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|  | United Nations | CRPD/C/DNK/2-3 |
| _unlogo | **Convention on the Rightsof Persons with Disabilities** | Distr.: General23 July 2020Original: EnglishEnglish, Russian and Spanish only |

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

 Combined second and third periodic reports submitted by Denmark under article 35 of the Convention, due in 2019[[1]](#footnote-1)\*, [[2]](#footnote-2)\*\*

[Date received: 25 April 2020]

 Introduction

1. Pursuant to article 35 of the Convention on the Rights of Persons with Disabilities (Convention), the Government is pleased to present to the Committee on the Rights of Persons with Disabilities (Committee) Denmark’s combined second and third periodic report. The report is an update of Denmark’s initial periodic report (CRPD/C/DNK/1).

2. This report has been prepared in accordance with the Guidelines on periodic reporting to the Committee, including under the simplified reporting procedures and has been compiled by the Ministry of Social Affairs and the Interior. Relevant departments and ministries of the Government of Denmark as well as Greenland and the Faroe Islands have contributed to the report, which covers the period since the last dialogue with the Committee in 2014.

3. The issues addressed are outlined in the List of issues prior to submission of the combined second and third periodic report of Denmark (LOI). Specific reports on Greenland and the Faroe Islands are set out in Part II and III respectively.

4. This report should be read in conjunction with Denmark’s Common Core Document (Core Document) as well as the initial periodic report of 24 August 2011.

5. Denmark ratified the Convention on 13 July 2009 and it entered into force on 23 August 2009. Following the ratification, Denmark accepted the Optional Protocol to the Convention on 23 September 2014.

 Replies to the list of issues prior to reporting (CRPD/C/DNK/QPR/2-3)

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

6. Regarding measures taken to ensure the incorporation of the Convention, reference is made to the Core Document paragraph 130–134. The Government notes that although the Convention is not incorporated into Danish law, it is a relevant source of law and can be and is invoked before and applied by courts and other national authorities. Reference is also made to paragraph 4 in the Sixth periodic report to the Committee on Economic, Social and Cultural Rights (E/C.12/DNK/6).

7. Courts and the authorities must and do, actively apply and consider the Convention carefully, and efforts are made to enhance awareness of the Convention. In this regard, reference is made to the Core Document paragraph 155, 195, 201 and 202.

8. The concluding observations by the Committee received in 2014 were translated and published on the official website of the then Ministry of Children, Equality, Integration and Social Affairs. Civil society has been included during the drafting of the present report through the Danish Institute for Human Rights (DIHR). Also by public hearing on the official website of the Ministry for Social Affairs and the Interior (www.sim.dk) in addition to separate public hearings in Greenland and the Faroe Islands.

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

9. Since 2017, the Building Regulations have required a plan for establishing level-free access for single-family housing instead of a requirement of level-free access.

10. Concerning measures to revise the Legal Incapacity and Guardianship Act, an amendment to the Act came into force on 1 January 2019 introducing the possibility of partial deprivation of a person’s legal capacity. Reference is made to the reply to articles 12 and 29.

11. Regarding the use of coercive treatment in somatic health care in persons lacking the capacity to consent and authorizing forced admission and treatment in psychiatric hospitals, reference is made to the reply to articles 10 and 14.

12. The reform of the disability pension and the flexi-job scheme was instituted in 2013. The reform covers, amongst other things, social pensions and legislation on the rights of persons with disabilities. The reform was evaluated in 2018 and consisted of 28 sub-evaluations covering the entirety of the reform complex. Changes and corrections to the reform will be implemented based on the evaluation and current work on a critical examination of the reform.

13. In addition, the Agency for Labour Market and Recruitment develops and implements projects in which the municipalities participate in order to meet challenges arising due to the reform and to improve the overall effort in supporting people less likely to be part of the labour market.

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

14. The Government has not yet decided whether to revise the 2013 National Disability Action Plan or adopt a new action plan. Before deciding on targets and initiatives, the Government will first generate a solid and contemporary knowledge base for assessing the current priority areas.

15. In cooperation with relevant actors, the Government will carry out an evaluation of the present planning and organisation of the disability area. The evaluation aims to strengthen services and knowledge sharing and to secure the most beneficial division of responsibilities between regions and municipalities.

16. Furthermore, the Government and its three supportive parties have declared that they will work to secure quality and legal rights in relation to disability related services.

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

17. All public authorities in Denmark are responsible for considering disability issues when developing new regulation, policies and strategies within their respective fields. Regarding the principle of sector accountability applicable in Danish disability legislation, reference is made to the initial periodic report, paragraph 10–12.

18. When preparing new regulation ministries and agencies are obligated to publicize all draft bills and administrative orders on the digital platform, the Consultation Portal (*Høringsportalen*). The portal was set up in 2005 to ensure greater transparency in the legislative process. Citizens, companies, organisations etc. are able to follow draft bills and administrative orders, including the call for consultation specifying the deadline and the list of institutions and people, who have received the consultation. The call for consultation must be sent to all relevant institutions, including organisations of persons with disabilities. Once the consultation period is over, written responses are published on the portal and forwarded to the Parliament.

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

19. In May 2018, Parliament adopted a bill on cross-sectoral prohibition of discrimination of persons with disabilities. The prohibition covers both direct and indirect discrimination in addition to harassment and reprisals. The Act on Prohibition of Discrimination of Persons with Disabilities entered into force on 1 July 2018, and prohibits both public and private service providers outside the labour market to discriminate a person due to a disability. Persons with disabilities can file a complaint with the Board on Equal Treatment (*Ligebehandlingsnævnet*), which can then award compensation if it finds that discrimination, harassment or retaliation was experienced.

20. In the annual Agreement on Municipal Finances for 2020, the Government and the Local Government Denmark (*Kommunernes Landsforening*) agreed to provide reasonable accommodation in day cares and public primary schools (*Folkeskolen*). As a result, the Government will present a bill to the Parliament in April 2020, by which an obligation for the municipalities to provide reasonable accommodation in all day cares and public primary schools will be included in the Act on Prohibition of Discrimination of Persons with Disabilities.

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

21. The current legislation regulating insurance companies ensure that discrimination based on disability is not permitted, as stated in the Executive Order on Good Business Practice. However, the legislation stipulates that the insurance companies must identify and manage insurance risk when offering insurance products. The price of an insurance product could therefore depend on an individual assessment of the insurance risk of the policyholder. Furthermore, insurance companies are not obligated to offer specific products to potential customers.

22. Insurance companies must always appoint a person responsible for complaints and have internal procedures to provide information on how and where the (potential) customer can file the complaint. The rules on best practice state that insurance companies must act fairly and loyally towards customers and any refusal must be substantiated and explained.

23. In 2021, the Danish FSA will investigate whether or not discrimination based on disability in the insurance market exists and look into possible solutions if discrimination based on disability is observed.

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

24. Regarding the mandate of the Board on Equal Treatment and available remedies and redress, reference is made to the reply to LOI paragraph 3(a) and the Core Document paragraph 156.

25. The Board of Equal Treatment regularly publishes information on the number of complaints received, the content of the complaints and the outcome. It is possible to submit complaints on discrimination on more than one ground, for example disability combined with gender or ethnicity. Reference is made to figure 1 and table 1 in Annex 1.

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

26. Regarding progress in efforts to ensure that disability perspectives are included in legislation and policies, reference is made to the reply to LOI paragraph 2(d).

27. In accordance with the Act on Gender Equality, all public authorities shall seek to promote and incorporate gender equality in all planning and administration within their respective areas of responsibility. Moreover, all new legislation is screened for gender implications to avoid direct or indirect gender discrimination.

28. There are no organisations of persons with disabilities in Denmark exclusively representing women and girls with disabilities. Instead, the organisations represent all persons with disabilities whereby women and girls with disabilities are heard and given due consideration in public decision-making.

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

29. Disability policy in Denmark rests on a principle of compensation, which covers all sectors and applies to all persons with disabilities regardless of gender. The principle requires society to offer persons with disabilities a number of services and measures to limit or offset the consequences of their disability. Whether a person is eligible to receive such services and measures is based on the individual’s impairment, not gender, ensuring equal access. Reference is made to the initial periodic report, paragraph 29–31.

30. Discrimination based on gender is prohibited in the labour market by the Act on Equal Treatment of Men and Women in relation to Employment and outside the labour market by the Act on Gender Equality. Victims of discrimination, including harassment and sexual harassment, may raise the issue with the Board of Equal Treatment and may be granted compensation. Reference is made to the Core Document paragraphs 156, 219, 221 and 222.

31. Reference is made to the concluding observations, paragraph 20–21 by the Committee received in 2014. Since 2015, the Mental Health Act and the ensured procedural safeguards such as registration of every use of coercive measures, obligation to offer the patient a conversation about the coercion and a right for the patient to talk a patient adviser also cover patients between 15–17 years, who do not consent to admission or treatment. This practice was adopted to clarify the legal position of minor psychiatric patients and will be evaluated in 2019 or early 2020.

32. The Mental Health Act does not apply to minors under the age of 15, if the parent has given parental consent to admission or treatment. However, according to Section 20 in the Health Act all minor patients including psychiatric patients under the age of 15 must be informed of and involved in the treatment to the extent that the minor understands the situation. The information given to a patient including minors, must be given with the patient’s individual condition, age and maturity in mind, cf. Section 16(3) of the Act. The Act also contains an obligation to report interventions performed on children under the age of 15 to the National Board of Health, regardless of whether the intervention is made with parental consent or not.

33. The custodial parent must be informed of the opportunity to withdraw a consent to use coercion against the minor. If the parent does not wish to make a decision or does not consent, the Act will apply. However, only if the following conditions for use of individual coercive measures are met:

• The use of physical restraints or fixation must only be used short term and only to the extend necessary to prevent harm against the patient or others, to prevent the patient from following or harassing other patients, or if the patient vandalizes property in a significant degree, cf. The Mental Health Act, Section 14 (2).

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

34. It is a general principle that in planning and executing all actions concerning children with disabilities, including those with multiple disabilities, the best interests of the child shall be of a primary consideration and actions taken must reflect the individual needs of the child and their family. The principle covers all relevant actions in all settings, including when defining the legal framework, decision-making processes, implementation of policies and programmes and the provision of services, care, support and protection in all settings.

35. Since 2014, several political initiatives have focused on strengthening the rights of children and young people, including those with disabilities.

36. The special Office for Children within the institution of the Parliamentary Ombudsman received an additional annual grant in 2016, due to a rise in the number of complaints from children and young people since the establishment of the office in 2012. Reference is made to the Core Document, paragraph 154.

37. In 2018, a collaboration was established between the National Board of Social Services (NBSS) and the children’s organisation (*Børns Vilkår*), concerning individual counselling programs for municipalities in order to strengthen the involvement of all children in their own cases and ensure their right to be heard. The project ends in 2021.

38. Early Childhood Education and Care facilities must promote well-being, development, learning and bilding, etc., for all children. Section 4(2) in the Day Care Actensures measures for children that need extra support in order to thrive and learn in a general ECEC setting, whilst children with extensive and permanent physical or intellectual disabilities have the right to extra support as guaranteed in the Consolidation Act on Social Services.

39. In 2018, the pedagogical curriculum was revised. Therefore, every ECEC setting must declare how they fulfil a number of purposes, including a specific requirement for considerations of children that are vulnerable, disadvantaged or have disabilities. The ECEC staff need to work consciously to engage and include all children, taking into account their specific needs.

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

40. As part of the asylum process, the Danish Immigration Service (DIS) registers different data such as age, nationality and the sex of individual asylum seekers. The data is registered in the immigration database as metadata and can be used for statistical purposes. It is not possible to provide specific data on asylum-seeking children with disabilities, as DIS does not maintain structured data on disabilities as metadata.

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

41. The right for every child with disabilities to support based on individual circumstances includes the right to grow up in an environment fitting the needs of the individual child. The child’s needs for and right to a family as well as for professional support must be considered when assessing what is the best solution. Therefore, the Consolidation Act on Social Services aims to promote and develop home and community-based support services to ensure families the opportunity to care for their children. Moreover, it aims to ensure that foster care or institutions providing a family environment and community-based setting for children with disabilities are safe, supported alternatives when families are unable or unwilling to provide appropriate care.

42. Since 2011, Denmark has been working continuously and successfully at increasing the share of placements in foster care. From 2010 to 2017, the share of children placed in foster care rather than institutional care has increased from 51 percent to 65 percent.

43. In the summer of 2019, Denmark implemented a comprehensive foster family reform. The aim is to ensure that foster families are able to match increasingly varied needs of children placed in their care and for the children to experience family-type care of the highest quality.

44. If a child is in need of specialised treatment, e.g. psychological treatment, this treatment must be provided parallel to a placement in foster care, e.g. with a psychologist or at a specialized institution.

