



# Convention on the Rights of Persons with Disabilities

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## Committee on the Rights of Persons with Disabilities

### **Combined second and third periodic reports submitted by Czechia under article 35 of the Convention, due in 2019<sup>\*</sup>, <sup>\*\*</sup>**

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\* The present document is being issued without formal editing.

\*\* The present document was submitted pursuant to the simplified reporting procedure. It contains the responses of the State party to the Committee's list of issues prior to reporting (CRPD/C/CZE/QPR/2-3).



## List of Abbreviations

<i>Abbreviation</i>	<i>Meaning</i>
“A Life Like Any Other” Project	The systemic project “A Life Like Any Other” implemented by the Ministry of Labour and Social Affairs within the OPE
AFC	Alternative family care
ASLPC	Authority for Social and Legal Protection of Children
Barrier-free decree	Decree of the Ministry of Regional Development No 398/2009 Coll., on general technical requirements to secure barrier-free use of buildings, as amended
Convention	Convention on the Rights of Persons with Disabilities
CR	Czech Republic
CZSO	Czech Statistical Office
“Development of the Social Services System” Project	The systemic project “Development of the Social Services System” implemented by the Ministry of Labour and Social Affairs within the OPE
EU	European Union
FRS CR	Fire Rescue Service of the Czech Republic
GBPD	Government Board for Persons with Disabilities
Charter	Charter of Fundamental Rights and Freedoms
LOCR	Labour Office of the Czech Republic
MoC	Ministry of Culture
MoEYS	Ministry of Education, Youth and Sports
MoH	Ministry of Health
MoI	Ministry of the Interior
MoJ	Ministry of Justice
MoLSA	Ministry of Labour and Social Affairs
MoT	Ministry of Transport
MRD	Ministry of Regional Development
National Plan	National Plan for the Support of Equal Opportunities for Persons with Disabilities for the Period 2015
Ombudsman	The Ombudsman – Public Defender of Rights
OPE	Operational Programme Employment
OP RDE	Operational Programme Research, Development and Education
Persons with disabilities	Persons with disabilities
Pupils	Children, pupils and students with disabilities
SCF	School counselling facility

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<i>Abbreviation</i>	<i>Meaning</i>
SEN	Special educational needs
SLPC	Social and legal protection of children
SM	Support measures
SSPD 2018	Sample survey of persons with disabilities in 2018

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## **I. Introduction**

1. In accordance with concluding observation No 67 to the Initial Report of the Czech Republic on the Measures Taken to Fulfil its Obligations Under the Convention on the Rights of Persons with Disabilities (hereinafter the “Convention”), the Czech Republic (hereinafter the “CR”) submits this Combined Second and Third Periodic Reports on the Fulfilment of Obligations Under the Convention for the period from 28 October 2011 to 31 December 2019, within the simplified reporting procedure.
2. This document is a shortened form of the Combined Second and Third Periodic Reports of the Czech Republic on the Fulfilment of Obligations Under the Convention on the Rights of Persons with Disabilities, adopted by the Government of the Czech Republic on 17 August 2020, which respects the prescribed maximum limit of 21,200 words.

## **II. Replies to the list of issues prior to reporting (CRPD/C/CZE/QPR/2-3)**

### **A. Purpose and general obligations (Articles 1–4)**

#### **Reply to paragraph 1 of the list of issues**

3. The National Plan for the Support of Equal Opportunities for Persons with Disabilities for the period 2015-2020 (hereinafter the “National Plan”) is the basic document formulating the policy towards persons with disabilities. The purpose of the National Plan is to continue to promote and support the inclusion of persons with disabilities and to fulfil the individual articles of the Convention through specific measures.
4. One of the basic starting points of the National Plan’s approach to solving the problems of persons with disabilities is promoting a gradual transition from a medical model of disability to a social model.
5. The concept of the social model in the field of assessing the adverse social consequences of disability has been applied in the CR since 2007 within the social services system when assessing the degree of dependence (the need for daily assistance, supervision or care in managing basic living needs) for the purposes of granting a care allowance.
6. In 2012-2013, taking into account the advances made in medical science and in an effort to introduce a functional assessment of the adverse consequences of the state of health of persons with disabilities, the social model was also applied in the context of granting special ID cards to persons with disabilities, yet organisations of persons with disabilities did not accept this model and forced a return to the health-based model.
7. The National Plan includes measures aimed at finding ways to refine and improve the way in which the consequences of an adverse state of health are assessed for social security purposes. However, the extension of the application of the social model in these systems has long been limited by the attitudes of organisations of persons with disabilities, who perceive the application of the health-based model as their social security.

#### **Reply to paragraph 2 of the list of issues**

8. Regarding the participation of persons with disabilities and their representative organisations in the creation, implementation and monitoring of legislation, the fulfilment of this obligation is an integral part of the legislative process. According to the Government’s Legislative Rules, an assessment of the social impact on families and specific population groups, especially persons with disabilities, is a mandatory part of draft legislation. This involvement is ensured not only by a range of possibilities to comment on all draft legislation, but also by the established procedures in the creation of factual documents leading to the issuance of new, or changes to, existing legislation within the competence of individual governmental departments.

9. An important platform for the representation and participation of persons with disabilities in preparing legislative and non-legislative measures is the Government Board for Persons with Disabilities (hereinafter the “GBPD”), which is the advisory body of the Czech government for support of persons with disabilities. The GBPD also coordinates the elaboration of national plans for the benefit of persons with disabilities and the annual monitoring and evaluation of their fulfilment.

10. In addition to the prime minister, relevant ministers and representatives of governmental departments, the members of the GBPD are the chairman and four vice-chairmen of the Czech National Disability Council, representatives of employers of persons with disabilities, and five other members representing civil society, the professional public and academia. The Public Defender of Rights (hereinafter the “Ombudsman”) is a permanent guest of the GBPD with an advisory voice.

11. All draft legal regulations, as well as non-legislative documents concerning persons with disabilities are sent by the GBPD secretariat in electronic form to the Czech National Disability Council, which then distributes such materials to organisations of persons with disabilities). Organisations of persons with disabilities also have the opportunity to get acquainted with the prepared regulations and documents through the Electronic Library of the prepared legislation <https://apps.odok.cz/kpl>. This public portal makes available documents of a legislative nature intended for government meetings.

#### **Reply to paragraph 3 of the list of issues**

12. By Resolution No 772 of 20 November 2018, the Government of the CR approved the ratification of the Optional Protocol to the Convention and recommended that the president of the Republic ratified the Optional Protocol after the Parliament of the CR expressed its consent.

13. The Chamber of Deputies of the Parliament of the CR is discussing the proposal for ratification of the Optional Protocol, the second reading of which was opened on 28 November 2019. In the second reading, the Chamber will decide whether it will agree to its ratification.

14. The Senate of the Parliament of the CR discussed the proposal for ratification of the Optional Protocol on 27 February 2019 and gave its consent to its ratification.

## **B. Specific rights (Articles 5-30)**

#### **Reply to paragraph 4 of the list of issues**

15. The general legal regulation of equal treatment in the CR is contained in Act No 198/2009 Coll., the Anti-Discrimination Act. Under the Anti-Discrimination Act, refusal or failure to take reasonable accommodation to enable persons with disabilities to have access to a particular employment, occupation or function or other promotion in employment, to benefit from job counselling or other vocational training, or to benefit from services provided to the public, is also considered indirect discrimination on the grounds of disability, unless such measures constitute a disproportionate burden. The obligation to adopt reasonable accommodation thus applies not only in employment law areas, but also in access to services provided to the public, including housing and transport.

16. On 12 March 2019, a group of deputies of the Chamber of Deputies of the Parliament of the CR submitted a draft amendment to the Anti-Discrimination Act. The aim of this proposal is to introduce into the legal system of the CR the possibility for non-governmental, non-profit organisations dealing with the protection of the rights of victims of discrimination to file a so-called public action (*actio popularis*) in the field of discrimination. The proposal also includes the extension of the shifting of the burden of proof in anti-discrimination disputes to all disputes under the Anti-Discrimination Act.

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

17. The National Plan includes measures that specifically emphasize the need to take into account the needs of women with disabilities, such as:

(a) 1.4 When adopting all legislative, organisational and technical measures concerning the lives of persons with disabilities, ensure equal conditions for persons at risk of multiple discrimination (especially children, women, ...) and cooperate in their formulation with representatives of organisations of persons with disabilities.

(b) 2.3 Raise social and legislative awareness in the field of non-discrimination on the grounds of disability or unfavourable health, also take into account the issue of multiple discrimination (e.g. on the basis of gender, age).

(c) 13.9 Increase the number of employed persons with disabilities and submit information on the development of employment of persons with disabilities in individual governmental departments (including breakdowns by gender).

(d) 15.3 Support projects aimed at increasing the participation rate of women with disabilities in public life.

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

18. Women with disabilities are supported in projects implemented under the Operational Programme Employment, financed from the European Social Fund (hereinafter the "OPE"). These projects are aimed at improving employability on the free labour market, with the proviso that such involvement may also represent a greater degree of participation in public life for participants. The implemented projects were aimed at supporting the labour integration of women with disabilities at risk of social exclusion, and the removal of barriers that make it difficult for them to enter and remain on the labour market on an equal footing (low self-confidence and poor orientation in the current labour market positions suitable for this category, correct determination of which career path to follow, how to support their qualifications for better employment), increasing the employment of women with disabilities aged 55+ who are registered with the Labour Office of the CR (hereinafter the "LOCR"), promoting part-time and other flexible jobs and supporting equal opportunities in their integrating into the labour market, comprehensive support (motivation, activation, targeted education and an individual approach) for women with disabilities aimed at direct employment in the labour market and reducing the differences with men in a similar position.

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

19. The deinstitutionalisation of care and the development of a network of services for children is the focus of the National Strategy for the Development of Social Services for the period 2016–2025 – Area 1 deinstitutionalisation and transformation in social services, which aims to reduce the capacity of institutional care and develop a network of outreach, outpatient and low-capacity residential services based on the community principle. Measures to optimise the system of care for at-risk children are also part of the National Social Inclusion Strategy 2014–2020. These measures lead to a reduction in the number of children in institutional care, including children with disabilities, an increase in the quality of public protection of children, development of a network of preventively focused low-threshold services for at-risk children and their families and the development of foster care.

