to reduce waiting times.
19. **Ms. Gross** (United Kingdom) said that the Government was strongly committed to inclusive education for disabled children and young people. In England, 98.6 per cent of children were educated in mainstream schools. Parents had the right to specify the school they wanted named in their child’s statutory education, health and care plan and that school then had to admit the child and make reasonable adjustments. While many parents of disabled children chose mainstream education, others believed that a specialist setting was best suited to their child’s special educational needs. There had been a slight increase in the number of children attending special schools; the situation was being monitored. Under new teaching standards published in 2016, there was a stronger focus on meeting the needs of disabled children in mainstream education. The Government supported the development of a wealth of materials and training resources for teachers. All schools were required to have a special education needs coordinator. She had listened carefully to Committee members’ comments concerning her country’s reservation to article 24. The United Kingdom Government continued to see an important role for special schools and specialist units in mainstream schools, particularly for the small minority of children with complex needs. Special schools were expected to be part of the overall education community, supporting inclusion and sharing their specialist knowledge with mainstream schools. The reservation would be kept under review, and new research and emerging international practice would be given due consideration.
20. Regarding parents with learning disabilities, one of the key legal principles was that services provided by local authorities and professionals should aim to keep families together provided that that was in the best interests of the child. The parents’ disability should only be relevant if it adversely affected the care of the child at home. The decision on whether to take a child into care was ultimately a matter for the courts. Children taken into care and their parents received the necessary support for a return to the family home.
21. **Mr. Dear** (United Kingdom) said that the Additional Learning Needs and Education Tribunal (Wales) Bill was fully in keeping with the spirit of the Convention. Entry to all UNESCO world heritage sites in Wales was free of charge for disabled visitors and their carers.
22. **Ms. Henderson** (United Kingdom) said that, in general, there was a higher rate of mental health problems in Northern Ireland, including high levels of often untreated post-traumatic stress disorder as a result of almost 40 years of conflict. Suicide rates among disabled people were not routinely collected. A service framework for mental health was under development, which would set out standards of care for individuals, their carers and their wider families. The findings of the evaluation of the Bamford Action Plan 2012 to 2015 would inform the prioritization of mental health service development.
23. **Ms. Jochelson** (United Kingdom) said that the delegation had taken note of the Committee’s emphasis on engaging with disabled people and their representative organizations in decision-making and policymaking, the need for strong data to demonstrate the impact of policies on disabled people, and the importance of increasing the involvement of disabled people in awareness-raising. She welcomed the fact that the Committee held the United Kingdom to a higher standard. She wished to thank civil society for its active engagement in the review process. The United Kingdom was determined to remain a global leader on disability issues.
24. **Ms. Fox** (Equality and Human Rights Commission) said that there was a striking disconnect between the delegation’s replies and the lived experiences of disabled people in the United Kingdom. For example, the delegation had claimed that legal aid ensured equal access to justice and that social security was sufficient, despite overwhelming evidence to the contrary. The delegation had focused on describing measures on paper, with little or no evidence of whether they were delivering disabled people’s rights in practice, and the devolved administrations had not provided responses to all relevant questions. The Equality and Human Rights Commission wished to see progress on the issues raised during the dialogue.
25. **Ms. Hutchinson** (Equality and Human Rights Commission) said that the United Kingdom Government and the devolved administrations must safeguard and strengthen disabled people’s rights by addressing the gaps and inconsistencies in the legal protections against disability-based discrimination and in the legal basis for sign language rights. In particular, they should implement the pending provisions of the Equality Act and address the lower level of protection for disabled people in Northern Ireland. They should also take steps to embed Convention rights in national law as the United Kingdom prepared to leave the European Union and ensure that the protections established in the Human Rights Act 1998 were maintained. A cohesive approach to the implementation of the Convention by the Office for Disability Issues and the devolved government focal points was needed, along with a coordinated action plan to implement the Committee’s recommendations. The issues she had raised must be addressed through formalized and fully resourced arrangements so as to ensure the meaningful involvement of disabled people.
26. **Mr. Langvad** (Country Rapporteur) said that the dialogue with the State party had without doubt been the most challenging such exercise in the Committee’s history. Despite the extensive replies given by the delegation, many questions remain unanswered. It was evident that the Committee had a very different perception from the State party of how human rights should be understood and implemented. The Committee was deeply concerned that the United Kingdom still considered itself a champion of human rights despite the inconsistency of its disability policies and its failure to meet its commitments under the Convention. The State party should adopt a concrete strategy, with sufficient funding and a clear timetable, to fully implement the Convention. The Committee was also deeply concerned about the lack of recognition of the article 6 inquiry findings of grave and severe violations of human rights, and expected the United Kingdom to take appropriate measures to address the resulting recommendations. The Committee was convinced that existing legislation was not sufficiently implemented and failed overall to secure the rights of persons with disabilities in the United Kingdom and its overseas territories. It expected the United Kingdom Government to take a more insistent and ambitious approach to implementation of the Convention by the devolved administrations. Given that the United Kingdom was considered an example to follow by many States parties, it had a special obligation to set high standards with regard to the realization of the rights of persons with disabilities.
27. **The Chair** thanked the delegation and said that she hoped the concluding observations would help the State party to implement a human rights model of disability.

*The meeting rose at 1.15 p.m.*