45. Some municipalities participate in an initiative, which aims to strengthen the support and treatment for children with special needs placed in foster families by providing support that is more intensive and supervision to the foster families by highly qualified staff in specialised institutions.

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

46. To ensure that a child is heard in regards to social services, the Consolidation Act on Social Services, Section 46 (3) states:

 “The support shall be based on the child’s or young person’s own resources, and the views of the child or young person shall always be given due weight in accordance with age and maturity. The difficulties of the child or young person shall, wherever possible, be resolved in cooperation with and with the assistance of the child’s or young person’s family. Where this is not possible, the background, purpose and content of the specific measure shall be clarified to the custodial parent as well as to the child or young person”

47. Furthermore, all children have the right to be assisted by a third party during the municipality’s consideration of a case as described in Section 48 a (1).

48. The children’s organisation (*Børns Vilkår*) can offer a professional third party representative to children who need help in meeting with social authorities and meetings in relation to their parents’ divorce.

49. Regarding the toll free telephone helpline (*Børnetelefonen*), reference is made to the Core Document, paragraph 193. Children can also receive counselling via letter correspondence or online chat. Additional funds were allocated to the helpline in 2018.

50. There are no organisations of persons with disabilities in Denmark exclusively representing children with disabilities. Instead, the organisations represent all persons with disabilities whereby children with disabilities are heard and given due consideration in public decision-making. Likewise, children’s organisations represent all children. Reference is made to the reply to LOI paragraph 2(d).

 Reply to paragraph 6 (a) of the list of issues

51. The Disability Council (*Det Centrale Handicapråd*) is responsible for providing information on overcoming any stereotypes, prejudice and harmful practices in relation to persons with disabilities, while also promoting awareness of their abilities of and contributions.

52. The Council published a strategy on awareness raising in 2016, it aims at changing attitudes by targeting awareness in five areas: children and young people, companies, NGOs, public authorities and persons with disabilities themselves. The strategy is based on a survey carried out in 2015 on attitudes towards persons with disabilities in the general population.

53. As a follow-up to the strategy, the Council carried out a campaign in 2019 to highlight potentials in friendships between children with and without disabilities. The campaign targeted young children in second to fourth grade and contained three small films in addition to material to facilitate discussions in schools and homes. An evaluation of the campaign shows that both teachers and students found the material useful and the students gained greater knowledge and became more attentive to the needs and abilities of persons with disabilities. The Council intends to carry out a new campaign targeting older students in 2020.

 Reply to paragraph 6 (b) of the list of issues

54. On 3 December 2019, the Minister of Social Affairs and the Interior established a new ministerial award to celebrate the International Day of Persons with Disabilities. The 2019 award was given to two youth organizations for their effort to support inclusion of young persons with disabilities in Uganda.

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

55. Local municipalities prepare municipal plans and local plans for development projects. Municipal plans summarises and concretises the overall political objectives for the development of a municipality, while local plans establish rules for a delimited area regarding development and use of land.

56. The Planning Act contains a set of themes, which can included in a local plan. According to Section 15(2) no. 10 in the Act, local municipalities can set up rules on e.g. the design and use of outdoor areas in a local plan. This means they can set up a rule that an area, which serves as a path or as a point of access, should have a specific terrain slope or require a level free access to a building or an urban space. They can also set up rules regarding the type of building material for the pavement used e.g. a solid pavement.

57. Local plans solely regulate the future conditions and do not require the property owner to act.

58. The Planning Act allows the local municipalities to comply with the Convention in regards to accessibility. It is the local municipalities’ responsibility to ensure, the rules in a local plan meet the accessibility requirements in the Building Regulations. The local authorities oversees the implementation of the local plan when giving the necessary permits.

59. As building authorities, the municipalities assesses and decides if the requirements of the Building Regulations are met.

60. The regional traffic companies, owned by the regions and the municipalities, are responsible for public bus transport. Denmark is obligated to follow regulation 181/2011 of the European Parliament and of the Council of 16 February 2011 concerning the rights of passengers in bus and coach transport.

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

61. In 2018 and 2019, the Ministry of Health has given public subsidies to build and establish medical centres and health care centres (*Sundhedshuse*) in different areas of Denmark. Part of the criteria for the pool was accessibility for persons with disabilities and the elderly.

62. The Road Directorate (RD) has developed standards and guidelines to contribute and to ensure accessibility in urban open areas and roads. The standards describe how to integrate accessibility in new projects and how to monitor the accessibility in existing urban roads and rural areas, including rest areas along the motorways. To ensure wide knowledge and promotion, the RD offers a three-day education to become “Accessibility Auditor of Road, Urban and Rural areas” annually. To date more than 150 “Road Accessibility Auditors” have been educated since 2003.

63. Persons with disabilities may book assistance up to 12 hours in advance for boarding and exiting trains. Furthermore, it is possible to bring along an attendant to assist on the journey at a special tariff. According to the Act on Traffic Companies, persons with walking impairment, blindness or visual impairment are entitled to an individual disability service, which is a taxi service where rates are not allowed to be significantly higher than rates for other traffic services.

64. As required by European Union Commission Regulation 1300/2014 of 18 November 2014 on the technical specifications for interoperability relating to accessibility of the Union’s rail system for persons with disabilities and persons with reduced mobility, Denmark has adopted a national implementation plan to progressively eliminate all identified barriers to accessibility in the rail system. The implementation plan covers 225 long-distance and regional train stations on the state owned rail network, which not only accounts for the majority of the stations but also the largest stations. Currently, 199 out of 399 platforms do not meet the required standard height of 55 cm. There is no fixed timeline for complete compliance, but the platforms are continuously improved as part of renewal projects.

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

65. Several sections in the Public Procurement Act allow or obligate the contracting authority to consider social aspects in public procurement agreements. E.g., section 40(3) in the Act stipulates that:

 “For all purchases intended for use by natural persons, the technical specifications shall be stipulated in view of disabled access or design for all users, save for exceptional cases duly justified.”

66. The requirement applies to all types of purchases, regardless the user. However, the above-stated requirement does not apply if the contracting authority can duly justify an exception e.g., if the contracting authority during a purchase of goods, simultaneously intends to make a separate purchase for users with disabilities.

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

67. Municipalities are responsible for public primary education institutions and can allocate resources to improve accessibility. The Government grants specified funds for building maintenance and reconstruction of all other educational institutions, including private institutions. The institutions themselves assess when and how to use the funds for building improvements and maintenance. However, accessible educational institutions exists at all levels, although the closest educational institution may not be accessible, i.e. an individual may be required to attend another educational institution further away from his or her home.

68. Universities primarily finance education and research with public funding allocated in the annual Finance and Appropriations Act. The universities’ research budgets mainly consists of basic research grants allocated by the Government, which the universities can distribute across different research areas. As an additional source of funding, the universities can apply for public and private grants for specific research programmes and projects through open calls. Public research councils, foundations and the EU usually host these.

69. In 2017, the Ministry of Higher Education and Science published RESEARCH2025-catalogue with suggestions for areas of research to pursue in the future. One of the research themes focuses on the development of technical and assistive devices, which can ease the mobility and accessibility for persons with disabilities.

70. General legislation allows people to walk on paths and roads in nature areas, but not to drive vehicles. Persons with disabilities are exempted, as the use of disability scooters and the like are permitted. This is also the case on beaches and in uncultivated areas.

71. The Transport, Construction and Housing Authority has in cooperation with the Building Research Institute developed a website with guidelines for accessibility and universal design, promoting education and information on the accessibility requirements of the Building Regulations. Annual funding of DKK 3.5 mill. is allocated to accessibility research and counselling at the institute.

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

72. The Act on Web Accessibility implements the EU Web Accessibility Directive, requiring public sector bodies to ensure that their websites and mobile apps are accessible to persons with disabilities. Public sector bodies’ websites and mobile apps are considered in compliance with the web accessibility requirements if they meet the harmonised European standard EN 301549 V2. 1.2 (2018-08).

73. This means that people with impairments e.g. vision, hearing, motor co-ordination, memory, colour blindness, dyslexia etc., can access public services through digital channels and therefore participate fully and equally in society.

74. Public sector bodies must publish an accessibility statement. The Agency for Digitisation has developed a digital solution that is mandatory for all public sector bodies to use to submit accessibility statements declaring the level of web accessibility on their websites and mobile apps. The agency monitors this and reports to the European Commission. When citizens experience an inaccessible website or mobile app, they may file a complaint with the Agency of Digitalisation. As the supervising authority, the agency may as a result issue a public order to the responsible public sector body to make content accessible. According to the Act on Accessibility, the agency has no authority to issue further sanctions.

75. Implementation of the Act is also supported by new guidelines and requirements that public self-service solutions must meet when new solutions for citizens and businesses are developed or further developed. These guidelines and requirements have been in effect since 15 August 2019.

 Reply to paragraph 8 of the list of issues

76. Section 107 and 108 in the Consolidation Act on Social Services regulate residential facilities for adults who, due to a substantial physical or mental impairment, need extensive assistance for simple everyday functions or care, attention or treatment. An administrative order issued based on the Act ensures that the residents are not charged more for their stay than what leaves them with reasonable financial means for other expenses. Residents cannot be charged more than 20 percent of their income and may be charged less depending on their financial situation. Persons residing temporarily in residential facilities will normally not be charged for their stay.

77. The right to consent to all medical treatment is protected under Section 15 of the Health Act and covers an informed consent. Only a patient who has the capacity to make decisions can give an informed consent. This entails both the ability to understand the information provided and to make a decision based on a rational processing of the given information. Therefore, there are no rules solely regarding persons with physical disabilities.

78. For a patient, who does not have the capacity to make decisions regarding treatment, including some patients with psychosocial disabilities, the patient’s guardian or closest relatives etc. can consent to treatment on the patient’s behalf. However, the patient must be involved in the decision making to the extent possible given the patient’s condition. If the guardian or relatives manage the capacity to consent in a way that obviously harms the patient, health care professionals can still treat the patient, if the Patient Safety Authority recommends the intended treatment. However, if the patient physically or verbally refuses to receive treatment (to which a guardian or relative has consented to), the treatment must be halted.

79. With the introduction of Act on the Use of Coercive treatment in Somatic Health Care in persons lacking the Capacity to Consent (2018), doctors or dentists can treat a patient who is permanently incapacitated under duress, if certain requirements are met. These requirements include that lack of treatment will cause significant impairment of the patient’s health and the treatment is necessary to prevent this. Treatment may not be performed before all possible means (including confidence-building measures) to achieve the patient’s voluntary participation have been tried without success. The use of coercion must also be proportionate to the necessity of the intervention. Reference is made to table 2 and 3 in Annex°1.

80. Section 3 in the Act requires that the patient is 15 years old or older and in a permanently incapable state, e.g. patients suffering from dementia, a psychosocial disability or brain damage.

81. Finally, the patient’s guardians, nearest relatives etc. must consent to the medical treatment and to the fact that it is coercive medical treatment.

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

82. Guidelines from the Danish Transport, Construction and Housing Authority containing a requirement for warning systems to be adapted to the use of buildings were published in 2019. This includes the usage of non-acoustic warning systems when suitable, including in areas normally occupied by deaf or hard of hearing.

83. Emergency management personnel must be able to handle citizens unable to help themselves – whether it be due to physical injury, unconsciousness or extreme panic brought about by the emergency situation or a pre-existing disability. The Danish Emergency Management Authority (DEMA) has not yet identified a need for specific education targeting emergency management regarding persons with disabilities.

84. The data continuously collected on emergency situations in Denmark and analysed by DEMA does not contain specific data on persons with disabilities but the general data does not suggest that emergency services experience difficulties in serving persons with disabilities.

85. Authorities can alert citizens through multiple channels, including the press, official home pages and profiles on social media. A siren alert system can be combined with emergency messages on national TV and radio. Deaf or persons hard of hearing are alerted through text messages by mobile phones. DEMA has developed the application ‘Mobile alert’ (*Mobilvarsling*) for smartphones for emergencies or other health or safety related situations. It is compatible with a voice programme for iPhone, making it possible for vision-impaired persons to use.

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

86. The overall legal requirement for municipal emergency services, responsible for the emergency management at local level, is to provide sufficient protection to persons, property and the environment in emergencies, including all persons with or without disabilities. Furthermore, the municipalities are legally required to develop risk based dimensioning of their emergency services adapted specifically to the situation in each municipality.

87. Furthermore, all municipalities are legally required to establish a disability council, and to consult the council in all matters that affect citizens with disabilities.

88. By endorsing the ‘Charter for inclusion of persons with handicap in humanitarian action’ in 2017, Denmark committed itself to working for the further involvement of persons with disabilities and their representatives in the design, implementation and evaluation of humanitarian crises. Furthermore, Denmark supports various initiatives aimed at improving interventions for persons with disabilities in humanitarian crises. Denmark further provides financial support for the work of Disabled Peoples’ Organisations Denmark (DPOD), the umbrella organization for 34 disability organisations, as well as their member organisations through a pooled fund managed by DPOD.