20. An important area of childcare from the point of view of deinstitutionalisation is the promotion of foster care, the development of which the CR strives for, as it is a suitable alternative for the care of those children (including children with disabilities) who cannot – temporarily or permanently – grow up in their own families. The professionalisation of foster care has been facilitated by changes to the legislation effective since 2013, which have focused on adjusting the content and scope of the preparation of applicants for foster care, material security for foster parents, enshrining the rights and obligations of foster parents, creating conditions for the establishment and development of support services for foster families, and introducing a State allowance for accompanying foster parent organisations that provide support for foster parents.

21. A key activity of the individual project of the Ministry of Labour and Social Affairs (hereinafter the “MoLSA”) “Systemic Development and Support of Social and Legal Protection Instruments” - Development of Foster Family Care - also focused on the expansion and professionalisation of foster care. From the perspective of children with disabilities, it was important to implement activities aimed at increasing the number of foster families caring for children with special needs and providing them with more intensive support.

22. The changes made so far in the field of foster care have gradually reduced the number of children in institutional care (a decrease of 22% since 2011) and increased the number of children placed in foster care. In the CR, there has been an increase in the number of children placed in foster care since 2011 (approximately 26%). There has been a positive trend with more of these children remaining in the care of their own parents, who more extensively use the available outreach and outpatient services (e.g. services such as early care for children with disabilities under seven years of age provided in outreach and outpatient forms or respite services, etc.). See also the answer to question 16(a).

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

23. The right of all children to express their own views is guaranteed by Article 12 of the Convention on the Rights of the Child. This right has been reflected in the CR in a number of legal regulations strengthening children’s participation rights, including legislation governing court proceedings, the public protection of children, and services for children. This issue has also been addressed in Judgment of the Constitutional Court of 8 October 2018, file No II. ÚS 725/18, in which the Constitutional Court stated that the fundamental rights of the applicant’s minor daughter (enjoined party to a case before the Constitutional Court) had been violated in the proceedings before the ordinary courts, namely her right to participate in the proceedings concerning her person, pursuant to Article 12 of the Convention on the Rights of the Child, and the right to have her case heard in her presence in accordance with Article 38(2) of the Charter of Fundamental Rights and Freedoms (hereinafter the “Charter”).

24. Hearing and respecting the child’s opinion are among the basic principles of the National Strategy for the Protection of Children’s Rights – The Right to Childhood 2012–2018). Here, a basic principle was enshrined, according to which the child should be at the centre of the whole system and should be a partner in solving their and their family’s situation. Children’s participation was the focus of Objective 3 “Creating opportunities for children and young people to participate in decision-making on issues that affect or concern them”.

25. The information portal of the MoLSA: [www.pravonadetstvi.cz](http://www.pravonadetstvi.cz), where a specific section for children has been created, also serves to spread awareness of children’s right to participation. The portal provides information on children’s rights to children themselves as well as to the general public and professionals.

26. The Ministry of Health (hereinafter the “MoH”) facilitates the participation of children’s representatives in working groups that address issues closely related to their interests, such as the Working Group for Child and Adolescent Psychiatry of the MoH; alternatively, their interests may be pursued through the parents of children with disabilities.

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

27. Raising awareness of the situation of persons with disabilities and educational activities takes place both through the own activities of individual governmental departments, or other public institutions, as well as in the form of providing support to projects of non-profit organisations.

28. With regard to the issue of persons with disabilities and the Convention itself, the MoLSA as its sponsor supports raising awareness about the rights of persons with disabilities defined by the Convention within many of its activities. In cooperation with other stakeholders, the MoLSA has organised a number of conferences, seminars, and training and educational events, both for persons with disabilities and for employees of public administration and local government. The aim of these events was to inform about individual provisions of the Convention, to raise awareness of the principles of equal treatment and the

importance of their observance, and to establish the cooperation necessary for the implementation of the Convention in the CR.

29. As part of its publishing activities, the MoLSA informs the public about the issues and rights of persons with disabilities both through its website and other publications. The MoLSA has published, inter alia, the following publications that take into account the issue of persons with disabilities: Handbook for Persons with Disabilities in 2016 ([http://www.mpsv.cz/files/clanky/29022/Prirucka\\_pro\\_OZP\\_v\\_roce\\_2016.pdf](http://www.mpsv.cz/files/clanky/29022/Prirucka_pro_OZP_v_roce_2016.pdf)) – This is the third edition of the handbook, which explains the complex system of health assessment in relation to benefits for persons with disabilities, the system of care allowances, etc. It is intended both for persons with and without disabilities. The web portal [www.mpsv.cz](http://www.mpsv.cz) has a special “disability” tab that provides information relevant to persons with disabilities.

30. The MoLSA has carried out many information events and activities through systemic projects implemented within the OPE, namely the “Life Like Any Other” project implemented 2016-2020 and the “Development of the Social Services System” project implemented 2016-2022. For further information on both projects, see the answers to questions 7(b), 14(b), 16(a), 16(b) and 18(c).

31. The grant programme Support for Public Benefit Activities of Civic Associations of Persons with Disabilities, announced annually by the Office of the Government of the CR in cooperation with the GBPD, supports educational and information activities in the field of equalising opportunities for persons with disabilities, such as organising information campaigns for the public, participation in exhibitions and public presentations, including accompanying events, organising professional conferences and seminars, operating information web portals, and publishing information materials, leaflets, printed materials and publications about the disability.

32. Every year, the GBPD announces the GBPD Annual Award for journalistic work in the categories of press, radio and television programmes, as well as in the category of photography focused on the topic of disability. The award and the photography competition are announced on the occasion of the International Day of Persons with Disabilities with the aim of attracting the attention of the media to the topic of disability and thus positively influencing the public opinion about, and attitude towards, persons with disabilities.

33. The MoH supports educational, awareness-raising and information activities in the field of equalisation of opportunities for persons with disabilities through the Grant Support Programme and the Equalisation of Opportunities for Persons with Disabilities Programme. Through these programmes, it contributes to the organisation of information campaigns, professional conferences, lectures and seminars, the operation of information web portals, and the publication of educational and information materials, leaflets, printed materials and publications about the disability. The individual activities are aimed at both the professional and lay public, as well as at persons with disabilities and their loved ones.

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

34. Through the project “Life Like Any Other”, the MoLSA raises awareness about the meaning and objectives of the transformation of social services, the consequences of care in institutions and the importance of independent living through the website [www.trass.cz](http://www.trass.cz) and the Facebook profile of the National Centre for Support of Social Services Transformation (<https://www.facebook.com/trass.cz>). As part of the project, interviews were conducted with persons with disabilities and their representatives, and are available on the project website. The project also organised “methodology day” events, eight of which focused on the issue of the lives of persons with mental illness in 2018.

35. The fight against stereotypes, prejudices and stigmatisation is supported by the GBPD through the subsidy programme Support for Public Benefit Activities of organisations of persons with disabilities. Destigmatisation was addressed, for example, in a project by KOLUMBUS Association, which informed and educated users of psychiatric care and the professional public about the progress of the Psychiatric Care Reform.

36. Within the MoH, the destigmatisation of persons with mental illness is being addressed through a project called Destigmatisation implemented by the National Institute of



Mental Health with financial support from the OPE. The Destigmatisation project is implemented between September 2017 and August 2022, and aimed to reduce the stigmatisation and discrimination of persons with mental illness and to improve people's approach to mental health. The project and its initiative On the Level focused on evidence-based destigmatisation measures for six strategically selected target groups: healthcare professionals, social workers, public administration, communities around mental health facilities, persons with mental illness themselves and their family members. As part of the project, a methodology was created and an analysis of the current situation developed and, in the coming months, communication of destigmatisation in the regions, support for users and family members, and a primary prevention project will all be launched.

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

37. Educating public sector employees about disability issues is one of the National Plan's objectives. As part of progress towards fulfilling the task "Develop the content of training and implement training for employees of individual State administration bodies concerning persons with disabilities and the principles of communication with selected groups of persons with disabilities", a Working Subgroup for Education was established within the GBPD Expert Group on Accessibility of Public Administration and Public Services and cooperates with the Section for Civil Service of the Ministry of the Interior (hereinafter the "MoI"). The MoI is responsible for the training of employees in the civil service and for part of the training of local-government officials.

38. In accordance with Act No 108/2006 Coll., on social services (hereinafter the "Social Services Act"), the MoLSA accredits continuing training programmes for social workers, workers in social services, their managers and also for informal carers (persons who provide care to the recipient of the care allowance).

39. The MoLSA implements projects through the OPE that include seminars, workshops, conferences and study tours, the purpose of which is to educate social workers across departments, and share good practice and innovations in the field of social work. These are the projects "Systemic Support for the Professional Performance of Social Work" and "Systemic Support for Social Work in Municipalities".

40. The Czech National Disability Council, as well as other organisations of persons with disabilities, participate in training sessions for individual types of disability, including their specifics and the manner of solving possible related problems, which are carried out for the employees of State administration, local government (e.g. LOCR) and a number of public institutions (e.g. State railways, airports, etc.).

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

41. Act No 183/2006 Coll., on spatial planning and the Building Code (the Building Act), establishes the obligation to respect the general requirements for construction, including the requirements for barrier-free use of buildings set by Decree No 398/2009 Coll., on general technical requirements ensuring barrier-free use of buildings (hereinafter the "barrier-free decree"). Its wording sets out the scope of requirements for the barrier-free use of buildings and requirements for technical solutions (the details are left to technical standards). Within its framework, the relevant Czech technical standards for the design and implementation of requirements for the barrier-free use of buildings are introduced and updated. A list of Czech State standards for the barrier-free decree is available online at: [http://www.mmr.cz/getmedia/e0adb6e7-1813-4a62-b263-a7c9975e8b93/398-2009\\_CSN\\_k2018\\_05.doc](http://www.mmr.cz/getmedia/e0adb6e7-1813-4a62-b263-a7c9975e8b93/398-2009_CSN_k2018_05.doc).