 Reply to paragraph 10 (a) of the list of issues

89. For a general description of rules on legal incapacity, reference is made to the initial periodic report paragraph 131.

90. On 1 January 2019, an amendment to the Act on Legal Incapacity and Guardianship came into force introducing the possibility of partial deprivation of a person’s legal capacity. This means that the legal incapacity is limited to certain assets or affairs. This makes it possible to tailor individual arrangements and give the person in question exactly the protection needed.

91. Regarding the right to vote and to stand for elections, reference is made to the reply to article 29.

92. The conditions for partial deprivation of legal capacity are the same as for full deprivation. However, full deprivation of legal capacity can only be instituted when partial deprivation is not sufficient to protect the person concerned.

 Reply to paragraph 10 (b) of the list of issues

93. In addition to regular guardianship, which is described in the initial periodic report paragraphs 130–131, and guardianship with deprivation of legal capacity, the Act on Legal Incapacity and Guardianship contains the possibility of issuing a joint guardianship. Joint guardianship can be issued to a person, who because of inexperience, impaired health or other similar conditions, needs help managing his fortune or taking care of his economic affairs. It is a condition that the person concerned gives his consent.

94. Joint guardianships can be limited to certain assets or affairs. The guardian and the person concerned act jointly in affairs covered by the guardianship.

95. If the guardian finds it proper, that the person under guardianship takes care of his own needs, the guardian can hand over money to him, to be used for this purpose. Furthermore, the guardian generally has to ask the person under guardianship before making any decisions in affairs that are more important.

 Reply to paragraph 10 (c) of the list of issues

96. The Agency of Family Law (AFL) decides whether a person should be placed under guardianship. The AFL is in possession of valid data from 2015 onwards. It is not possible to report on the exact number of people under guardianship at any given moment, as guardianships are not registered. However, during the period from 2015 to the first half of 2019, the AFL issued 11,484 new guardianships. This figure relates to guardianships issued under both Section 5 and Section 7 and special guardianships pursuant to chapter 8 of the Act on Legal Incapacity and Guardianship. The extent of the guardianships varies by subject and time.

97. The AFL is not in possession of information on the number of persons with disabilities that have regained legal capacity. Information on this requires an extensive manual review.

98. In this regard, it has to be mentioned that the fact that a person is under guardianship does not necessarily mean that the person is deprived of his legal capacity. Thus, when it comes to a regular guardianship and a joint guardianship the one under guardianship keeps his legal capacity. A person is only considered legal incompetent if the person in question is deprived of the full legal capacity.

 Reply to paragraph 11 (a) of the list of issues

99. The Court Administration (CA) has a continuous focus on the general physical accessibility to the courtrooms. All courthouses meet the basic requirements set out in the Building Regulations at the time of the building’s construction, including the elements that specifically relate to accessibility for persons with disabilities. The CA is also working with organisations to collect information on accessibility and offers for persons with disabilities to give an overview of the relevant information on accessibility conditions for their specific disabilities. The CA continuously reflect on how to accommodate persons with disabilities by improving the physical accessibility at the courts.

100. The court process in civil cases was digitized in 2017. Lawsuits must be filed through a self-service portal (*minretssag.dk*). However, the court can decide to exempt the use of the portal, e.g. due to a party’s lack of digital competences or disability.

 Reply to paragraph 11 (b) of the list of issues

101. Regarding legal aid, reference is made to the Core Document paragraphs 160–163. All groups of citizens, including persons with disabilities, have equal access to legal aid.

102. Access to representation in court is regulated in the Administration of Justice Act. Accordingly, lawyers have, with some exceptions, an exclusive privilege of representing citizens in court. One exception is that certain family members and guardians can represent a person in court without being a lawyer.

103. The rules on representation in court are equal for all groups of citizens, including persons with disabilities. Reference is made to the initial periodic report of paragraphs 133–135.

 Reply to paragraph 11 (c) of the list of issues

104. Regarding awareness raising in the justice sector, reference is made to the initial periodic report paragraphs 136–137 and the replies to the Committees List of Issues (2014) paragraph 99.

105.Training of prison officers is aimed at enabling the prison officers to enter into interdisciplinary cooperation with other employees e.g. nurses and social workers to ensure awareness of inmates with special needs. Specialists such as nurses and social workers participate in the training of prison officers. Persons with disabilities or their representative organisations are not specifically involved in the planning or conducting of the training.

106. The Police Academy is highly focused on addressing basic human rights, including the rights of persons with disabilities, in the training of police officers. Reference is made to the initial periodic report, paragraph 136–137.

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

107. Regarding the right to consent to medical treatment, reference is made to the reply to LOI paragraph 8.

108. The Government monitors the psychiatric wards compliance with the Mental Health Act. Compliance is ensured through reports from a special subcommittee of the Parliament under Section 71 of the Constitution, the so-called “‘Section 71-committee” (*§ 71-tilsynet*) that supervises the use of administrative force. The committee visits psychiatric wards and publishes the committee’s assessment of the wards including the use of force. The committee cannot make decisions regarding the psychiatric wards but can criticise conditions and make recommendations. The Government will respond to the committee´s opinion and evaluate the need for legislative change.

109. A special division under the Danish Parliamentary Ombudsman monitors the psychiatric wards and the conditions for patients under involuntary admittance. The Ombudsman notifies the Government of his conclusions and general observations.

110. The Psychiatric Patient’s Board of Complaints (PPBC) is responsible for administrative decisions concerning complaints from psychiatric patients. The board’s decisions can be appealed to The Psychiatric Board of Appeals.

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

111. Regarding consent to medical treatment for minors, reference is made to the reply to article 7.

112. The Government receives and evaluates concerns from both organizations, citizens and patients and amends the laws and regulations when needed. E.g., the Government introduced a description of the purpose of the Mental Health Act in Section 2, in 2015. The amendment was partly based on recommendations from the DIHR. The Act was last amended in 2019.

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

113. All general provisions in the Criminal Code and the Administration of Justice Act apply equally to everyone, including persons with disabilities. This entails the procedural guarantees in criminal proceedings such as the presumption of innocence and the right to defence and a fair trial.

114. If the offender, at the time of committing the act, was of unsound mind due to a mental disorder or a comparable condition, or had an intellectual disability, Section 68 and 69 of the Criminal Code allows for other reactive measures for the criminal act. Such measures include e.g. psychiatric treatment, rehabilitation supervision etc., as opposed to a sentence of a fine or imprisonment. Sentences under Sections 68 or 69 are not intended to punish the offender, but to prevent further offences by ensuring that the person receives proper treatment.

115. According to Section 72 of the Criminal Code, the Prosecution Service (PS) must ensure that measures under Section 68 and 69 are not upheld for longer or to a greater extent than necessary. One of several criteria used by the PS for this purpose is to compare it to the length of the sentence a person not of unsound mind would have received for the same crime. As part of this monitoring, the PS must obtain a statement once a year from the relevant department or supervisory institution concerning the need to uphold the measure. The decision to amend or repeal a measure as mentioned above, is made by court order following a request by the convicted person, a guardian *ad litem*, the PS, the institution or the Prison and Probation Service. A request must be made to the PS, which must bring it before the court as soon as possible.

116. The Government notes that a sentence to treatment under Section 68 and 69 does not necessarily mean that the sentenced person must be committed to a treatment facility, as the measure may also take the form of treatment on an outpatient basis.

117. Any special needs in regards to a criminal proceeding are managed in pursuance of Section 149 (5) of the Administration of Justice Act, including assistance from an interpreter etc. According to Section 193 of the Act, the Police or the PS shall notify the Court if special consideration is required in connection to a witness’ statement in a criminal case.

118. If it is proposed to sentence an accused according to Sections 68–70, the Court may appoint a guardian *ad litem* for him or her. Preferably, a next of kin, who is to assist the accused during proceedings alongside a counsel assigned for the defence, cf. Section 71 (1) of the Criminal Code.

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

119. The Mental Health Act covers persons who due to a mental disorder or a comparable condition at the time of committing a crime, have been sentenced to treatment at a psychiatric ward.

120. Patients sentenced to treatment have the same legal rights under the Act as other patients. An exemption is that patients sentenced to treatment cannot complain about an involuntary admission to the PPBC, as the decision of involuntary admission has been made by the court. The patient can complain to the board about coercive measures at the psychiatric ward.

121. The Health Data Authority (HDA) does not have data on patients with disabilities sentenced to treatment at psychiatric wards, as the Act does not distinguish between patients with or without physical or psychosocial disabilities.

122. Regarding data on the average number of persons admitted to a psychiatric ward disaggregated by sex, age and nationality, reference is made to paragraph 143 in the Eight periodic report to the Committee against Torture (CAT/CDNK//8).

123. In addition, the PPBC publishes statistical data regarding the board’s decisions once a year.

124. The Director of Public Prosecutions collects judicial data on various criminal matters. The data collected is disaggregated according to provisions in the Criminal Code. The data in the current data model is not disaggregated by the sex, age or physical or mental condition of the offender.

 Reply to paragraph 13 of the list of issues

125. The Government has not taken measures to oppose the adoption of the Additional Protocol. The Council of Europe’s Committee on Bioethics has been working on the Additional Protocol since 2013. The Additional Protocol is still a draft version and the Committee does not consider it incompatible or in conflict with the Convention.

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

126. The rules describing involuntary admission and coercive measures at mental health facilities can be found in the Mental Health Act. The Act does not distinguish between patients with or without physical or psychosocial disabilities. Treatment at a mental health facility will always take into consideration the mental state and condition of a patient.

127. According to Section 5 in the Act, involuntary admission and coercive measures, such as the use of fixation or coerced medication can only be used at a psychiatric ward if the patient is insane or suffers from a similar condition. Involuntary admission to a psychiatric ward also requires that the patient will otherwise not be cured, that the mental health of the patient will otherwise not significantly improve, or that the patient will impose a threat to himself or others.

128. The Government has a strong focus on reducing coercion in psychiatric wards for both adult patients and minors. The main principles concerning all health treatment are self-determination and informed consent.

129. To reduce the use of coercion the Health Authority (HA) has biannual meetings with the local psychiatric directors on progress made to reduce coercion. The HA has in 2019 published new recommendations concerning new intensive inpatient facilities and from 2019, DKK 100 mill. annually has been allocated towards new intensive treatments for psychiatric patients, both minors and adults.

130. The use of coercion, including on minors under the age of 15 where the parents have given consent for the use of coercion, is monitored by the HDA. The HDA publishes a report on the issue twice a year. The report with data from 2018 shows a reduction in the use of physical restraint with belts from 7.0 percent of the psychiatric patients admitted in 2014 to 5.1 percent in 2018. The latest report[[3]](#footnote-3) also shows an increase in the total number of patients submitted to coercion. This indicates that although there has been a reduction in the use of restraints with belts, other forms of coercion, such as forced medication or fixation, have increased. The reduction in the use of coercion is a high priority of the Government and is monitored closely, cf. paragraph 14 (c), 133.

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

131. Data on patients with disabilities admitted to a psychiatric ward is unavailable, as the Mental Health Act does not distinguish between patients with or without physical or psychosocial disabilities. For data on the average number of persons admitted to psychiatric wards disaggregated by sex, age and nationality, reference is made to paragraph 143 (CAT/C/DNK//8).

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

132. The Mental Health Act contains a number of basic principles and legal rights for psychiatric patients. The Act stipulates that coercion is prohibited unless every possible step has been taken to persuade the patient to accept treatment. The use of coercion must be proportionate to the pursued goal. Whenever possible, the smallest steps should be taken. Every case of deprivation of liberty and use of other restraints must be noted in a special protocol at the psychiatric ward, and this information is reported to the regions as well as to central governmental institutions, amongst other the HDA[[4]](#footnote-4).

133. In recent years, the Government has introduced a number of different amendments to the Act. Changes made in 2015, emphasizes that fixation must only be used short term and to the extent necessary to prevent the patient from harming him or herself or others, harassing others or if the patient causes vandalism to property in a significant degree. With an amendment to the Act in 2019, the use of coerced medication outside the psychiatric ward is now prohibited.

134. The regions are responsible for providing training to medical and non-medical staff on non-violent and non-coercive methods of treatment. Specific supplementary state funding has been provided to ensure regional implementation of non-violent and non-coercive methods, e.g. safewards, de-escalation methods etc.

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

135. In July 2015, a new bill changed the municipality’s obligations as stated in Section 109 in the Consolidation Act on Social Services. As of July 2015, the municipalities offer introductory and coordinated support and counselling to all women residing in accommodation facilities, including women with disabilities.