42. In the area of barrier-free accessibility, the Ministry for Regional Development (hereinafter the "MRD") places great emphasis on:

- Methodological activities towards municipal building authorities;
- Coordination and uniformity of requirements for barrier-free use of buildings across governmental departments, especially between the MRD and the Ministry of Transport (hereinafter the "MoT"), and in the case of products with the Ministry of Industry and Trade;

- Cooperation with the GBPD;
- The sharing of information within expert groups;
- Feedback from organisations of persons with disabilities.

43. As part of its methodological activities, the MRD continuously publishes working aids for the application of requirements for the barrier-free use of buildings. Until 2014, this was mainly done using the Construction Administrative Practice, while since 2015 everything is published directly on the MRD website. In total, more than 100 contributions have already been published.

44. As part of the planned recodification of building law, the definition of all general construction requirements will be included in one law.

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

45. As regards the issue of accessibility standards and professional training in different areas of accessibility, see the answers to questions 8(a), 8(d), 8(e), 18(a), 18(c), 20(b), 21(a), 21(b), 24(b) and 25.

46. The conditions, content and scope of the provision of (personal) assistance, mediators, guides, readers and professional sign-language interpreters are regulated by the Social Services Act. The Social Services Act regulates the qualification requirements for professionals working within individual social services and the conditions for the accreditation of educational establishments and vocational education programmes intended for the education of workers in social services.

47. The skills and abilities to use signage and communication in Braille, to use augmentative and alternative methods of communication, as well as other accessible means, methods and forms of communication, such as pictograms and labels, are acquired by professionals as part of the prescribed education, or within further vocational education, depending on the target group of persons with disabilities. Regarding this issue, see the answer to question 7(a).

#### **Reply to paragraph 8 (c) of the list of issues**

48. The standardisation of the performance of social and legal protection of children (hereinafter “SLPC”), introduced on 1 January 2015, has contributed to increasing the accessibility of public-law protection of children provided to children with disabilities if they exhibit the characteristics of at-risk children according to Act No 359/1999 Coll., on social and legal protection of children (hereinafter the “SLPC Act”). Since that date, ASLPCs have been obliged to follow the quality standards regulated by the Decree in the performance of SLPC, which set the minimum legal requirements for the quality of SLPC to be met by ASLPCs. The standards include, inter alia, the requirement for barrier-free accessibility of offices that provide public protection of children where the meeting with the target group take place, not only at the municipal, but also regional and national levels, and the requirement to ensure easy orientation of persons with sensory disabilities in premises where public protection of children is provided. Another statutory requirement is to provide the services needed for dealing with persons with specific needs, including persons with disabilities. This includes, for example, the provision of interpreting services for the deaf. Fulfilment of these obligations is checked by the regional authorities, which inspect the quality of SLPC at the municipal authorities, and the MoLSA, which inspects the quality of SLPC at the regional authorities.

49. The statutory requirement for the quality of social services provision is implemented by providers through compliance with the quality standards that form an annex to Decree No 505/2006 Coll., implementing certain provisions of the Social Services Act and the obligations defined by the Act. Standard No 7 “Complaints about the quality or manner of social service provision” requires providers to draw up written internal rules for the submission and handling of complaints.

50. The division of competencies in the area of social services inspections is determined by the Social Services Act. The regional authority checks registration conditions and also the

illegal provision of services (without registration). The inspection of the provision of social services checks the fulfilment of the obligations of social service providers set out in the Social Services Act and the quality of social services provided. Such checks are carried out by the MoLSA, which may impose measures on the provider to eliminate deficiencies identified during such checks.

51. Activity of a school or school facility, the course, conditions and results of education of children, pupils and students, including those with special educational needs are checked and evaluated by the Czech School Inspectorate, performing independent inspection activities and evaluating the educational system in the field of education and school services.

52. Equal treatment and the prohibition of discrimination against persons with disabilities in the provision of tourism services is ensured primarily by Act No 634/1992 Coll., on consumer protection, which prohibits discrimination against consumers. Prohibited discriminatory grounds according to the administrative practice of the Czech Trade Inspection Authority as the competent supervisory authority and the established case-law in the administrative judiciary also include the prohibition of discrimination on the grounds of disability. In travel services, the subject of which is transport, the relevant regulations of the European Union (hereinafter the “EU”) also apply.

#### **Reply to paragraph 8 (d) of the list of issues**

53. In addition to the directly applicable European regulations, the accessibility of passenger transport is regulated by Act No 194/2010 Coll., on public services in passenger transport, which defines in its annex the standards of quality, safety and equipment of vehicles with information facilities for passengers and for the transport of persons with reduced mobility and orientation. Government Decree No 63/2011 Coll., on the establishment of minimum values and indicators of quality and safety standards and the method of their demonstration in connection with the provision of public passenger transport services, then sets out the parameters of the services ordered in relation to the accessibility of vehicles and their number. In 2015, the government regulation was tightened in the area of the number of vehicles used for services in public transport contracted by the State, regions and municipalities. The tightened conditions will be reflected in real life from 2020, when new contracts on public services in passenger transport will gradually come into force for most regional clients as well as for the State. The MoT envisages a further amendment to this government regulation in connection with the comments of organisations representing persons with disabilities.

54. In 2018, the MoT issued a methodological aid called the “Methodological Aid for the Provision of Public Passenger Transport Services Accessible for Persons with Reduced Mobility and Orientation” in cooperation with organisations representing persons with disabilities. The MoT has also prepared a special section “Accessibility” on its website, in which it is possible to find the most important information, examples of good practice and selected methodologies.

55. In the case of new construction or modernisation of transport infrastructure accessible to the public, the criterion of accessibility is also monitored in all modes of transport. Individual projects in the regions to ensure accessible transport can be financed from the resources of Operational Programme Transport II, or from the government’s Mobility for All programme.

56. In 2019, rail transport was provided by approximately 9,500 connections per day, of which more than 55% used barrier-free vehicles. This means that barrier-free transport is also reaching the regions. All carriers offer the possibility of ordering transport for passengers with disabilities, including appropriate assistance. In connection with the opening of the market of public services in rail passenger transport, the MoT is working on launching the Single Tariff System, one of the basic functionalities of which should be transport orders for persons with reduced mobility and orientation in one place even when using the services of multiple carriers.

57. All measures and legally regulated parameters and rules for ensuring accessible transport are implemented and applied throughout the CR, so it would be wrong to assume that the issue of ensuring accessibility is delayed in rural areas.

**Reply to paragraph 8 (e) of the list of issues**

58. Directive (EU) 2016/2102 of the European Parliament and of the Council of 26 October 2016 on the accessibility of the websites and mobile applications of public sector bodies was fully transposed into the Czech legal order and this transposition was notified by the European Commission on 18 April 2019.

59. Act No 99/2019 Coll., on accessibility of websites and mobile applications, and the European Accessibility Directive aim to make websites and mobile applications of public sector entities more accessible across the EU through common accessibility requirements. This is particularly the case for accessibility for persons with disabilities, who are often disadvantaged when working with them due to health-related limitations. Websites and mobile applications must be perceptible, manageable and understandable for their users.

60. To meet the technical requirements for accessibility of websites and mobile applications, legislation at both EU and national level uses the harmonised standard EN 301 549 V2. 1.2 (2018-08) and the internationally recognised Web Content Accessibility Guidelines 2.1 standard.

**Reply to paragraph 8 (f) of the list of issues**

61. Act No 134/2016 Coll., on public procurement, stipulates that if the subject-matter of a public contract is intended for use by persons, the contracting authority shall take into account the accessibility of the subject-matter of the public contract to persons with disabilities, unless objective circumstances prevent this.

62. Where mandatory accessibility requirements for persons with disabilities are regulated by an EU regulation (Directive (EU) 2019/882 of the European Parliament and of the Council of 17 April 2019 on the accessibility requirements for products and services), the contracting authority shall determine the relevant technical conditions by reference to this regulation.

**Reply to paragraph 8 (g) of the list of issues**

63. Commission Regulation (EU) No 1300/2014 on the technical specifications for interoperability relating to accessibility of the Union's rail system for persons with disabilities and persons with reduced mobility is applied in the CR. Some accessibility conditions have even been tightened for the modernisation and construction of railway stations and stops, namely through Act No 266/1994 Coll., on railways, Decree No 177/1995 Coll., issuing the construction and technical rules of railways (an amendment to the Construction and Technical Code of Railways extended the possibility of the construction of level crossings for passenger access to the platform), the barrier-free decree, and a number of technical standards related to the railway-infrastructure accessibility.

64. In addition to technical standards, the operator of stations on the railway network in the CR (Railway Administration, State organisation) in cooperation with organisations of persons with disabilities issued an internal directive and its graphic manual (Directive No 118 Orientation and Information System in Railway Stations), which addresses the issue of passenger orientation at stations and unifies orientation and information systems at stations.

65. As far as the accessibility of transport structures is concerned, 114 station-building reconstructions are currently under way and planned until 2021, which will improve the barrier-free level of 79 buildings and add some missing elements for people with reduced mobility and orientation.

66. New and upgraded vehicles meet the requirements of Commission Regulation (EU) No 1300/2014 on technical specifications for interoperability relating to the accessibility of the Union rail system for disabled persons and persons with reduced mobility and orientation. All carriers offer assistance during transport by prior arrangement.

### Reply to paragraph 9 of the list of issues

67. The MoI addresses the issue of the specifics of persons with disabilities, including persons with hearing impairments, in emergencies on a long-term and systematic basis, and at several levels.

68. In 2019, the MoI published “Assisting Persons with Disabilities in the Event of Disaster” with the subtitle “European Network for Psychosocial Crisis Management”. The publication is intended for members of the Fire Rescue Service of the CR (hereinafter the “FRS CR”), the Police of the CR, medical staff and organisations of persons with disabilities to improve their training for working with persons with disabilities and mutual cooperation. This material is freely downloadable in electronic form at: <https://www.mvcr.cz/clanek/ministerstvo-vnitro-vydalo-prirucku-asistence-lidem-sdisabilitou-pri-katastrofach.aspx>.