136. In 2017, a pool was allocated to establish a national unit for combating violence in family or cohabitation relationships. The unit was established as the organisation “Live without violence” (*Lev uden vold*) and runs a national hotline, offering legal advice to people exposed to violence. The organisation also offers an overview of vacant accommodation facilities for women and men.

137. An additional pool was allocated in 2017, to an “action plan for the prevention of violence in accommodation facilities”. The action plan contains multiple initiatives targeting both general violence prevention and specialized efforts.

138. In 2019, the Government launched the “National strategy for combating violence in close relations”. It contains e.g. outpatient counselling to men and women exposed to violence and who are committing violence.

139. In 2017, two publications – one by the Centre for Social Science Research (*VIVE*), the other by the then Ministry for Children and Social Affairs – documented that children and young persons with disabilities are more exposed to violence and sexual abuse than others.

140. The same year two initiatives were initiated to strengthen the pre-emptive efforts to identify risks and protect children and young persons against abuse. The NBSS published a handbook for professionals working with children and young persons with disabilities, containing tools to prevent, notice and handle violent and sexual abuse. With the support of a large majority in Parliament, the Government allocated funding to a pool where NGO’s could apply for financial support for initiatives aimed at strengthening the abilities of children and young persons with disabilities in protecting their personal integrity and handling conflicts.

141. In 2013, the Government implemented a larger initiative to strengthen the protection of children from all forms of abuse, known as the ‘Abuse Package’. One of the legislative initiatives was the creation of ‘children’s houses’ (*Børnehus*). Reference is made to paragraph 64–65 and 201 of the Fifth periodic report to the Committee on the Rights of the Child submitted on 1 March 2016 (CRC/C/DNK/5).

142. The NBSS publishes statistics on the use of the children’s houses. The latest annual statistics on children’s homes in 2017 show, the number of cases, information on the children in care and information on the cross-sectoral cooperation between authorities but it is not possible to disaggregate the statics in regards to children with disabilities. The purpose of the annual statistics is to receive knowledge on abuse of children and young people and to document the implementation of the Danish children’s house model.

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

143. All general provisions in the Criminal Code concerning *inter alia* rape apply equally to persons with disabilities.

144. If a person is unable to resist due to a disability, forcing that person to sexual intercourse constitutes rape under Section 216. Section 218 extends the protection to cases of exploitation of persons suffering from mental illness or persons with mental disabilities.

145. According to Section 218, any person who exploits the mental disorder or intellectual disability of another person to engage in sexual intercourse, such person is sentenced to imprisonment for a term not exceeding four years.

146. According to Section 81 (11), the courts must – when deciding on a penalty – in general consider it an aggravating circumstance if the defendant has taken advantage of the defenseless state of the victim. The provision aims to protect groups that are vulnerable to crimes, such as persons with disabilities.

147. The Government has launched a legislative initiative regarding a new legal definition of rape based on a non-consent requirement.

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

148. The National Police do not have any information supporting that the number of cases regarding violence and abuse against persons with disabilities is of a dimension that invokes an actual need for special monitoring of the area. In this context, the Government notes that it is not possible to extract statistical data from the police case management system (POLSAS) in terms of possible reports and charges regarding violence and sexual offences to the detriment of persons with physical or intellectual disability. Information on this requires an extensive manual review.

149. Regarding paragraph 40–41 in the Committees concluding observations received in 2014 the Government notes that the Courts of Denmark have a general focus on cases regarding violent assaults. The CA makes an annual assessment on the need for supplementary education and training of court personnel.

 Reply to paragraph 16 of the list of issues

150. The Minister for Social Affairs and the Interior has declared that she will look into, whether rethinking the framework of the municipal councils’ assessment, which constitutes the basis for decisions regarding support under the Consolidation Act on Social Services for e.g. persons with disabilities, is needed. This support includes the citizen-controlled personal assistance system.

151. A request for an abortion must be made by the woman herself according to Section 98 of the Health Act. If the woman due to mental illness, impaired mental development, severely weakened health or other reason is unable to understand the meaning of the abortion procedure, the local abortion council can under certain circumstances permit an abortion at the request of a specially appointed guardian. Reference is made to paragraph 1 in Annex 1.

152. Authorization for an abortion may only be granted if the grounds on which the application is based are sufficiently important to justify subjecting the woman to the increased risk to her health that the procedure entails.

153. According to Section 109, the request for sterilisation must be made by the person to whom the sterilisation is to be performed. If the person who has requested sterilisation is unable to understand the meaning of the procedure, due to mental illness, impaired mental development, severely weakened health or other reason , a special council may under certain circumstances permit the sterilisation at the request of a specially appointed guardian, cf. Section 110 of the Act. The special council consists of an employee of the region with legal or social educational background and two doctors. Sterilisation performed without consent is a violation of Section 109 in the Act and may be considered a violation of the Criminal Code’s provisions regarding violence and assault.

 Reply to paragraph 17 of the list of issues

154. Persons with refugee status and subsidiary protection can apply for family reunification when they have a residence permit in Denmark. Persons with temporary subsidiary protection, however, can only apply for family reunification 3 years after getting a residence permit, unless international obligations say otherwise. Temporary subsidiary protection status is granted to individuals based on a general risk of indiscriminate violence due to an external or internal armed conflict in their country of origin.

155. Additionally, a number of requirements must be met for obtaining family reunification. Several of the additional requirements can be suspended on special grounds, which is always the case if Denmark’s international obligations require a suspension.

156. People who are unable to fulfil one or more of the conditions due to a disability will not have to meet these requirements. They will only be exempt from meeting conditions they are unable to fulfil due to their disability. Other requirements unrelated to a person’s disability must be met.

157. The possibilities of persons with disabilities to attain a family life with a spouse, cohabitant and/or minor children, when one of the partners does not already reside in Denmark are protected on an equal basis as those of other citizens’. To this end, the conditions for family reunification in the Aliens Act will be disregarded if the condition together with the disability constitute a barrier preventing the person from enjoying his or her equal right to a family life. This is the case whether the person with a disability already resides in Denmark or is an applicant and whether the person is a child or an adult.

158. Beyond the traditional family unit, i.e. spouses and minor children, a residence permit with the aim of family reunification can be granted, if exceptional reasons make it appropriate, including the consideration for family unity. E.g. when a family member with a disability, who is over the age of 18 risks being left alone in the country of origin due to the rest of the family having been granted residence permits in Denmark, and the person in question has been dependent on the family’s care and support.

 Reply to paragraph 18 (a) of the list of issues

159. Regarding examples of social services contributing to independent living and inclusion for persons with disabilities, reference is made to the initial periodic report, paragraph 161–174.

160. In 2019, the Consolidation Act on Social Services and the Act on Social Housing etc., were amended, allowing young persons with disabilities in need of special care to receive housing offers corresponding to their individual needs. From January 2020, the municipalities will be able to allocate a certain amount of dwellings exclusively to young persons under 35, with disabilities and in need of special care, in an effort to establish a better housing composition, making it more attractive for young persons with disabilities to live in the housing offer.

161. Most persons with disabilities in Denmark live in ordinary housing. However, in cases of severe disabilities, the municipality is obliged to offer housing opportunities with special care and service to accommodate the persons’ needs, in accordance with the Act on Social Housing etc. As the main rule, all social housing offers intended for older persons and persons with disabilities can include this group. Since 1988, it has not been possible to establish nursing homes and “protected homes” because they are considered institutions.

162. According to the Ministry of Transport and Housing’s information and management system on commitments to build dwellings, the average number of commitments to less than 20 residences constituted 43 percent of all commitments from 2000 to September 2019, making up the majority of the committed housing projects. Less than 10 percent of the commitments were to 60 or more residences. The statistics include social housing for older persons and persons with special needs.

163. Persons with disabilities have the right to an appointed dwelling in accordance with the Act on Social Housing etc., and are free to choose where they want to live.

 Reply to paragraph 18 (b) of the list of issues

164. Section 129 a in the Consolidation Act on Social Services ensures that persons who, due to their permanent disability caused by a mental disorder, resists or cannot consent to moving can be moved to a facility better able to meet their needs. Thus, the following strict conditions applies:

 (a) The person poses significant danger or expresses particular threatening behavior towards other residents or staff;

 (b) It would be irresponsible due to the safety of other residents or staff not to move the person;

 (c) The circumstances in the individual case makes it necessary;

 (d) It can be justified that the new accommodation is better suited to meet the person’s needs for support.

165. The Government has no plans on changing the regulation.

 Reply to paragraph 18 (c) of the list of issues

166. According to Section 3 in the Consolidation Act on Legal Protection and Administration in Social Matters, municipalities must determine whether there is a right to individual support and if so which support, as quickly as possible. The municipalities must set public deadlines for processing the cases. If a deadline cannot be met in a specific case, the citizen must be notified in writing of when a decision can be expected.

 Reply to paragraph 18 (e) of the list of issues

167. Dissemination of the Committee´s general comment no. 5 has not been undertaken.

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

168. The Danish Sign Language Council (DSLC) was established with an amendment to the Language Council Law on 13 May 2014. The role of the DSLC is to devise principles and guidelines for the monitoring of Danish Sign Language and to offer advice and information on Danish Sign Language.

169. For a number of years, University College Copenhagen (UCC), which offers a bachelor’s degree in sign language interpretation, has managed the maintenance and development of the Danish Sign Language Dictionary. In the Reserve for Social, Health and Labour Market Measures for 2020–2023, the involved political parties agreed to allocate funds for the operation and maintenance of the dictionary. Furthermore, e.g. at Aarhus University Danish sign language is one focus area of research.

170. Education in sign language is offered to all pupils in public primary schools who have such extensive hearing loss that, regardless of the use of assistive devices and cochlear implants, they are cut off from or have great difficulty communicating through speech. The Ministry of Children and Education is currently developing new materials to support headmasters, teachers and pedagogues in primary education. Materials focusing specifically on the needs of pupils with disabilities, e.g. pupils with hearing impairments, will be published on the ministry’s learning platform www.emu.dk, which targets professionals and practitioners in the education sector.

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

171. The Danish Braille Board was established in 1972 to secure and develop Braille as written script for the blind. Today the board is a part of The Danish Association of the Blind. The institutions that produce Braille and conduct teachings with a special expertise in relation to children and adults with a visual impairment appoint the members of the board. The Danish Library and Expertise Centre for persons with print disabilities (NOTA), which is an institution under the Ministry of Culture, is represented on the board.

172. NOTA works to ensure that all citizens have equal opportunities to acquire knowledge and experiences. NOTA’s subscribers are dyslexic, visually or otherwise impaired and can order books or other information “on demand”, adjusted to their needs. NOTA’s growing collection of accessible digital books holds more than 50.000 audio books, e-books and Braille books. NOTA offers fiction and non-fiction, study books and school books. NOTA also provides a wide variety of Braille music scores. NOTA produces Braille books, e-books and audio books, magazines and newspapers and other information resources for external partners. NOTA co-operates with organisations in other countries in the development of IT-systems, e.g. a new system for Braille transfer. As an Expertise Centre for persons with print disabilities NOTA provides specialised knowledge on accessible text formats, including on production and needs of their subscribers, for libraries, educators, publisher, students and authorities, through ongoing research.

173. Funds for a special grant for blind and visually impaired was allocated in the 2019 Finance Act. The purpose of the grant is to support development of digital solutions for the blind, e.g. improving app accessibility, making local newspapers accessible and producing podcasts about visually impairment.

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

174. The NBSS disseminates knowledge on augmentative and alternative modes of communication through a website that targets amongst other things municipalities and staff employed to help and support persons with extensive physical and mental impairments.

 Reply to paragraph 20 of the list of issues

175. According to Section 40 of the Health Act, healthcare professionals are subject to confidentiality regarding information on patients’ health and other private matters. However, a healthcare professional can transfer such information to a third party if the patient has given an informed consent. Furthermore, a health care professional is allowed to transfer the information to a third party – without the patient’s informed consent – under strict conditions stated in the Act. E.g. if the transfer is necessary for the current treatment of the patient and the patient’s interests and needs are taken into consideration.

176. According to the Mental Health Act, the doctor is responsible for preparing a discharge plan for the patient to ensure that the patient receives the necessary support and treatment after leaving the psychiatric ward. The plan is prepared in cooperation with the patient unless the patient refuses or is incapable of giving consent. If the patient does not consent, the Act allows the psychiatric ward to share and receive patient information from other authorities and private practitioners, when it is necessary to prepare the discharge plan, cf. Section 13 c in the Mental Health Act. The Government does not have plans to amend the Act in this regard.

 Reply to paragraph 21 of the list of issues

177. It is a general focal point in the Consolidation Act on Social Services that any social support to children must be provided to ensure the best interest of the child. Furthermore, social support must be based on the child’s individual resources and adapted to the specific situation and needs of the child. This includes children with disabilities.