69. In the field of European cooperation, the MoI participated in two projects supported by the European Commission focused on cooperation with persons with hearing, visual, mental or motor disabilities during disasters, namely the project “EUNAD” in 2013–2014 and “EUNAD – IP” in 2016–2017. The final outputs included, for example, the publication “Assisting Persons with Disabilities in the Event of Disaster” and the development of an expert network. Further information can be found on the project website: <http://eunad-info.eu/home.html>.

70. In 2018, the Police of the CR prepared educational videos and a methodology for working with particularly vulnerable victims, including interaction with persons with disabilities. For the deaf, the Police of the CR operate an emergency line on phone number 603 111 158, to which deaf persons can send SMS messages. Awareness has been raised about the functioning of the hotline within the deaf community, and relevant organisations of persons with disabilities.

71. The issue of persons with disabilities, including those with hearing impairment, in emergencies is part of the training of all members of the FRS CR. The topic of communication with selected groups of persons with disabilities is already included in the initial professional training of members of the FRS CR as part of the psychology classes, and also appears in special courses and instructional and methodological activities organized by the psychological service of the FRS CR. Members of the FRS CR are also familiarised with the document “Ten Commandments for Communication with Patients with Autism Spectrum Disorder” and take into account the methodological recommendations from this document in their activities.

72. At present, the technology in FRS CR operational and information centres enables the reception of SMS messages from persons who use a special method of emergency call or whose rescue must be carried out in accordance with special rules and procedures. Persons with disabilities can apply to be included in this list.

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

73. Due to the adoption of the Act No 89/2012 Coll., the Civil Code (hereinafter the “Civil Code”), which became effective on 1 January 2014 and introduced a new concept of measures in the event of violation of an adult’s legal capacity, the following statistics are divided according by the periods 2009–2013 and 2014–2018. It should be clarified that these figures represent the number of decisions, not the number of persons. There could be more than one decision pertaining to one person.

<i>Legal capacity (2009-2013)</i>					
<i>Decisions</i>	<i>2009</i>	<i>2010</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>
Decision on deprivation of the participant’s legal capacity	2 299	2 045	2 171	2 254	2 273
Another result of proceedings on deprivation of the participant’s legal capacity	945	949	992	1 127	1 185

<i>Legal capacity (2009-2013)</i>					
<i>Decisions</i>	<i>2009</i>	<i>2010</i>	<i>2011</i>	<i>2012</i>	<i>2013</i>
Decision on limitation of the participant's legal capacity	770	816	860	938	1 342
Another result of proceedings on limitation of the participant's legal capacity	127	117	137	139	168
Decision on restitution of the participant's legal capacity	65	45	59	51	77
Another result of proceedings on restitution of the participant's legal capacity	169	172	117	143	149
Decision on the change of a participant's legal capacity (from a participant deprived of legal capacity to a participant with limited legal capacity and vice versa)	x	110	128	129	162

*Source:* Ministry of Justice (hereinafter the "MoJ").

<i>Limitations and restitutions of legal capacity (2014-2018)</i>					
<i>Decisions</i>	<i>2014</i>	<i>2015</i>	<i>2016</i>	<i>2017</i>	<i>2018</i>
Limited	2 683	5 578	4 902	4 104	4 077
change of limitation	865	4 543	6 017	4 456	2 325
restitution	222	689	1 243	755	242
limitation period extended	307	1 793	2 324	1 849	6 715
another result	1 702	2 377	2 584	2 326	2 328

*Source:* MoJ.

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

74. The MoJ monitors and evaluates statistical data concerning court decisions in the given field. Since 2014, when the Civil Code became effective, statistical data have been processed concerning court decisions on assistance in decision-making, representation of a household member, and guardianship with and without limitation of legal capacity. The statistics also monitor judicial interference with the right to marry and the right to vote.

75. The legal regulation of legal capacity concerning persons with disabilities in the Civil Code is based on the fact that the mildest and least restrictive measures should always be used, especially the measure of assistance in decision-making, and that the limitation of legal capacity is an instrument of the last resort. The previous findings from statistical data, expert meetings and seminars show that the relevant stakeholders are still learning to deal with new institutes in real life. However, between 2014 and 2018, a total of 12,582 cases approved some of the above milder and less restrictive measures, which suggests that without the existence of legislation in the new Civil Code, the legal capacity of the persons concerned would have most likely been limited in all these cases.

76. At present, no amendment to the Civil Code is being prepared in the area of limitation of legal capacity, with the exception of the following proposed abolition of the possibility of representation by a guardian in determining and denying parenthood [see the answer to question 19(a)].

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

77. Regarding the issue of removing legal obstacles related to the right to vote and restricting the right to marry, see the answers to questions 19(a) and 24(a).

**Reply to paragraph 10 (d) of the list of issues**

78. The MoJ monitors, analyses and evaluates the use of new measures in the event of an intervention into an adult's ability to act in legal capacity in accordance with the Civil Code. The CR is not currently preparing any changes to the legislation in this area.

79. The current wording of the Health Services Act is considered sufficient by the MoH from the point of view of guaranteeing and exercising the rights of persons with disabilities as patients, and there is no need to make any fundamental legislative changes. The MoH received suggestions from the Czech National Disability Council, but the current legislation foresees their content, and does not prevent or prohibit them. Therefore, the MoH considers it sufficient that if mistakes occur in the area of patients' rights, they should be addressed through a methodological recommendation from the Ministry.

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

80. Access to justice for persons with disabilities is dealt with at the level of laws, subordinate regulations and case-law. Both the Constitution and the Charter enshrine that all parties are equal in proceedings, and they also enshrine the right to an interpreter and the right to judicial protection.

81. Civil proceedings, administrative proceedings and criminal proceedings are based on the constitutional principle of equality of participants in the proceedings. A person who has the capacity to have rights and obligations pursuant to Act No 99/1963 Coll., the Code of Civil Procedure (hereinafter the "Code of Civil Procedure"), has the capacity to be a party to the proceedings. If a person's legal capacity is limited, their legal rights are exercised by their legal representative, or a court-appointed guardian.

82. A judgment of the Constitutional Court deleted, with effect from 20 May 2011, a provision of Act No 150/2002 Coll., the Code of Administrative Procedure, which excluded from procedural capacity all persons not having full legal capacity. This provision was found by the Constitutional Court to be in conflict with, inter alia, Articles 12 and 13 of the Convention. Procedural capacity in matters of administrative justice will thus be retained even by a person who is partially limited in their legal capacity, but whose factual abilities enable them to participate fully in proceedings before administrative courts.

83. A person who has a legal personality, which a person has from birth to death, may be a party to the proceedings. Procedural capacity, as the ability to act independently in court, is limited by the extent of a person's legal capacity. Therefore, persons with disabilities may be a party to the proceedings. If they are unable to act independently in court proceedings, they have the right to choose an authorised representative in addition to the court-appointed guardian. E.g. persons with limited legal capacity have the right to file motions for revocation or change of a decision to limit their legal capacity pursuant to Act No 292/2013 Coll., on special judicial proceedings (hereinafter the "Act on Special Judicial Proceedings"). A court is obliged to acquaint the persons with disabilities with the content of the decision. Persons with disabilities may choose a trustee or an assisting person for the proceedings. Furthermore, persons with disabilities have the right to be heard in the proceedings, and for this they may use the right to be assigned an interpreter; such interpreter's services are provided free of charge.

84. Act No 155/1998 Coll., on communication systems for the deaf and deafblind, enshrines the right of persons with hearing impairments and deafblind persons to choose their preferred communication system and to ensure simultaneous transcription for these persons.

85. The Constitutional Court ruled in its judgment that in the event a person with a disability participates in court proceedings, the general courts are obliged to pay increased attention in general and pay special attention to ensure this person can fully exercise their rights in the proceedings as well as other participants in the proceedings. At the same time, it is necessary to take into account the nature of the disability of the specific person concerned and to possibly take suitable compensatory measures. For example, in the case of persons with a mental disability, the minimum appropriate measure will generally be the appointment of a lawyer to ensure that their rights are properly protected.

86. Physical access to court buildings is also important for access to justice. Technical requirements ensuring the use of buildings by persons with disabilities are regulated by the barrier-free decree.

87. If persons with disabilities are in the position of an accused, their disability may, in accordance with Act No 141/1961 Coll., the Code of Criminal Procedure (hereinafter the “Code of Criminal Procedure”), establish a reason for mandatory counsel. These persons will thus be provided with professional counsel by a lawyer. The assessment of these grounds is entrusted to a court and in the pre-trial proceedings to the public prosecutor, whose reasoning is based on individual circumstances affecting the accused’s ability to defend themselves properly.

88. Under the conditions set out in Act No 45/2013 Coll., on victims of crime (hereinafter the “Act on Victims of Crime”), persons with disabilities may be considered particularly vulnerable victims. The law also considers a person to be a particularly vulnerable victim if they are “affected by a physical, sensory, mental or psychological disability, if this disability may, in comparison with others, hinder their full and effective participation in society”. The Act on Victims of Crime grants special rights to particularly vulnerable victims, including in particular the right to free professional assistance, the right to be prevented from coming into contact with a person they have identified as the offender, with a suspect or with a person against whom criminal proceedings are being conducted.

89. Particularly vulnerable victims are also granted the right to legal assistance provided free of charge by a trustee, regardless of whether the victim as the damaged party has sufficient resources to cover the costs of recruiting the trustee, regardless of whether the victim has claimed in accordance with the law their right to compensation for damage or non-pecuniary harm or to the issue of unjust enrichment.

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

90. Regarding the provision of materials, information and communication in all court proceedings, the CR complies with the established obligations as to the accessibility of public administration websites, provides information pursuant to Act No 106/1999 Coll., on free access to information, and also publishes parts of insolvency files on the website of the public insolvency register: (<https://isir.justice.cz>).

91. The MoJ continues to work on an electronic version of court files (“eSpis”) and the associated remote viewing of the electronic file. The easy reading function of web pages for the visually impaired is also being extended. The MoJ prefers the creation and testing of accessible online services which meet the requirements of Act No 99/2019 Coll., on the accessibility of websites and mobile applications as well as the Web Content Accessibility Guidelines standard. It is currently preparing an electronic Database of Decisions and Case-Law of District, Regional and High Courts in the CR, which will be accessible by persons with disabilities.

92. In addition to efforts to digitise and facilitate remote access for persons with disabilities, the CR also has a statutory obligation for courts not only to deliver court decisions to participants, but also to take other appropriate measures so that the person can access and have available the court decision in a suitable form.

93. All victims have the right to access information relating to the case in which they were the victims of a crime. This information is provided to them by the police authority, the public prosecutor, another public authority or a healthcare facility, as well as by entities in the register of providers of assistance to victims of crime. The victim must be informed in a comprehensible manner, taking into account their age, intellectual and volitional maturity, literacy and state of health, including their mental state.

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

94. Pursuant to Act No 85/1996 Coll., on advocacy, a lawyer must, inter alia, meet the condition of having full legal capacity. Persons with disabilities may be a lawyer only if their disability does not affect their full legal capacity. The requirement for having full legal capacity is also imposed on judges and lay judges in accordance with Act No 6/2002 Coll.,



on courts, judges, lay judges and the State administration of courts (Act on Courts and Judges). In the event of limitation of a judge's legal capacity, their position will be terminated, while a lawyer will be removed from the list of lawyers. A motion to initiate proceedings or a resolution to initiate proceedings to limit or restore the legal capacity of a lawyer, notary, bailiff, judge, public prosecutor, insolvency administrator, registered mediator, expert or interpreter will be delivered without delay by the court to the Minister of Justice and the relevant chamber.

95. Employees of the Police of the CR, the Prison Service of the CR, but also employees of the General Inspectorate of Security Forces and the Security Information Service as employees of the security forces performing service must not only have full legal capacity, but must also meet requirements in the area of medical and personal fitness assessed by a psychologist, and physical fitness in accordance with Act No 361/2003 Coll., on the employment of members of the security forces. Thus, persons with disabilities will most likely not meet the legal preconditions for the performance of this service.

#### **Reply to paragraph 11 (d) of the list of issues**

96. The issue of persons with disabilities is part of programmes and educational events intended for judges and public prosecutors, judicial and legal trainees and other higher professional administrative apparatus of courts and public prosecutors' offices. Seminars were held on the topic of disability and rights arising from the Convention, especially the right to support and safety in legal proceedings, as well as on communication with selected groups of persons with disabilities.

97. The issue of disability was also an accompanying part of educational events carried out in the field of criminal justice, seminars on juvenile delinquency, seminars on the Labour Code and educational events related to issues such as racial discrimination, human trafficking, domestic violence, extremism, gender policies, cybercrime, etc.

98. Part of education on disability issues is to increase the legal awareness of employees of the Prison Service of the CR in non-discrimination due to disability or unfavourable state of health of prisoners and training on awareness about limited mobility and other consequences of disability.

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

99. The right to personal liberty is guaranteed by the Charter. According to the Charter, no one shall be prosecuted or deprived of their liberty except on the grounds and in the manner provided for by law.

100. The law also stipulates in which cases a person may be taken or kept in a health institution or in a social services facility without their consent. In the case of detention in a health institution without the consent of the person concerned, the Charter provides that such a measure must be notified to a court within 24 hours, and the court shall decide about such detention within seven days. The rights of the persons concerned are protected in proceedings on the declaration of admissibility of being taken and held in a health institution and in proceedings on the declaration of inadmissibility of being held in social services facilities pursuant to the Special Judicial Proceedings Act, which became effective on 1 January 2014.

101. A health institute is obliged to notify a court within 24 hours of the receipt of any person placed therein without their written consent. If written consent is revoked or if a person in a medical facility is restricted in their free movement or contact with the outside world during treatment, the health institute is obliged to notify a court within 24 hours. The court will then issue an order to initiate proceedings. If the health institute fails to notify a court, the detained person or their legal representative may file a motion to initiate proceedings.

102. If a person who is incapable of terminating a contract for the provision of residential social services expresses serious disagreement with their provision, the social service provider is obliged to notify a court within 24 hours. The court shall issue an order to initiate proceedings. If the provider fails to notify a court, the placed person, their legal representative,

or any other person, may file a motion to initiate proceedings. The court is obliged to hear the case and decide within 45 days from the date of commencement of the proceedings.

103. The CR emphasises that the Criminal Code does not allow anyone to be deprived of their liberty due to an actual or perceived disability or disorder. A person may only be deprived of their personal liberty if they have committed a criminal offence or, in the case of persons without full legal capacity, an otherwise criminal offence. If all legal conditions are met, a protective measure may be imposed on these persons. In criminal proceedings, a court may impose protective measures not only on criminally liable persons, but also on persons who are not criminally liable (either for insanity or because they are too young). Imposed protective treatment may last a maximum of two years, unless a court decides to extend it before the end of this period (treatment may thus be extended for a maximum of another two years). The imposition of a protective measure may be contested through ordinary and extraordinary remedies.

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

104. Persons with disabilities who have been accused of a criminal offence have the same procedural rights in criminal proceedings as all other accused persons. The principle of the presumption of innocence fully applies to all these persons without distinction.

105. As part of the exercise of the right of defence, the Code of Criminal Procedure grants the accused persons with disabilities, as well as any other accused persons, a number of rights. The accused has the right to comment on all the facts of which they are accused, as well as on the evidence about them, but they are not obliged to testify. The accused has the right to testify in their mother tongue, or another language they speak. If the accused does not speak Czech, an interpreter will be used.

106. The accused has the right to consult a lawyer even during acts carried out by law enforcement authorities. The accused also has the right to request that they be heard in the presence of their lawyer and that the lawyer participate in other acts of the preparatory proceedings. If the accused is in custody or serving a custodial sentence, they may speak to a lawyer without the presence of a third party.

107. To ensure that persons with disabilities have the right to the same procedural treatment, protection and guarantees provided for all within the criminal justice system, see also the answers to questions 11(a) and 11(b).

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

108. Regarding ensuring that persons with disabilities have the right to liberty and security of their person on an equal basis with others, and regarding the measures taken to review and provide data on all cases where persons with disabilities have been deprived of their liberty in mental health facilities, including with regard to on the possibility of appeal, see the answer to question 12(a).

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

109. Pursuant to the Social Services Act, measures restricting the movement of persons may not be used in the provision of social services. Exceptions are only made where there is a direct threat to their health and life or the health and life of other persons, and only under the conditions stipulated by law and only for the time strictly necessary.

110. The social services provider is obliged to provide social services in such a way that prevents situations in which it is necessary to apply measures restricting the movement of persons. The provider is obliged to inform the client's legal representative or guardian or another designated person about the use of the restrictive measure without undue delay.

111. The social services provider is obliged to keep records of the use of measures restricting the movement of persons, and to enable the relevant client, their legal representative or guardian, other designated persons, the founder of the facility, doctors, members of the inspection team during inspections of the provision of social services and the ombudsman, to view these records.

112. The Health Services Act defines individual types of restraints and sets out the conditions for their use. Restraints may only be used to avert imminent danger to the life, health or safety of the patient or other persons, only for as long as is necessary and only after the unsuccessful application of a milder procedure. The least restrictive means must always be chosen. The use of a restraint must always be ordered by a doctor. Only in urgent cases may its use be ordered by another healthcare professional, but they must immediately inform a doctor, who will confirm the justification of the restraint.

113. In 2018, the MoH issued a new methodological recommendation for the use of restraints in medical facilities, which expands and specifies the legal provisions. It prohibits the use of restraints as prevention or punishment or systemic measures in the event of a shortage of staff, etc. The methodological recommendation is based mainly on the standards and recommendations of the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment. It is binding for all hospitals directly managed by the MoH and it serves as a recommended and unifying procedure for other medical facilities.

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

114. Since 1 August 2016, social services providers have been obliged to notify a court within 24 hours if a client who is unable to terminate a contract for the provision of a residential social service (a contract concluded on their behalf by a guardian or the competent municipal authority) expresses serious disagreement with the provision of a residential social service. The provider is also obliged to keep records of persons to whom it provides residential social services on the basis of such a contract and of cases where the client expresses serious disagreement with the provision of a residential social service.

115. Pursuant to the Act on Special Court Proceedings, the Public Prosecutor's Office may intervene in initiated proceedings in matters of pronouncing the admissibility of taking or keeping a person in a health institution or declaring the inadmissibility of detention in a social services facility. In these cases, the Public Prosecutor's Office may also file a motion to initiate proceedings.

116. The Ombudsman is also responsible for supervising the provision of social services. The Ombudsman carries out systematic visits to places where persons deprived of their liberty by public authority or as a result of dependence on care are or could be located, in order to strengthen the protection of such persons. Such places are also considered to be social services facilities and other facilities providing similar care, medical facilities and SLPC facilities.

117. Act No 273/2008 Coll., on the Police of the CR (Police Act) contains basic legal guarantees for all persons deprived of personal liberty, i.e. also for persons with disabilities. The cited Act enshrines the obligation of police procedures to comply with the principle of proportionality (a police officer and a police employee are obliged to ensure that no person suffers unjustified harm, and to proceed in such a manner that any interference with the rights and freedoms of persons does not exceed what is necessary to achieve the purpose pursued by the action). Pursuant to the Police Act, anyone may draw attention to shortcomings in the activities of the police, or to the fact that a police officer or police employee has committed conduct that fulfils the characteristics of a crime, or administrative or disciplinary offence.

118. Persons restricted in personal liberty by the Police of the CR who wish to report ill-treatment by police officers may contact the General Inspectorate of Security Forces, which is completely independent of the Police of the CR and thus provides guarantees defined by the case-law of the European Court of Human Rights on effective investigations (e.g. the decision in *Kummer vs. the Czech Republic*, No 32133/11).