178. Social support provided by the municipalities must be provided through early intervention and an integrated approach to ensure that any problems encountered, are prevented and mitigated in the home or the immediate environment to the furthest extent possible. Based on a case-by-case assessment, the support must be adapted to the specific circumstances of the individual child or young person and the family.

179. The general guidelines for placement of children in care apply – regardless of the disability of the parent or child – if placement in care is necessary. The municipality shall choose the facility best suited to meet the needs of the child. Furthermore, priority shall be given to offer close and stable adult relations. This includes a duty to assess whether placement in a foster family is the most appropriate solution.

180. A child placed in care outside the home, has the right to maintain contact with his or her parents and siblings, grandparents etc. With due regard to the best interest of the child, the municipality shall facilitate the contact between the child and their parents.

181. In 2019, the national guidelines on social support for children, young people and families were revised. As part hereof, the focus in the guidelines on support for parents with disabilities during the decision making process, regarding special social measures necessary for the child, young person or the family has increased in order to ensure the best interest of the child.

182. In order to support parents of children with disabilities when their child turns 18, the Government will in 2020 draft and present two new sections to be incorporated in the Consolidation Act on Social Services. The first section will clarify that the municipalities have an obligation to instigate the transition from youth to adulthood when the child turns 16, in order to secure a smooth transition for both the child and the parents. The second section will make it possible for parents to get support for surveying a child during the night if the child is still staying with the parents in the young adult years after the child has turned 18. This will enable a more smooth transition for the child into early adulthood.

183. Cases concerning adoption without consent are handled by the Children and Young Persons Committee and subsequently by the NBSS. Decisions are made by the NBSS, which decides whether a child can be adopted without a consent from its parents. A decision made by the NBSS can be appealed to the judicial system.

184. Before an adoption without consent can be completed, an assessment must be made whether it will be in the best interest of the child. In addition, it must be found probable that the parents are permanently unable to take care of the child.

185. The fact that parents have disabilities and need help and support to carry out their role as parents is not in itself an indication that they are without parental ability. Parents with a disability must have their parental ability examined in connection with a case regarding adoption without consent; it must be ensured that they have received adequate assistance and support required due to their disability, especially in connection with a parental role.

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

186. Regarding cooperation with civil society, reference is made to the replies to paragraph 2(c) and 2(d).

187. The municipalities are in charge of the public primary schools. As a part of the annual Agreement on Municipal Finances for 2020, the municipal inclusion efforts will be evaluated.

188. In the 2017 agreement, it was agreed to establish inclusive learning environments with a focus on the individual pupil instead of the previous target of including minimum 96 percent of all pupils in mainstream public primary schools. As part of this, an initiative was launched to follow the well-being and progress of the individual pupil.

189. The Primary School Act was amended to clarify the public primary school’s responsibility to provide inclusive learning environments. It has been clarified that the headmaster is responsible for ensuring that the teaching staff, plan and organise teaching so that all pupils develop professionally and versatility, including socially, and thrive in the academic and social communities of the school.

190. The Ministry of Children and Education has initiated a study on educational outcomes and patterns for children and young people with disabilities. VIVE is conducting the survey on behalf of the ministry. The purpose of the study is to collect knowledge regarding:

• How do children and youth with disabilities fair compared to children and youth without disabilities regarding their education?

• What characterizes the teaching and training process, including what conditions hamper and promote educational outcomes for children and youth with disabilities?

191. The study will provide a base line in 2019 on children and youth with disabilities in education and develop a design for how the performance of children and youth with disabilities can be monitored in the future.

192. Regarding upper secondary education several initiatives have been taken, e.g. the option to have additional disability specific grants in vocational education and strengthened opportunities for high school students with autism.

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

193. In regards to the education of teachers for primary and lower secondary education (*folkeskolelærer*), special needs education is one of the four spheres of competences in the professional capabilities of teachers and is mandatory for all students. Special needs education covers planning, implementation and evaluation of a specialy organised form of teaching for pupils in complicated learning situations. All University Colleges offer specialization modules in specific specialist pedagogy themes. One University College offers a profile line in special pedagogy.

194. In relation to the in service training of teachers, the area of added inclusion is one area amongst several where the municipalities receive targeted funding from the Ministry of Children and Education.

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

195. Preparatory basic education and training (*FGU*) is targeted persons below the age of 25, who have completed lower secondary school but do not have the skills or grades to continue into upper secondary education. The purpose is to improve professionally, personally and socially with the aim to proceed into the labour market or upper secondary and vocational education and training. The duration is flexible but can be up to two years depending on the participant’s previous education and training needs, as it focuses on the individual student. The teaching consists of both practical and theoretical learning with a holistic approach aiming at giving the student motivation, meaning and ownership in relation to the learning process. There are three different educational tracks: General Basic Education, Basic Production Education and Basic Vocational Education. The education offers different types of support for students with disabilities including personal assistance, technological aids, sign language interpretation and writing interpretation.

196. To support students with disabilities’ access to higher education from 2019, all higher education institutions will be compensated economically from potential delays in studying time for certain groups of students, e.g. students who receive the additional educational grant for persons with disabilities (*SU-handicaptillæg*).

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

197. Regarding data on inclusive education, reference is made to table 4–13 in Annex 1.

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

198. Regarding research on the benefits of inclusive education reference is made to the reply to LOI paragraph 7(e). Furthermore, one of the research themes in the RESEARCH2025-catalogue focuses on research related to education of the future as well as ensuring that all talent and resources available come into play (p. 183).

199. Dissemination of the Committee´s general comment no. 4 has not been undertaken.

 Reply to paragraph 23 (a) of the list of issues

200. The healthcare system is based on equal access, including persons with disabilities. However, projects aiming to improve health among persons with disabilities through early discovery have been initiated. In 2014, the DHA initiated the fund “Promotion of Equality and Health in the healthcare system”. Based on the experiences from these projects the Government will engage in dialogue with relevant stakeholders on how targeted health examinations for people with physical and mental disabilities could be organised if such schemes were to be disseminated nationally. Furthermore, the Ministry of Health has initiated a new study on health and wellbeing among people with physical, mental and developmental disabilities.

201. All women between the age of 23 and 64 years are offered regular screening for cervical cancer. It is possible to contact the screening secretariat if a woman is prevented from completing a screening, e.g. due to a disability. The rate of participation in the cervical screening programme among specific groups, e.g. woman with disabilities is lower than the average. A report from the National Institute of Public Health (NIPH) from 2017 showed that 44 percent of women with cerebral palsy participated in the screening-program. The report states, that this may also be the case for women with other types of disability.

202. In May 2018, the DHA published a set of new recommendations on the cervical cancer-screening programme. One recommendation addresses the need for special attention towards initiatives aimed at low-participation groups, e.g. women with disabilities to ensure a higher degree of participation. Furthermore, the DHA concluded that there is a need for more research on barriers keeping the participation low for these groups of women.

203. Persons with disabilities enjoy the same rights as everyone else in terms of maternal health care.

 Reply to paragraph 23 (b) of the list of issues

204. High quality treatment and care for persons with mental health problems is essential for increasing life expectancy. Suicide is a contributing factor to the shorter life expectancy amongst persons with mental health problems. The organisation ‘Life line’ (*Livslinjen*) receives state funding for activities such as anonymous phone counselling and a chat function for persons battling suicidal thoughts, these are also available to their relatives.

205. In 2017, a new national partnership was formed to increase knowledge on how to prevent suicide among persons with mental health problems. The partnership connects relevant organisations to ensure better cooperation and knowledge exchange on mental health issues.

206. Other factors that affect life expectancy of persons with mental health problems are lifestyle diseases. DHA is currently working on a new instrument to make sure that relevant health professionals have the necessary qualifications to prevent lifestyle diseases amongst persons with mental health problems, e.g. smoking cessation adapted to the person’s specific needs.

 Reply to paragraph 23 (c) of the list of issues

207. Hearing aids are free of charge when provided by a public hearing clinic and may also be obtained from approved private providers with a subsidy of up to DKK 6,502 (USD 966) in 2020. Special subsidies exists for residents who cannot afford the expenses themselves. The municipalities can cover up to 85 percent of expenses for pensioners by means of the Health allowance (*Helbredstillæg*) depending on the individual’s financial situation and medical condition.

208. In 2019, the programme “Future hearing aid treatment” was established. The programme consists of several initiatives ensuring a short waiting time for hearing aid treatment in public clinics including initiatives to enhance information on treatment options. Moreover, DHA is developing a national quality standard for hearing treatment to ensure high quality in both private and public hearing clinics.

 Reply to paragraph 24 of the list of issues

209. Section 86 in the Consolidation Act on Social Services establishes that “the municipal council shall offer rehabilitation measures to remedy the impairment of physical function caused by a disease which is not treated in connection with hospitalization.”

210. The Health Act, Section 140 states, “the municipal council offers rehabilitation measures free of charge for persons with a medical need for rehabilitation after hospital discharge.” In addition, Section 84 in the Act establishes that the Regional Councils – in order to ensure proper standards and quality of care – must provide rehabilitation plans to patients after hospital discharge. Furthermore, Section 140 has recently (2018) – specifically in order to improve access – been expanded to include free choice of rehabilitation at private institutions if the municipality cannot provide rehabilitation within a week after hospital discharge.

 Reply to paragraph 25 (a) of the list of issues

211. In the fall of 2018, the Government proposed an initiative to improve and enhance the employment of persons with disabilities in Denmark. The initiative consists of 11 separate initiatives carried out in the period 2019–2022. A total of DKK 128 mill. was allocated. As part of the initiative, the Government has set a goal to increase the number of persons with disabilities in employment with 13.000 by 2025. Reference is made to paragraph 7 in Annex 1.

 Reply to paragraph 25 (b) of the list of issues

212. Regarding measures to combat prejudices preventing access of persons with disabilities to the labour market, reference is made to the Core Document paragraph 235–241.

213. The initiative, part of the 11 initiatives described in paragraph 235, consists of a yearly, national “job-week”, where public and private employers and persons with disabilities have the opportunity to meet. The aim of “job-week” is to give employers, caseworkers and persons with disabilities knowledge on how to combine work and disabilities. The “job-week” took place from 2–8 December 2019 and marked the UN International Day of Persons with Disabilities on 3 December 2019. It is to be seen as a national awareness campaign that will run until 2022 and includes more than 20 seminars, a website, a Facebook site and use of other social media platforms.

 Reply to paragraph 25 (c) of the list of issues

214. Reference is made to the initial periodic report, paragraph 285.

 Reply to paragraph 25 (d) of the list of issues

215. In Denmark, persons with disabilities are not registered in the public employment sector, specifically when it comes to their employment. Therefore, the data and statistics that exist on employment issues for persons with disabilities have been based on survey data for a number of years. Statistics Denmark and VIVE have conducted the surveys.

216. The last report on the employment situation of persons with disabilities in Denmark was based on survey data collected in 2016 and published in 2017. The publication of the next report based on data collected in 2019, is scheduled for the spring of 2020. Reference is made to paragraph 8 in Annex 1.

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

217. The Government notes the Committees reference to an early retirement reform and early retirement pension is understood to be a reference to the reform of the disability pension and flexi-job scheme.

218. The fundamental objective of the reform is for as many people as possible to join the labour market, preferably in non-subsidised employment. With the reform, disability pensions are, as a main rule, not available to people under the age of 40, unless it is evident that the person in question will not be able to enter the labour market in any degree in the future, e.g. due to a severe disability. With the reform, there is also an increased focus on providing citizens with the necessary assistance to commence education and enter into employment rather than receiving a permanent disability pension. Reference is made to paragraph 9–12 in Annex 1.

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

219. All citizens, including persons with disabilities that receive a disability pension, will automatically be granted old age state pension when they reach retirement age.

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

220. Recipients of social assistance living in certain special housing due to disability are exempt from the cap on the total amount of housing supplement and housing benefit that it is possible to receive.

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

221. Reference is made to table 14 in Annex 1.

 Reply to paragraph 27 of the list of issues

222. The fundamental rules on the right to vote in parliamentary elections are set out in section 29 of the Constitution. Subsection (1) states that any person who is a Danish national, has a permanent home in the Realm and has the age qualifying for suffrage as provided for in subsection (2) shall have the right to vote in general elections unless he or she has been declared legally incompetent.

223. The conditions for the right to vote laid down by the Constitution have been implemented by Section 1 of the Parliamentary Elections Act, which reiterates that persons declared legally incompetent do not have the right to vote.

224. The Legal Incapacity and Guardianship Act provide the rules on legal incompetence. Persons subject to guardianship are legally competent unless also fully deprived of their legal capacity under Section 6 of the Act.