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

119. The CR rejects the claim that corporal punishment is used with children as an educational tool in homes and facilities for non-institutional care and in domiciliary services. Prohibition of the use of corporal punishment with children is a mandatory part of the internal regulations of all facilities in which children are located.

120. Although corporal punishment as such is not prohibited in the CR, the Civil Code regulates the educational tools that may be used only in a form and extent that is proportionate to the circumstances, that do not endanger the child's health or development and must not affect the child's human dignity.

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

121. The system of public protection of children provided by an ASLPC, which also includes children with disabilities, focuses on child victims of violence and abuse, in the case of children:

- Against whom a crime has been committed endangering life, health, freedom, human dignity, moral development or property, or where it is suspected that such an act has been committed;
- Who are threatened by violence between parents or other persons responsible for the upbringing of the child or by violence between other persons.

122. As part of the standardisation of SLPC, the specialisation of ASLPC staff was introduced to the agenda of protection of abused and mistreated children, where teams of workers performing public law protection of children include a social worker who specialises professionally in this area and deals with cases of child victims of violence and abuse, including commercial abuse. ASLPC staff then plan, manage and coordinate child protection measures together with the child, their close relatives, and providers of specialised services.

123. The qualified facts of criminal offences falling into the category of exploitation, violence and abuse are regulated in the Criminal Code, which also stipulates sanctions for committing such criminal offences.

124. Under the Victims of Crime Act, victims of crime have the right to professional assistance, which includes psychological services, social counselling, legal assistance, the provision of legal information and the opportunity to participate in restorative programmes. Victims also have the right to privacy, protection from secondary harm and the right to be accompanied by a confidant of their choice. Under the stipulated conditions, the victim also has the opportunity to receive financial assistance. With effect from 1 April 2017, all categories of particularly vulnerable victims have, under certain conditions, the right to be represented free of charge.

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

125. Victims of sexual and domestic violence have a number of social services at their disposal. These are mainly intervention centres, asylum houses, and professional social counselling. Through the intervention centres, a person at risk from another person's violent behaviour is offered, free of charge, assistance immediately following the removal of the abuser from the common dwelling. Asylum houses provide temporary residential services to people in an unfavourable social situation associated with the loss of housing. They can specialise in the target group of people at risk of domestic violence and can have a secret address. Professional social counselling can then be provided, inter alia, in counselling centres for victims of crime and domestic violence. Counselling centres mediate contact with the social environment, provide socio-therapeutic activities and assistance in exercising rights and in caring for personal matters.

126. The issue of violence in social services is also part of the "Life Like Any Other" project. In 2019 a recommended procedure for addressing and preventing violence in social services was drafted. The project also includes an analysis of violent behaviour against persons with disabilities in residential social services, which examines the severity of the risk of violence against women and men with disabilities and evaluates how the issue of violence is addressed, including taking into account the gender dimension.

127. To ensure that persons with disabilities, including children with disabilities living in institutions, have mechanisms for filing notifications and complaints, as well as remedies, see the answer to questions 12(a) and 13(b).

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

128. Every year, the MoLSA evaluates statistical indicators concerning children kept in ASLPC records. These data are published in the Annual Report on the Performance of SLPC on the MoLSA website, at <https://www.mpsv.cz/cs/7260>. The report also shows the numbers of children whose situation was addressed by the ASLPC, where abuse, misuse and/or neglect of the child were found. Through statistics, data on the number of children with disabilities are also specifically monitored. The tables below show the data for 2011-2018.

**Number of children registered with the ASLPC in whom physical and mental abuse and sexual abuse were found**

Year	Physical abuse		Mental abuse		Sexual abuse		Neglect	
	Total	of which children with disabilities	Total	of which children with disabilities	Total	of which children with disabilities	Total	of which children with disabilities
2011	738	10	953	13	806	12	4 103	36
2012	836	9	952	5	813	7	4 869	68
2013	859	7	1 067	4	888	17	4 663	96
2014	787	16	1 171	7	932	14	5 484	52
2015	686	19	1 068	15	745	9	6 862	55
2016	626	9	987	10	780	14	6 934	44
2017	635	13	909	10	729	2	6 528	64
2018	531	8	966	16	720	8	6 808	68
2019	573	16	897	11	751	14	6 910	85

Source: MoLSA.

**Number of children registered with an ASLPC in whom commercial abuse in the form of child pornography and prostitution was detected**

Year	Child pornography		Child prostitution	
	Total	of which children with disabilities	Total	of which children with disabilities
2011	33	0	9	0
2012	33	0	22	0
2013	33	0	17	0
2014	87	2	17	1
2015	57	2	15	0
2016	66	0	23	1
2017	119	1	9	0
2018	151	2	2	0
2019	114	0	7	0

Source: MoLSA.

\* Both these tables present the numbers of children registered with an ASLPC in whom abuse, misuse and neglect were found.

**Reply to paragraph 14 (d) of the list of issues**

129. On 6 May 2019, the Government of the CR approved the Action Plan for the Prevention of Domestic and Gender-Based Violence for 2019–2022, which follows on from the Action Plan for the Prevention of Domestic and Gender-Based Violence for 2015–2018. The Action Plan also follows up on the Government Strategy for Gender Equality in the CR for 2014–2020.

130. In addition to domestic violence, the above Action Plan also focuses on other forms of gender-based violence, as defined by relevant international standards. According to available statistical data, in the context of the CR this mainly means rape, sexual abuse or dangerous stalking. The main measures of the Action Plan include ensuring the availability of specialised services for persons at risk of domestic and gender-based violence and their children, ensuring the availability of programmes for working with the perpetrators of such violence, piloting specialised services for victims of sexual violence or training of employees in professions who most often come into contact with at-risk persons. In the implementation of measures of the Action Plan, the position of persons facing multiple discrimination is taken into the account, including persons with disabilities.

#### **Reply to paragraph 15 of the list of issues**

131. The conditions for performing sterilisation are regulated by Act No 373/2011 Coll., on specific health services (hereinafter the “Act on Specific Health Services”). This law defines sterilisation and sets the conditions for its implementation, and hence also the right to free and informed consent. In the CR, sterilisation may not be performed without informed consent. Persons requesting sterilisation (including persons with disabilities, for medical or non-medical reasons) must always be fully informed about the nature of the medical procedure, its permanent consequences and possible risks in accordance with the cited law. They sign a ‘fully informed consent form’ and the prescribed time between the informing and the granting of consent stipulated by law is observed.

132. The UN Committee on the Elimination of Discrimination against Women (CEDAW), in its decision of 16 July 2019 in the case of J. D. and others v. the Czech Republic (CEDAW/C/73/D/102/2016), concluded that the notification concerning the sterilisation of six Roma women between 1982 and 2001 was unacceptable due to the failure to exhaust domestic remedies. However, the Government of the CR is aware that CEDAW limited its assessment of these individual notifications to assessing their acceptability, and thus that the final recommendations issued in the framework of administrative control of compliance with the obligations under the Convention are not affected by this decision. In this context, a group of deputies of the Parliament of the CR submitted a draft act on 27 September 2019 on the provision of a lump sum to sterilised persons.

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

133. The objectives, priorities and measures for social services in the CR are set out in the National Strategy for the Development of Social Services for the Period 2016–2025. The first objective is defined by Strategic Objective A: Ensure the transition from the institutional model of care for persons with disabilities to the support of people in their natural environment, and by Specific Objective A.1: Create and implement a plan for the transition from institutional care to support in the community with the help of field, outpatient and residential community-type social services. The Inter-departmental Group for the Deinstitutionalisation of Social Services was set up to meet this objective. Its main task was to draw up the Action Plan for Deinstitutionalisation for the Period 2020–2022). The draft action plan was completed at the end of 2019. The Action Plan is intended to set the conditions for the transition from the institutional model of care and to enable the process of deinstitutionalisation and transformation to be monitored. However, the whole process of transformation of residential social services depends on the possibilities of both the State budget and the budgets of self-governing units. Therefore, it is not currently possible to determine the exact date by which the process of transformation of institutional facilities in the CR will be completed.

134. To support the transformation of social services and the transition of institutional facilities, the MoLSA implements specific projects: “Support for the Transformation of Social Services” project (2009–2013) and “Transformation of Social Services” project (2013–2015). A total of 47 social services facilities were supported in both projects, 10 of which were completely closed at the end of 2015, and services are provided to their clients in community social services in accordance with their wishes and needs. The MoLSA is currently implementing the “Life Like Any Other” project (2016–2020), the main objective of which is to support the offer of quality, accessible and sustainable community social

services for persons with disabilities, especially through the transformation of institutional care services into community services. Within the project, “methodology day” events, discussion meetings and seminars took place between 2017 and 2019, the participants being mainly employees of regional and municipal authorities, social workers, workers in social services and persons with disabilities. Information about these projects is available at <http://www.trass.cz> and on Facebook (<https://www.facebook.com/trass.cz>).

135. The number of new community-type social services and thus also the number of clients who have undergone transformation has long been monitored by the MoLSA, but only in 2015 did this monitoring become part of the official regime of monitored statistical data. From 2015 to 2018, a total of 929 clients left residential services for a natural environment and a total of 700 clients left for community-type residential social service in the same period. From 2015 to 2018, a total of 266 clients left the service of homes for the elderly to a residential community social service and a total of 1,803 clients to their natural home environment. During the same period, 272 clients left the service of special-regime homes to a residential community social service and 1,316 clients to their natural social environment.

136. An important part of the transformation is the support and creation of sheltered-housing social services. The number of sheltered-housing social services and their capacity has been constantly increasing since 2015. While in 2015 there were 196 sheltered-housing services with a total capacity of approximately 3,600 places, in 2019 there were already 210 services with a capacity of about 4,100 places.

137. The CR aims to reduce the number of children growing up in institutional care, including children with disabilities. To achieve this objective, the government document National Strategy for the Protection of Children’s Rights – Right to Childhood (action period 2012–2018) also contained sub-objectives that included measures to support the deinstitutionalisation of care for at-risk children.

138. Changes in the Civil Code and the SLPC Act relating to court decisions and ASLPC procedures, which in the CR ensure the public protection of children and the placement of children in care in residential facilities, including children with disabilities, have contributed to reducing the number of children placed in residential facilities. When ordering institutional care, a court is obliged to consider whether it is not appropriate to prioritise entrusting the child to the care of a person. Institutional care may be ordered for a maximum of three years with the possibility of extension. At least once every six months, a court is obliged to review whether the reasons for ordering institutional care persist and whether it is possible to secure foster care for the child. The property situation and housing need of the family may not be used as the reason for filing a proposal for the adoption of measures interfering with parental responsibility for a child.

139. In the execution and implementation of measures for the protection of the child, ASLPC workers are obliged by law to provide parents or other persons responsible for upbringing with assistance that will enable the child to remain at home in the care of the child’s own parents. To support the family, tools for social work with the family have been introduced in the field of public protection of children (evaluation of the situation of the child and their family, individual child protection plan and case conferences – multidisciplinary cooperation in resolving cases of at-risk children).

140. For children with disabilities, the fact that children can also be placed in children’s homes for children under three years of age and in homes for persons with disabilities based on an agreement between the child’s legal representatives and the institutional care provider for an indefinite period without a court decision remains problematic. However, the provider is obliged to notify an ASLPC of children who, at the request of their parents or other persons responsible for their upbringing, are repeatedly placed in a facility providing continuous childcare, or if their placement lasts longer than six months.

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

141. Support for the transformation of residential services for persons with disabilities takes place, inter alia, within the “Life Like Any Other” project through methodological and educational events (methodology day events, consultations, discussion meetings, seminars), round tables, educational activities and analysis.

142. From October 2016 to June 2019, the MoLSA implemented an individual project called “Systemic Development and Support of Social and Legal Protection Instruments”, financed from OPE funds. The aim of the project was to support the networking of services for work with children and families cooperating with an ASLPC with an emphasis on systemic approach, continuity and coherence of services and their preventive character. Another aim was to teach regions and municipalities, in cooperation with service providers and with the involvement of the target groups themselves, to plan, implement and interconnect services for children and their families.

143. Since October 2018, the MoLSA has implemented another individual project called “Support for Systemic Changes in the Area of Care Services for At-risk Children, Young People and Families in the CR”, financed from OPE funds. The aim of this project is to reduce the number of children placed in institutional care, including children with disabilities.

144. In Section 4.6 Independent Living, the National Plan contains measures aimed at supporting the independent living of persons with disabilities in their natural environment. These measures include the support and prioritisation of outpatient and outreach social services, including community residential services, continuing support for the transformation of residential social services, revision of the framework for the provision and use of assistive technologies and aids for persons with disabilities and related services, supporting the education and personal development of workers operating in the social services system, and supporting facilities for the performance of social work in municipalities, especially with special regard to the needs of persons with disabilities. Information on the implementation of these measures is included in the answers to the individual questions.

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

145. Financial support for social services enabling clients to stay in their natural environment is determined both through the priorities of the MoLSA subsidy procedures for the regions and Prague to ensure the availability of social services for individual years, as well as through the priorities of subsidy procedures for social services with supra-regional and nationwide scope for individual years.

146. Support for services enabling persons with disabilities - to remain in their natural environment is also one of the priorities of the MoLSA investment programme “Development and Renewal of the Material and Technical Base of Social Services”. Support is thus focused on the development of outreach and outpatient social services enabling clients to stay in their natural environment, and on the possibility of acquiring assistive and assisting technologies.

147. The standardisation of performance of the SLPC introduced on 1 January 2015 contributed to the support of an independent way of life for young persons with disabilities who leave institutional facilities or after completing their education or training for future occupations. One of the quality requirements is that the ASLPC focuses intensively on the preparation of children over 16 years of age in alternative care, both institutional and foster care, or in the care of curators, for independent living after leaving such alternative care. This means that ASLPC staff focuses on topics such as career choice, further professional training, employment, allowances and social benefits, independent living, housekeeping, finance management, relationships, sexuality and parenthood.

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

148. Act No 329/2011 Coll., on providing benefits for persons with disabilities (hereinafter the “Act on Providing Benefits for Persons with Disabilities”), and Decree No 388/2011, on the implementation of certain provisions of the Act on Providing Benefits for Persons with Disabilities (hereinafter “Decree No 388/2011”), became effective on 1 January 2012. The Act on Providing Benefits for Persons with Disabilities regulates the provision of the allowance for mobility and the grant for special aid. The grant for special aid supports the acquisition of a wide range of products and technologies (vehicle, stair platforms, guide dog, disability-related vehicle retrofitting, digital magnifiers, special software, etc.).

149. The Act on Providing Benefits for Persons with Disabilities also regulates the granting of a card for persons with disabilities (TP – severe disability, ZTP – extraordinarily severe disability, and ZTP/P – extraordinarily severe disability requiring a guide), to which a large



number of claims and benefits are tied. A person over the age of one with a long-term physical, sensory or mental disability that substantially limits their mobility or orientation, including persons with autism spectrum disorder, is entitled to a TP, ZTP or ZTP/P card.

150. Persons with disabilities can also obtain compensatory and rehabilitation aids from the public health insurance system. These are medical devices such as electric and mechanical wheelchairs, compensatory aids for the hearing impaired, prostheses and orthoses.

151. In the CR, the availability of medical devices is not limited by the patient's place of residence. Expensive medical devices for immobile patients (wheelchairs, adjustable beds, etc.) are often provided by health insurance companies through contractual dispensers, including transportation, training for operation and subsequent service and repairs of the device.

152. Regarding ensuring the access of persons with disabilities to quality supporting technologies and equipment and their financial availability for these persons, see also the answer to question 23(a).

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

153. In the case of medical devices, modifications and repairs are reimbursed to the extent and under the conditions stipulated by the Act on Public Health Insurance. These conditions are applied in an equal way to all patients.

154. In recent years, there has been a significant increase in the number of aids paid for from public health insurance, as well as an expansion of the range of aids paid for by social transfers to persons with severe cardiological, pulmonological or vascular diseases, which permanently or in the long term limit their mobility. The draft list of aids and the list of diagnoses were prepared by the Czech National Disability Council.

#### **Reply to paragraph 17 (c) of the list of issues**

155. A person who dispenses or sells a medical device to a patient has an obligation stipulated by the Medical Devices Act to provide the patient with all information on the use of the medical device concerning their safety and health; there is also an obligation to provide training, if necessary with regard to the nature of the medical device.

156. Both the MoLSA and the LOCR pay attention to the issue of the grant for special aid, which helps to increase the availability of certain products and assistive technologies for persons with disabilities through their methodological activities. The events held (methodology days, Mobility Days, etc.) were focused on the application of the Act on Providing Benefits for Persons with Disabilities and Decree No 388/2011 in practice.

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

157. By 19 September 2020, the CR will transpose the European Directive on Audio-visual Media Services. This will lead to legislative changes in the area of making programmes accessible and to a gradual and permanent improvement in making programmes accessible to persons with disabilities. Broadcasters will be required to provide regular information on this access, and support for the development of broadcasters' action plans in the area of accessibility will be a subject of a further measure. At the same time, a new Act on Video Sharing Platforms will be submitted, which will be accompanied by amendments to Act No 231/2001 Coll., on radio and television broadcasting, and Act No 132/2010 Coll., on audio-visual media services on demand.

158. Another measure aimed at making audio-visual content accessible to persons with hearing impairments is the obligation of the distributor of a Czech audio-visual work to provide its copies distributed to the public in the CR with subtitles for the hearing impaired and to mark the packaging of such copies with the words "Subtitles for the hearing impaired". This obligation is enshrined in the Audio-visual Act.

159. Since 2014, the Ministry of Culture (hereinafter the "MoC") has been supporting a project called the "Nordic Film Club (also for the deaf)" as part of a selective subsidy procedure in the field of cinematography and media. One of its aims is to enable deaf people

to participate fully in the cultural life of the majority society, and to that end to provide films with specially adapted subtitles.

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

160. With effect from 1 January 2021, the general regulation of interpreting and translation will be contained in Act No 354/2019 Coll., on court interpreters and court translators. The law also takes into account the specifics of interpreting and translation from/into Czech Sign Language and the mediation of communication with other communication systems for deaf and deafblind people. The law requires the introduction of a clearer definition of the forms of interpreting for participants with hearing impairments and the definition of conditions for the appointment of an interpreter meeting the communication needs of a given participant with hearing impairments, as set out in Act No 155/1998 Coll., on sign language, and in accordance with the relevant provisions of the Code of Criminal Procedure and the Code of Civil Procedure.

161. Act No 155/1998 Coll., on communication systems for deaf and deafblind persons, states that deaf and deafblind persons “have the right to interpreting services providing interpretation in their chosen communication system when visiting a doctor, handling official matters and meeting other needs”. The conditions for the provision of interpretation services are to be laid down in another legal regulation, e.g. the Social Services Act.

162. Pursuant to the Social Services Act, interpreting services are field, or outpatient services provided to persons with communication disorders caused primarily by sensory disabilities. These interpreting services are provided to clients free of charge, but their scope is limited by the possibilities of the given service provider, especially the amount of subsidies provided.

163. However, interpreting services regulated by the Social Services Act can also be used outside the social services regime, i.e. not as social services. Thus, for example, the general procedural rules (Code of Administrative Procedure and Code of Civil Procedure) for proceedings before an administrative body or court stipulate the principle that during proceedings the participant must be addressed in the language and manner in which they are able to comment on the matter or understand the subject of the proceedings (e.g. through sign language interpretation, if necessary). At the same time, the administrative authority or court conducting the proceedings is obliged to provide such interpretation at its own expense.