225. As mentioned in the reply to articles 4 and 12 an amendment to the Legal Incapacity and Guardianship Act and the Parliamentary Elections Act, introducing the possibility of partial deprivation of a person’s legal capacity, came into force on 1 January 2019. Partial deprivation of legal capacity is limited to certain assets or affairs. Persons with a partial deprivation of legal capacity are still – in contrast to persons with a full deprivation of legal capacity – legally competent and entitled to vote and to stand for election in parliamentary elections. Persons with a partial deprivation of their legal capacity are also entitled to vote in referendums. The Government notes that it was the intention of the amendment to bestow the right to vote in nationwide elections in Denmark upon as many citizens as possible – also persons subject to guardianship – within the framework of the Constitution.

226. In 2016, amendments to the Members of the European Parliament Elections Act and the Local and Regional Government Elections Act gave persons with full deprivation of legal capacity the right to vote and to stand for election in European Parliament elections in Denmark and in local and regional council elections. Persons under any type of guardianship orders therefore have the right to vote and stand as candidates in these elections.

227. In 2017, the rules on assistance in voting were amended. Now voters in need of assistance, if justified by an immediately identifiable or demonstrable physical or mental impairment, may demand that a person of their choice provide such assistance. The voter must unambiguously express this demand to a polling supervisor or an appointed elector. For a general description of the rules on assistance in voting prior to the 2017 amendment, reference is made to the first periodic report paragraphs 325–331.

228. In 2017, rules on technical aids in the voting booth were issued. The aids are available for voters who due to a disability, poor health or similar reasons are unable to vote in the prescribed way. This allows more voters to cast their vote on their own (without assistance). The technical aids available are thicker black pens to mark the ballot paper, a magnifying glass, an LED-lamp (for better light), closed-circuit television (CCTV), and a raising-/lowering table for wheelchair users. At referendums, overlay plates for the ballot papers, which helps voters who are blind or have reduced vision, are also available.

 Reply to paragraph 28 of the list of issues

229. In general, the Ministry of Culture is working to promote physical and digital accessibility to culture. The ministry enters into framework agreements with institutions in the cultural sector. Physical and digital accessibility is a focus point in these framework agreements. The institutions are responsible for prioritising their efforts to promote and protect the right to leisure, sports and cultural activities in an inclusive manner. Reference is made to paragraph 13–17 in Annex 1.

230. The EU Marrakesh Directive was implemented in the Copyright Act through an amendment on 8 June 2018, which entered into force on 11 October 2018. The Marrakesh Treaty allows persons with visual disabilities to access more books and other print material in formats that are accessible to them.

 Reply to paragraph 29 (a) of the list of issues

231. In the 2020 Finance Act funding for the next Survey of Health, Impairment and Living Conditions (SHILD) in 2021 has been given. A permanent funding of SHIELD has not been prioritised.

232. The Ministry of Social Affairs and the Interior has since 2013 collected statistical data on adults who due to a disability or a particular social problem receive help and support under the Consolidation Act on Social Services. This data contains persons from 18 years and beyond, including older persons over the age of 64.

233. All data is collected using the unique social security number system, which allows disaggregation all data by e.g. sex, age, disability, region and year. In the latest national statistic 75 of the 98 local municipalities participated.

234. The ministry is currently examining different possibilities for collecting national statistical data on children under the age of 18 who due to a disability receive help and support under the Consolidation Act on Social Services. The immediate assessment shows it should be possible to collect the desired data within a few years and to disaggregate data by e.g. gender, age, year and region.

 Reply to paragraph 29 (c) of the list of issues

235. The Ministry of Social Affairs and the Interior has since 2016 published a number of analyses on recipients of social services due to disability using individual-level data combined with a range of registry data, e.g. demographic, employment, education and health data.

236. The ministry publishes a yearly Social Policy Report (*Socialpolitisk Redegørelse*) which gives an overview of the number of persons receiving social services due to a disability, as well as in-depth analyses, e.g. of support for adults with psychosocial disabilities. The 2019 issue was published on 8 January 2020 and includes a separate chapter on children and youth with disabilities.

 Reply to paragraph 30–31 of the list of issues

237. The Danish development cooperation contributes to realising the global ambition of the Sustainable Development Goals for the world’s development towards 2030. The development and humanitarian strategy “The World 2030” underlines Denmark’s ambitions in this regard. Denmark has a human rights based approach to development cooperation. As such, Denmark’s international cooperation and development aid is consistently considering disability as a part of programming processes.

238. Civil society is an integrated part of Danish development cooperation and is represented in the Development Cooperation Council that advices the Minister for Development Cooperation. Further, the Ministry of Foreign Affairs of Denmark supports the rights-based work of civil society organisations and platforms representing persons with disabilities in developing countries. This support is channelled through a pooled fund managed by the Disabled Peoples’ Organizations Denmark (DPOD), the umbrella organisation for 34 disability organizations.

239. Denmark follows the OECD DAC reporting rules and does not produce specific data on the disability rights-based approach in the 2030 Sustainable Development Agenda. OECD DAC approved a policy marker for inclusion and empowerment of persons with disabilities in late 2018. Following this decision, the marker has been introduced in the Danish reporting system.

240. Denmark recognises the fact that persons with disabilities are amongst the most vulnerable populations in humanitarian crises. Therefore, Denmark signed the ‘Charter for inclusion of persons with handicap in humanitarian action’ in 2017, and continuously support various initiatives aimed at raising awareness of the need for improving interventions for disabled people in humanitarian crises. As an example, Denmark provides financial support for the work of DPOD. In addition, Denmark supports UNDP’s Talent Programme for Young Professionals with Disabilities and has seconded one Junior Professional Officer under this programme.

 Reply to paragraph 32 (a-d) of the list of issues

241. The mandate of the inter-ministerial Committee includes for it to be a forum for transverse challenges, sharing of knowledge and feedback on current disability policy issues, including the implementation of the Convention. Among many other tasks, the committee must coordinate and compose contributions to a yearly report on the Government initiatives regarding equal treatment of persons with disabilities.

242. The Committee and the Disability Council constitutes formal frameworks for promoting, protecting and monitoring the Convention.

243. Regarding the inter-ministerial Human Rights Committee, reference is made to the Core Document paragraph 208–209.

 Reply to paragraph 32 (e) of the list of issues

244. Civil society plays a key role in the realisation of human rights in Denmark. The DIHR is appointed by the Parliament to promote and monitor the implementation of the Convention in Denmark and it regularly advises Parliament, the Government and other public authorities in relation to legislative matters by submitting public statements, reports etc. Reference is made to the Core Document paragraph 182–191.

 Part II – Submission from Greenland

 Articles 1–4

245. In 2019, the Parliament of Greenland (the Parliament) passed the Act on Support for Persons with Disabilities. The Act came into effect on 1 January 2020. The main purpose of the Act is to ensure better rights for persons with disabilities. The background for the Act is a desire to implement the Convention in the social field as well as in other sectors.

246. Adoption of the above-mentioned legislative reform obligates ministries to provide information and education within their respective fields of responsibility.

247. There is an ongoing review of the current legislation. The aim of the Government of Greenland (the Government) is to ensure that new legislation complies with the acceded to conventions. In 2017, the Act of the Spokesperson for Persons with Disabilities was passed (*Handicaptalsmand*). The Act stipulates that the *Handicaptalsmand* must be consulted regarding legislative initiatives and other initiatives that affect the terms and rights of persons with disabilities.

248. By 2021, the Government must present a report on Greenland’s current compliance with the Convention and introduce a National Action Plan to strengthen and ensure compliance by 2022.

249. In 2015, the Government decided that article 33 of the Convention should be implemented through a cooperation between the Human Rights Council of Greenland, the DIHR and the Department of Social Affairs. The latter is designated as point of contact and has the coordinating function. The cooperation was initiated with dialogue meetings with representatives from disability organisations. Civil society representatives are likewise intended to be involved in the preparation of the forthcoming National Action Plan.

 Article 5

250. The role of the *Handicaptalsmand* includes raising awareness and fighting stereotypes and harmful practices. The work of the *Handicaptalsmand* is expected to contribute to less discrimination. Public Schools and the education system in general is focusing on equal treatment regardless of background or disability.

251. The Act on Early Retirement Pension guarantees income compensation for persons with permanent disabilities, who have no or very little working abilities.

252. Citizens may complaint to the Social Appeals Board regarding decisions made by the municipality. Citizens may complain to the Ombudsman if they believe that a public authority has violated legislation or has otherwise made errors when dealing with the person in question.

253. According to the Social Appeals Board, no complaints were lodged regarding discrimination based on disability in 2018.

254. Regarding paragraph 15 in the Committees concluding observations received in 2014, the Government does not currently have plans to introduce comprehensive, cross-sectoral anti-discrimination legislation.

 Article 6

255. The Act on Equality of Men and Women prohibits gender discrimination. The Act also established the independent Council of Gender Equality. The mandate of the council includes monitoring the application and implementation of the Act.

256. Information and initiatives regarding women and girls with mental or psychosocial disabilities are part of the *Handicaptalsmand’s* general obligation to collect, develop and disseminate knowledge about conditions for persons with disabilities.

 Article 7

257. Under the Act on Support for Persons with Disabilities, persons with disabilities shall have the opportunity to develop their potential; including the opportunity for education to the extent, it is possible for each individual. The Act also states that a person with a disability has the right to coordinated, coherent and holistic support, which takes into account all aspects of the person and the person’s life.

258. The Act on Public Schools require public schools to help all students acquire the necessary knowledge, to improve their health, social and emotional development, and to take students with special needs into account.

259. Tools for screening children’s health, growth and school readiness have been implemented. This should further a good transition to primary school, by improving and supporting the individual child’s basic skills and learning desire.

260. Since 2012, Greenland has had a spokesperson for children (*Børnetalsmand*), who works to ensure and promote the interests of children based on the UNCRC.

261. In 2018, a nationwide disability centre (*Pissassarfik*) opened. *Pissassarfik* offers professional counselling, courses and training for citizens with disabilities, relatives and professionals. Courses at *Pissassarfik* are specialised to the individual, focussing on self-sufficiency. The individual’s network is involved in the process as much as possible. *Pissassarfik* has initially focussed on developing offers for children with disabilities.

262. The Act on Support for Persons with Disabilities provides a minimum of one conversation with the person in question before making a decision regarding support measures and residential accommodation. The Act also states that the social authorities must establish a scheme to ensure that persons with disabilities are offered support from a lay representative.

263. Funds are set aside in the Finance Act to strengthen foster care. This is achieved e.g. by organising consultants and courses for foster families.

264. In 2017, the Government passed a new Act on Support for Children. The Act stipulates that support must be provided based on what is best for the child, and that in all matters concerning the child, the child’s own views must be taken into account with due regard to the child’s age and maturity. To ensure the rights of the child in social cases, the social authorities can designate an assessor for the child.

265. Reference is made to paragraph 1–2 in Annex 2, for further information regarding LOI paragraph 5(a) as well as paragraph 311 and 337 regarding paragraph 5(b).

 Article 8

266. The *Handicaptalsmand* should disseminate information on persons with disabilities, be their proponent in the public debate and work on giving persons with disabilities better opportunities to participate in the debate and influence societal development.

267. Each year, a “Disability Week” is held in week 41. Associations and organisations may apply for funds to organise activities that focus on the topic.

 Article 9

268. According to the Building Act, the municipalities exercise the local building authority. Among others, the municipalities monitor new construction to ensure compliance with the Act, including the stipulations in the building regulations regarding accessibility.

269. A new set of revised building regulations is expected to come into effect in 2020. To ensure accessibility in existing buildings, the plan is to introduce requirements that the stipulations in the regulations on accessibility must be observed when rebuilding and renovating existing buildings.

270. The Government oversees the municipalities’ compliance with the Planning Act. Several municipalities have drafted disability policies that meet the most basic requirements with respect to physical accessibility.

271. The Government constantly seeks to improve digital accessibility on public websites. Currently, a strategy for the development of public websites is being prepared including adaptation to WCAG 2.0 and the upcoming version 2.1.

272. Reference is made to the Core Document, paragraph 321. The building regulations stipulate rules for disability-friendly facilities in the design of waiting facilities.

273. Air Greenland meets “special service requests” of persons with disabilities when booking a wheelchair, assistant, etc.

274. The Government has established a scheme where citizens who are visually impaired can obtain documentation that allows them to bring an assistant along free of charge when using air or sea transportation in Greenland.

275. There is internet access in all settlements. This enables the deployment of digital networks and systems as well as welfare through communication technology, such as telemedicine. Persons with disabilities benefit from this.

276. Sector plans are a tool for financial and physical planning. They must ensure coherence between interests, political agendas and societal planning in general. Disability is one of the areas where the Government will prepare a sector plan.

277. The Human Rights Council of Greenland in collaboration with DIHR monitor human rights in Greenland.

278. When concluding building contracts, the Government demands that consultants and contractors comply with the building regulations. Taking the needs of persons with disabilities into account in each project should be prioritised.

279. Reference is made to paragraph 3–7 in Annex 2 for further examples.

 Article 10

280. The citizen’s basic needs are covered while staying at residential homes. In addition, pocket and clothing money is at the citizen’s private disposal.

281. According to the Act on Patients’ Legal Position, informed consent is always required when treating patients.

 Article 11

282. In the event of major incidents, emergency messages are communicated to the public via all relevant media, including the printed media where persons with hearing impairments can access the information.

283. All stakeholders and the public are involved through hearings and press releases regarding strategies, measures, plans etc. in the field of emergency preparedness.

 Article 12

284. Regarding Greenland, the amendment to the Legal Incapacity and Guardianship Act introducing the possibility of partial deprivation of a person’s legal capacity can be put into force by royal decree.

285. It has not yet been decided whether or when the amendment should be put into force in Greenland.

286. According to the Decree on the entry into force for Greenland of the Act, a joint guardianship can be issued to a person who, because of inexperience or his physical or mental condition, needs help to manage his fortune or take care of his economic affairs. It is a condition for issuing a joint guardianship that the person concerned gives his consent. Reference is made to paragraphs 93–95, for a definition of joint guardianship.

287. Currently, there are 29 guardianships registered. The State Party is not acquainted with cases, where a person under guardianship has regained legal capacity. Reference is made to paragraph 8 in Annex 2 for details regarding the year of issue.

 Article 13

288. Regarding Greenland, the Administration of Justice Act includes provisions, which ensures witnesses a strong legal position. These provisions applies equally to all witnesses, including persons with disabilities. Furthermore, in a criminal case the injured party can get a supportive person appointed, which can provide the party guidance and support during the court trial.

289. The State Party will impose an amendment to the Act, which will oblige the Police to notify the Court if a witness has special demands that should be considered in relation to the testimony. The amendment will furthermore oblige the Courts to assist the witness to such an extent as circumstances may require. The amendment is expected to be introduced in the Parliament this fall, thereafter it will be introduced in the Danish Parliament.

290. Regarding Greenland, the Act includes provisions securing legal aid for all persons, including person with disabilities that meet certain requirements such as showing reasonable grounds for taking legal action.

291. Reference is made paragraph 104–106. This also applies to the training of prison officers, police students and police officers in Greenland, accordingly.

 Article 14

292. Regarding Greenland, the procedural guarantees in criminal proceedings are primarily legislatively secured through the Administration of Justice Act, which applies equally to all persons accused of a crime.

293. Section 157 of the Criminal Code for Greenland allows special measures to be imposed, e.g. treatment at hospital or other institution, if the offender, at the time of the offence, was of unsound mind due to a mental disorder or a comparable condition. Sentencing a person to treatment in compliance with Section 157 requires that the person is found guilty of a criminal offence.

294. The Director of Public Prosecutions collects judicial data on various criminal matters. The data is disaggregated by the provisions in the Danish Criminal Code. In the current model data is not disaggregated by; sex, age or physical or mental condition of the offender. The same applies to the data model that is currently used in Greenland.

295. Regarding LOI paragraph 12(a) and 13, reference is made to the initial periodic report, paragraph 414.

 Article 15

296. Registration of the use of coercion is made in accordance with the Act of Detention and Other Coercion within Psychiatry. The ongoing registrations of use of coercion do not include information regarding disabilities.

297. The principle of least intervention, according to which the least intrusive, effective means must be used, is applied. In relation to the prevention of the use of coercion in treatment, there is particular focus on good introduction and training of new health personal as well as on-going education. Psychophysical training as well as courses in de-escalation and application of the ‘*Brøset’* Violence Checklist are organised. There are also courses in conflict management and de-escalation for the staff at the residential institutions.

 Article 16

298. In 2018, the Government presented a strategy against sexual abuse that covers multiple areas and groups, including persons with disabilities.

299. In 2016, a treatment program aimed at violent offenders was launched. The course is free and available to all citizens. The programme also offers counselling to a potential partner.

300. In 2014, a nationwide crisis and treatment centre (*Illernit*) opened. *Illernit* offers professional treatment and support, to women and their children exposed to violence. The offer is aimed at women who cannot benefit from or do not have access to existing offers. Reference is made to the initial periodic report, paragraph 419–420.

301. All general provisions in the Greenlandic Criminal Code concerning *inter alia* rape apply equally to persons with disabilities.

302. The Greenlandic Criminal Code contains specific provisions concerning sexual exploitation of persons with mental disabilities. Section 78 stipulates that any person who exploits the mental disorder or intellectual disability of another person to engage in sexual intercourse will be imposed a sanction.

303. Regarding LOI paragraph 15(c), reference is made to paragraph 148–149. It is furthermore not possible to extract statistical data from POLSAS specifically regarding cases in Greenland.

 Article 19

304. According to Act on Support for Persons with Disabilities, the municipality must offer accommodation in a housing commune or a protected housing unit in the local community, when this is required.

305. *Pissassarfik’s* tasks includes advising and supporting persons with disabilities in becoming as self-sufficient as possible inter alia in their home and in the local community. The Government avoids institutionalised housing to the extent possible.

306. Reference is made to paragraph 326.

307. According to the new Act, persons with disabilities have the opportunity to receive – among others – the following support measures: personal assistance and care, assistive devices and furnishing of their home. Presently, it is not possible to disaggregate data regarding measures on personal assistance and in-kind or in-cash forms of support, including personal budgets. In the future, efforts will be made to obtain higher quality data as well as more detailed statistics regarding socioeconomic conditions for persons with disability.

 Article 22

308. The Act on Detention and Other Coercion within Psychiatry stipulates that the psychiatric department may disclose information about the patient’s private relationships with other authorities. If disclosure is deemed necessary for the compliance with a discharge agreement or coordination plan.

 Article 23

309. According to Act on Support for Persons with Disabilities, persons with disabilities are entitled to coordinated, coherent and holistic support that takes all aspects of their life, including possible parenting, into account. Reference is made to paragraph 263.

 Article 24

310. According to the Administrative Order on special education and other special educational assistance in primary school, special education and other special educational assistance must create the best possible conditions for enabling participation in ordinary teaching in cases where it serves the pupil’s interests. The special education must also support the pupil’s transition from school to education, vocation or other employment. For pupils whose functional disabilities are of such nature or extent that their need for special support cannot be met in the ordinary teaching, special education and other special educational assistance are provided.

311. A screening tool aimed at spotting students suffering from dyslexia is being tested and a special initiative regarding students with autism is planned.

312. The Government is working purposefully to provide pedagogues and teachers with the best tools and prerequisites to include a larger proportion of students with special needs in the ordinary schooling.

313. The initiatives in day cares have focused on implementing an academic diploma and master’s program for staff in day care institutions

314. Students in youth education programmes can depending on their needs be assigned assistive technology.

315. Currently, the Ministry of Education is investigating how high school-education to a greater extent can be offered to persons with disabilities, such as persons with various degrees of autism spectrum disorders and ADHD. Reference is made to paragraph 9 in Annex 2.

316. Reference is made to paragraph 334 for further information regarding the issues raised in LOI paragraph 22(d).

 Article 25

317. Regarding LOI paragraph 23(a), reference is made to the initial periodic report, paragraph 442–443.

318. Death certificates do not include information regarding disability; thus, information of whether there is a high mortality among people with psychosocial disabilities is unavailable.

319. Costs for hearing aid treatment are covered by the general healthcare system.

 Article 26

320. Habilitation and rehabilitation is conducted in auspices of the health care system and the municipalities.

321. During admission to a hospital, the patient’s need for rehabilitation is assessed by a doctor. Reference is made to paragraph 10 in Annex 2.

322. Patients admitted in the psychiatric field start a rehabilitative course in psychiatric therapy as soon as they are stable in their treatment.

323. The municipalities can receive guidance from *Pissassarfik* regarding rehabilitation and habilitation and they can refer persons with disabilities to a stay at *Pissassarfik*. Reference is made to paragraph 262 and 306.

 Article 27

324. In 2015, the Act on Early Retirement Pension was adopted. The focus is to develop the individual’s work ability. The legislation allows the individual to supplement his/her salary income with early retirement pension.

325. *Pissassarfik* offers citizens with disabilities guidance and courses focused on obtaining an attachment to the labour market.

326. In 2019, the Parliament adopted the Act on Registration of Socio-Economical Companies. The Act states that the company must be embracing and responsible in its activities, e.g. by hiring employees with disabilities and adapting the work and the workplace accordingly.

327. Reference is made to paragraph 251 for further information.

 Article 28

328. Persons with disabilities have the opportunity to receive early retirement pension if their ability to work is permanently reduced.

329. The requirements for granting early retirement pension in Greenland are not stricter for persons under 40 years of age.

330. There is no ceiling to the amount of entitlements from the social security system.

 Article 29

331. The Electoral Act has requirements regarding support for persons with disabilities. The Act states that if a voter is unable to fill in the ballot, the person in charge of the voting place must provide the necessary assistance. Reference is made to paragraph 11–13 in Annex 2.

 Article 30

332. Reference is made to paragraph 271–282.

 Article 31

333. The National Institute of Public Health conducts ongoing population surveys in Greenland. It is expected that funds will be set aside in the Finance Act for future surveys. Greenland will work to include disability issues in the future.

334. In order to develop official and on-going statistics regarding disability, the Government is currently investigating the quality of the data received from the municipalities. If data quality is considered adequate, statistics on participation in e.g. education and the labour market will be presented.

335. Reference is made to the initial periodic report, paragraph 456. Based on this collection, a statement listing the municipalities’ data within the disability area was published in 2018. This was distributed to all municipalities and is publicly available on the Government’s website.

 Article 32

336. The Greenlandic organisations within the disability area are represented in the Nordic collaboration in the Council of Nordic Cooperation on Disability.

 Article 33

337. Regarding LOI paragraph 32(a) and 32(c), reference is made to paragraph 252.

338. The involvement of civil society in the monitoring process has been initiated.

 Part III – Submission from the Faroe Islands

 Introduction

339. This section has been compiled by the Ministry of Social Affairs based on contributions from relevant Faroese ministries. In this contribution, only new, legislative and administrative policy measures taken will be described, as well as developments relating to the implementation of the Convention since the last report.

 Article 1–4

340. According to the Danish Ministry of Justice, incorporating the Convention may interfere with the balance of power between the judiciary and the legislative powers. The ministry also points out that even though the Convention is not incorporated, it is an applicable source of law in Denmark. The Faroese Government supports these views, and at present incorporating the Convention into Faroese legislation is not an objective.

341. However, continuous efforts are made to develop social services and benefits contributing to ensuring equal participation for persons with disabilities. A Social Service Policy, co-authored by the Main Association in the Faroe Islands for Persons with Disabilities (MEGD) was introduced in 2017, this social service policy lays down the principles for organising and rendering future services. A Welfare Legislative Framework has been devised based on this service policy and the Convention’s disability policy principles of compensation, sector responsibility, solidarity and equal treatment, and will be presented to the Faroese Parliament shortly.

342. The political understanding of the Government from 14 September 2019 is committed to creating a disability policy action plan, this is currently under preparation and the completion is expected before the end of 2020.

 Article 5

343. Although Faroese legislation does not identify the lack of suitable housing for persons with disabilities as discrimination, the Government does recognize the rights of those with disabilities to diversified housing opportunities on an equal basis to others. This is apparent in the National Housing Policy, which specifies that the housing market must accommodate everyone – including persons with disabilities.

344. The same applies to accessibility in general, the lack of accessibility is not identified as discrimination, but continuous efforts are being made towards improving accessibility for persons with disabilities.

345. In 2011, a legislative act took effect banning discrimination in the labour market due to disability. The Equal Opportunities’ Board handles complaints regarding the breach of the Act. When the board is hearing complaints, a representative from MEGD must participate in the hearing. At present, there is no specific plan of implementing anti-discrimination legislation of a wider scope banning discrimination due to disability in all areas.

 Article 6

346. In 2017, the Ministry of Social Affairs and Nordic Welfare Centre organised the conference ‘Break the Taboo’ (*Bryt Tabut*). This conference focused on sexuality and disability in addition to sexual harassment of persons with disabilities. The first day of the conference described the subject in a Nordic perspective, while the second day of the conference focused on Faroese conditions.

 Article 7

347. Continuous and systematic efforts are being made to initiate and develop efforts to help children and young people with disabilities.

348. In the Faroe Islands, there are several public systems in place, which aim to ensure children with disabilities their rights as outlined in the Convention, e.g. the health visitor system ‘Gigni’; counselling for parents; school and after-school options; respite care for parents, in addition to other support systems.

349. The political understanding includes ‘the Positive Process’, a cross-sectoral and interdisciplinary cooperative programme for families with children with autism. This programme is to be broadened to encompass that all families with children with disabilities, are to be given targeted professional quality counselling.

350. In addition, the 2018 Mental Health Report recommends improving the circumstances necessary for good mental health for children and young people.

 Article 8

351. One of the main goals of a coordinating unit established in the spring of 2019 is to raise awareness internally in the administration of the requirements of the Convention.

352. A new bill must describe how it corresponds with the Convention, but it may be difficult to assess its consequences. Therefore, this autumn the course programme, which organises the course activities for government departments, organised a course in cooperation with MEGD. It was aimed at improving the department employees’ abilities to judge whether a bill complies with the obligations of the Government under the Convention.

 Article 9

353. The political understanding states that accessibility in the outlying islands is to be improved. Accessibility for persons with disabilities with public transport is also to be prioritised. The public transportation company, ‘SSL’, is responsible for public transportation nationally, and also by boat between the islands.

354. In 2019, the legislation on public and freight transportation was changed with the aim to get lifts in all intra-village buses, and the contract for the bus routes was put out to tender again, requiring accessibility for persons with disabilities. The new contract stipulates that all future SSL busses must have a lift to ensure equal accessibility for persons with disabilities. Previously, very few of SSL busses had a lift, and therefore this is major improvement.

355. The SSL ferries ensure a good infrastructure between the mainland and the outlying islands, but being dated do not include a lift. As these are small ferries, installing a lift on board is not an option. As the ships are being replaced, new ferries are built to meet the present requirements for lifts etc., giving equal opportunities to all.

356. Regarding digital accessibility, the Government is presently developing a joint Service Portal with an accessible design in conformity with the international standard ‘WCAG2’. The institution in charge of digitalizing the Faroe Islands ‘*Talgildu Føroyar*’ is spearheading this project. The project is in its final stages and by 2020, the services of e.g. public institutions will be connected to this portal, providing the aforementioned international standard.

 Article 14

357. In the initial periodic report, the Government referred to the present regulation regarding detention in social services being scattered and generally inadequate. A bill on detention is included in the Welfare Legislative Framework and will be introduced to the Parliament shortly. The bill structures matters regarding detention and other restrictions on an individual’s rights to self-determination. It will apply to recipients of services under the coming Welfare Act, the parliamentary Act on Home Services, Elderly Care etc. and partly under the Child Welfare Act. If the bill is passed, as expected, it is a major improvement on the legal protection of those potentially exposed to detention and restriction.

 Article 19

358. The Government’s housing policy refers to article 19 of the Convention stating that persons with disabilities have an equal right to suitable housing, therefore are not required to live in special residences. Generally, the housing policy distinguishes between residential care homes, assisted living, and shared housing.

359. Residential care homes are for people who need permanent care and constant attendance. Assisted living is characterised by independent apartments, communal areas and communal activity, and a greater sense of community compared to regular neighbourhoods, as well as possible care and treatment. Shared housing is characterized by joint or close-lying individual apartments with own entrance and possibly communal areas. Shared housing is for persons who have less need of socio-pedagogic assistance and support than those in assisted living.

360. The aim is always that a person who is able to live in shared housing, should not have to live in an assisted-living complex and a person who can manage with assisted living should not have to live in a residential care home.

361. Since 2013, the population of the Faroe Islands has increased by approximately 7 percent. The housing market is under a lot of pressure in general, which is also seen in the demand for sheltered housing. Since 2011, the number of sheltered housing has increased by 100 units. According to the Government’s political understanding, an increase of sheltered housing units is necessary. The Housing Minister has appointed a working group with wide representation from the public and the private sector to determine how housing challenges can best be solved and also to look into sheltered housing. Their recommendation is expected by February 2020.

362. Since its establishment in 2012, the Faroese Social Housing Association has built 333 rental dwellings. The Social Services have the allotment right to every fifth dwelling built by the association. These dwellings are allotted to citizens with reduced functionality either physically or mentally, but who are able to live independently in their own accommodation.

363. There are several support systems in place to assist and improve the options for those with disabilities to maintain an independent life. Through the Social Services, it is e.g. possible to obtain aids, equipment, support for an invalid car, and for home modification.

 Article 24

364. The Ministry of Culture has systematically worked on creating a more inclusive environment in the school system, both for primary and secondary education. Since 1997, the Primary Education Act has specified that the school system is for everybody.

365. During past years, the ministry together with the schools and PPR (educational and psychological guidance) have worked towards enhancing the qualification of the needed support to ensure that all children and young people receive quality education in an inclusive school environment. The support systems have been adapted according to the recommendations of a working group appointed by the Minister of Culture, which highlighted the importance of an inclusive primary school.

366. Additional support systems aimed at ensuring inclusion have been added, and necessary structural changes have been made. Special education programmes and special education classes have been established within the upper-secondary education system.

 Article 25

367. In the Faroe Islands, everyone is entitled to free treatment within the hospitals service. Dental treatment for children and young people (under the age of 18) is also free, whilst dental treatment for adults is partially covered by the Health Service.

368. There are 3 hospitals in the Faroe Islands with a total of 191 beds The main hospital is situated in the capital, Tórshavn, and two smaller hospitals are situated on smaller islands. The hospitals have 20 treatment specialities, with a surgical centre, a medical centre, a psychiatric centre, a diagnostic centre, an emergency centre and a service centre in the main hospital and consultants affiliated in the necessary specialties. In the health care system, there are 55 specialised physicians, 54 physicians without specialisation, 405 nurses, 32 physiotherapists and occupational therapists, 27 midwives and 185 other health care personnel. Patients are referred to hospitals in Denmark and other countries, if the treatment is not available in the Faroe Islands.

369. The Faroe Islands are focusing on improving the living conditions for persons with disabilities, to ensure that they may live longer and have a generally better life. No comprehensive health policy is in place for the disability area, instead several reports in different fields outline how the living conditions for persons with disabilities may be improved. There is an overall plan on the treatment of diabetes, which was handed to the Minister of Health in 2013; the development plan for the hospital service and the recommendation on coordinated rehabilitation from 2016; the overall plan regarding mental health from 2018 and the plan on personalised medicine from 2019. All plans suggest recommendations for the health sector regarding the improved living conditions for persons with disabilities.

370. Screening for cervical cancer is equally accessible for women with disabilities. Together with her GP, where and when the screening is decided and the result is notified on an equal basis to other women.

371. In primary health care, the health visitor provides free counselling and information on sexual and reproductive health. Special pregnancy termination counselling is also provided, if required, and the opportunity for counselling regarding health, social and mental issues. Young people with disabilities also have access to counselling regarding sexual and reproductive health on an equal basis.

372. Persons with permanently impaired hearing, who have been referred to hearing aid treatment by an ear, nose and throat specialist, receive financial support. The support is granted if the hearing aid proves necessary for the service user to be actively employed, if the hearing aid significantly improves hearing or if the hearing aid significantly improves daily life. Support is granted for digital hearing aid, tinnitus masks, earplugs, hearing protection and remotes.

373. If a patient needs an ambulance or other transportation from home to a treatment facility, the Hospital Service covers the cost, but transportation must be carried out in the cheapest, most adequate transport vehicle. In addition, the cost of transporting patients for treatment abroad is also covered. If patients, due to a life threatening disease or due to physical, mental or social incapacity is not able to travel or support themselves alone during the treatment abroad, the Hospital Service may also cover the cost of an attendant to travel with the patient.

374. Regarding accessibility to public buildings, a Government order states that entrance and approach areas must be designed to allow persons with physical disabilities access to the buildings providing them with greater freedom of movement and safety. Public buildings must be designed and furnished to allow all to use them with regards to safety, health, accessibility, maintenance and cleaning. Suitable access and accessibility for persons with disabilities results in equality in natural access to buildings intended for the public, areas around the building and movement within the building. In addition, equal access to entry phones, call systems, and all other facilities and options available to the public.

 Article 26

375. In accordance to the 2017 Social Service Policy, all future services under the Minister of Social Affairs must be structured with development and rehabilitation in mind. These services comprise e.g. support services for children and adults, housing options, rehabilitation and activity services.

376. The Welfare Legislation Act includes an array of tools to support persons with disabilities to achieve the life of their choosing and ability. The bill also includes the authority to instigate new services. Rehabilitation training is included in the legislation for the first time and will be established in the near future.

 Article 29

377. According to the Elections Act, persons under guardianship who have lost legal authority under Section 6 in the Guardianship Act, do not have the right to vote, provisioned in Section 3 of the Home Rule Act.

378. Under the Elections Act, citizens are ensured the assistance they need to exercise their right to vote. If a voter is unable to vote in the manner prescribed, two persons, bound by professional secrecy, previously appointed by the election committee may assist the voter. However blind or visually impaired persons may request the assistance of a person of their own choice. If the voter is paralysed or otherwise of such reduced physical functionality to prevent the voter from entering the election hall, the act of voting may on request take place outside the election hall. In this case, two members of the election committee or their assistants must be present and if necessary provide the voter with assistance in voting.

379. Lists of candidates must be posted inside the election hall. Instructions for the voters on matters of great importance for elections must also be posted. Graphic instructions, which in a simple and easily understood language describes how to cast the vote, must also, be present.

 Article 31

380. Data is collected through the central IT system of the Social Authority, but due to the size of the administration the Faroe Islands have limited resources to produce statistics in comparison to larger countries. Ad hoc statistics are produced according to need. A more systematic survey of statistical data, e.g. on the number of people receiving social security benefits and social services due to disability, is underway.

 Article 33

381. The spring of 2019 saw the establishment of a coordinating unit within the central administration in response to article 33, (1) of the Convention, with representatives from all government departments in addition to the National Association of Municipalities. The purpose of this is to ensure a systematic and coordinated implementation of the Convention in society. Specifically, the unit is to prepare an action plan for a disability policy, which is expected to be finished before 2021.

382. The Committee has previously recommended that the Government establish a human rights unit to implement and protect human rights in agreement with the Paris Principles. In 2016, the previous Government appointed a working group to make a recommendation on how to organise a human rights’ unit. In May 2017, the working group handed its report to the former Minister of Foreign Affairs. The report recommended that a possible human rights unit should monitor and describe the state of human rights in the Faroes, be advisor to authorities and cooperate with e.g. institutions, associations, schools and the university.

383. The working group pointed to four present institutions that could be in charge of monitoring human rights in the Faroe Islands: the Parliamentary Ombudsman, the Faroese Complaints Board, the University of the Faroe Islands and the Equal Opportunities Board. Delegating the area to the four institutions has its advantages and its disadvantages, but the working group considers each institution qualified depending on sufficient funding and an appropriate legislative framework.

384. A working group has since been appointed to evaluate the Complaints Board. One task i.e. is to make a proposal as to how a human rights unit focusing on the disability area may be a part of the Board’s framework. The task force is expected to hand its recommendations to the political system by spring 2020. The Government is then expected to make a concrete proposal as to how a human rights unit may be organised under the Complaints Board.

385. MEGD has mentioned a need for an independent spokesperson to monitor the Convention and according to the political understanding, such a spokesperson will be appointed. No decision has been made as of yet, but it is unlikely that two monitoring institutions will be established, so one of these models will likely be chosen.

386. Although there is no human rights unit, there are several systems in place protecting persons with disabilities.

387. In employment situations, discrimination of applicants with disabilities is prohibited, and the same applies to dismissals, job transfer, promotions and terms of wages and employment. In the event of a breach of these regulations, persons with disabilities may file a complaint to the Equal Opportunities Board.

388. If persons with disabilities do not get the entitled benefits, they may file a complaint with public complaint boards. These are the Complaint Boards in Social, Health and Family Affairs and the Psychiatric Complaints Board. If a public complaints board decides in favour of the citizen, the relevant authority, e.g. the Social Services, must follow the decision.

389. Regarding accessibility to public buildings, a Government order states that entrance and approach areas must be designed to allow persons with physical disabilities access to the buildings. If the building authority makes decisions, where persons with disabilities are treated unfairly, complaints about these decisions may be made to the ‘*Lendiskærunevnd*’ (LKN), which is a public complaints board making decisions in e.g. building matters. When the LKN has made a decision, subordinate authorities must follow it.

390. It is also possible for persons with disabilities to complain to the Parliamentary Ombudsman if a public institution has treated them unfairly or if they receive no reply to an enquiry from public authorities due to lengthy case management.

1. \* The present document is being issued without formal editing. [↑](#footnote-ref-1)
2. \*\* The annexes to the present report may be accessed from the web page of the Committee. [↑](#footnote-ref-2)
3. <https://www.sst.dk/da/udgivelser/2019/monitorering-af-tvang-i-psykiatrien-januar---december-2018>. [↑](#footnote-ref-3)
4. <https://www.sum.dk/Aktuelt/Publikationer/~/media/Filer%20-%20Publikationer_i_pdf/2016/Healthcare-in-dk-16-dec/Healthcare-english-V16-dec.ashx> [↑](#footnote-ref-4)