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

164. In accordance with Article 4 of the Convention, the “Methodical management of communication of public administration institutions with specific groups” measure was included in the MoI’s Client-Oriented Public Administration 2030 concept. The MoI’s long-term objective is to provide persons with disabilities with access to public administration information and services to the maximum possible extent. Therefore, in 2018 and 2019, the MoI developed a methodological aid that explains to public administration officials how to provide complex information in a simple manner. The methodology contains rules by which public officials will create a simplified information in the “Easy to Read” format for persons with disabilities or for people who are impaired in reading and perceiving complex information. For the next period, the MoI is preparing a methodology for central State administration and territorial self-governments focused on communication with specific groups of the population, especially focusing on persons with disabilities (deaf, blind or persons with combined disabilities).

165. The [www.trass.cz](http://www.trass.cz) website is managed as part of the MoLSA’s “Life Like Any Other” project. In the monitored period, a section called Easy-to-read Information was created and updated on the website <http://www.trass.cz/index.php/snadne-cteni/>. Easy-to-read texts on important situations in life are currently published there (263 texts are currently published). The texts are created with easy-to read experts from the Society for the Support of Persons with Mental Disabilities in the CR.

166. A court will appoint an interpreter for a participant in civil proceedings or proceedings in administrative courts if they cannot be communicated with other than by one of the communication systems for deaf and deafblind persons. The procedure is similar in criminal

proceedings if it is necessary to translate or interpret the content of a document, statement or other procedural act.

**Reply to paragraph 18 (d) of the list of issues**

167. See the answer to question 8(e) on guaranteeing full access to content available on the Internet.

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

168. If a person's legal capacity is limited, they may enter into marriage unless they have been expressly limited by a court decision in this area. A court may decide, in connection with the limitation of legal capacity, that a person may not marry; however, this prohibition is not an automatic consequence of the limitation of legal capacity. If a marriage has already been entered into, even if this was prevented by a legal obstacle, a court will declare the marriage invalid (even without a petition) as soon as it becomes aware of the fact. Until a court decision, the marriage is considered valid. However, a marriage entered into by a person whose legal capacity was limited in this area may not be declared invalid if a live child has been born within such marriage. If a person has a guardian, the guardian is never entitled to act legally on behalf of the represented person in matters relating to the establishment and dissolution of marriage. The CR is not currently preparing a change in this legislation.

169. If a court decides to limit the legal capacity of a person who is a parent, it will always also decide on the person's parental responsibility. However, a decision to limit legal capacity does not automatically lead to interference in parental responsibility. A court is only required to address this issue in connection with a decision to limit legal capacity. If a parent has more than one child, a court will decide on parental responsibility for each child separately. The exercise of parental responsibility, if affected by a court decision, is suspended for the period of limitation. However, the parents may retain the exercise of the duty and right of care for, and personal contact with, the child.

170. The forthcoming amendment to the Civil Code, currently being discussed by the Parliament of the CR, proposes that a guardian would not be allowed to act legally on behalf of the represented persons even in matters relating to the determination and denial of parenthood.

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

171. Pursuant to the SLPC Act, a parent or other person responsible for the upbringing of a child has the right to seek assistance from an ASLPC, other State authorities responsible for protecting the rights and legitimate interests of the child, or other persons entrusted with SLPC. These authorities and authorised persons are obliged to provide the necessary assistance to the parents. The ASLPCs are obliged:

- (a) To assist parents with addressing educational or other problems related to child care.
- (b) To provide or mediate counselling to parents in the upbringing and education of a child and in the care of a child with disabilities.
- (c) To organise lectures and courses aimed at addressing educational, social, and other problems related to childcare and education.

172. Parents or other persons responsible for the upbringing of a child may also request the assistance of a childcare counselling facility in accordance with the SLPC Act. These facilities provide, in particular, recommendations aimed at resolving mutual relations between parents and their children and at parents caring for children with disabilities.

173. Some social services also provide significant support to parents with disabilities in fulfilling their parental role. These are mainly personal assistance, domiciliary services, early care, social activation services for families with children, and professional social counselling services.

174. Providers of health services can provide parents with disabilities with such health services that will teach them how to take care of their child, but this forms only a small part of the support for such parents.

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

175. On 1 September 2016, an amendment to Act No 561/2004 Coll., on preschool, primary, secondary, higher vocational and other education (the “Education Act”) came into effect, bringing fundamental changes in the education of children, pupils and students with disabilities (hereinafter “pupils”). The amendment introduced support measures (hereinafter “SM”), through which the educational possibilities of a pupil with special educational needs (hereinafter “SEN”) are to be fulfilled and the exercise of such person’s rights on an equal basis with others facilitated. Since 2016, further legislative and non-legislative changes have been adopted to improve the quality of inclusive education.

176. SM are divided into five levels, including, for example, modification of the organization, content, assessment, forms and methods of education, the subject of special pedagogical care, the use of compensatory or special teaching aids (e.g. Braille writing tables and teaching aids for Braille, Picht’s typewriters, Braille displays, Braille printers), special textbooks (e.g. in Braille or aliquot amounts for transcription into Braille), personnel support (e.g. teaching assistant, Czech sign language interpreter, transcriber for the deaf), individual educational plan, etc. First-level SM are applied by the school or school facility even without the recommendation of the school counselling facility (hereinafter the “SCF”). Second- to fifth-level SM are provided by the school without delay and free of charge on the basis of the recommendation of the SCF and the written informed consent of the adult pupil or a minor’s legal representative.

177. SCFs include pedagogical-psychological counselling centres and special pedagogical centres, the activities of which are focused based on the type of disability. Counselling includes an assessment of SEN, the preparation of a report and recommendations that set out the SM corresponding to the identified SEN and the possibilities of the pupil, including the method and rules of their use in education.

178. Under the Education Act, schools or classes, departments and study groups may be established for pupils with mental, physical, visual or hearing disabilities, multiple disabilities or autism. Only pupils with severe disabilities can be educated in them, with regard to the nature of their SEN, the course and results of the provision of SM to date, and only if the SM themselves are not sufficient for them to fulfil their educational possibilities and to exercise their right to education. A pupil may be placed in them only on the basis of a written request from an adult pupil or legal representative of a minor and at the same time a recommendation from the SCF. The interest of the pupil is decisive. The SCF will evaluate whether such education corresponds to the SEN of the pupil.

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

179. In order to improve the inclusion and increase professionalism, further education of pedagogical workers is supported. The National Pedagogical Institute of the CR implements a number of courses, including for the education of pupils with SEN, in the use of diagnostic tools for the staff of SCF and others.

180. The strategic documents “Long-Term Plan of Education and the Development of the Educational System of the Czech Republic for the Period 2019–2023” and “Action Plan for Inclusive Education for the Period 2019–2020” also focus on ensuring equal opportunities in education, the effectiveness of the counselling system, further education of pedagogical staff, development of the potential of all pupils, unification of procedures at the level of self-governing units, founders, schools, social service providers and others. Through the Operational Programme Research, Development and Education (hereinafter the “OP RDE”), funds are provided, inter alia, to ensure equal opportunities in education.

181. During the reference period, there was a significant decrease in the share of pupils with mild mental disabilities studying in accordance with the Framework Educational Programme for Primary Education governing the education of pupils with mild mental disabilities. At the end of the 2019/2020 school year, education under this programme will

be discontinued. Thus, only the Framework Educational Programme for Primary Education continues to apply, which allows pupils with mild mental disabilities (based on the recommendation of a SCF) to use adjusted outcomes only in those areas where it is necessary for the pupil. In other areas, the pupil can be educated according to standard expected outcomes.

182. In order to make the diagnosis of pupils more accurate, the MoEYS announced the development programme “Equipping School Counselling Facilities with Diagnostic Tools”. Through it, the MoEYS provided funds to SCF for the purchase of modern diagnostic tools and the implementation of related training, which can be used to determine the appropriate SM, sEN and define optimal support in education.

183. In the field of higher education, the principle of equal opportunities for persons with disabilities is observed at the level of all strategic documents and legal regulations. The number of students with special needs in higher education is steadily increasing. Every year, higher education institutions submit annual reports to the MoEYS stating how they support students with special needs. The MoEYS provides public higher education institutions with financial support for the increased costs related to the education of students with special needs, implements an investment programme for the development of higher education institution infrastructure and project financing under the OP RDE. Emphasis is also placed on obtaining higher quality data on the nature of the group of students with special needs and their problems associated with studies.

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

184. The MoEYS collects statistical data on the education of pupils. The number of “special” schools has been steadily declining, with the number of kindergartens, primary and secondary schools falling by 72 between 30 September 2015 and 30 September 2018. More and more pupils are being educated in mainstream schools.

185. Within the OP RDE, call No 02\_19\_077 Support for Children and Pupils with SEN was announced, the aim of which to support the implementation of transition programmes preparing young people for independent living, strengthen the competencies of teachers and schools in order to support the mental health of children and pupils, etc. Another aim of the call was to support the prevention and shortening of children’s stays in the institutional care and protective education system.

186. Objectives and measures in the education of pupils are contained in the National Plan in section 4.10 Education and training. The measures aim to ensure their right to education without discrimination and on the basis of equal opportunities, to promote inclusive education, to provide reasonable accommodation and assistance according to individual needs, so that persons with disabilities can fully develop their potential, talents and creativity. With the exception of measure 10.8 (Adopt binding “standards” for the activities of SCF for pupils with disabilities, and ensure their implementation in each SCF), the deadline for which was postponed to 31 December 2020, measures 10.1 to 10.32 of the National Plan were either fulfilled or are being fulfilled continuously.

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

187. The training of health workers in the rights of persons with disabilities is part of the Health 2020 programme of the National Strategy on the Protection and Promotion of Health and Prevention of Diseases (Action Plan No 10: Lifelong learning for health professionals, e.g. intermediate objective 2: Increasing the level of knowledge and skills in providing specific care for selected groups of patients). The task is to create the content of the educational programme and design educational materials for selected groups (patients with demyelinating disease, geriatric patients, patients suffering from dementia, patients with functionally severe chronic disabilities, patients in palliative care) and implement certified courses. Departments of the MoH, professional associations, professional societies, medical faculties, faculties of health and social care, and faculties of medical studies all cooperate on these tasks. For more information, see [http://www.mzcr.cz/Verejne/obsah/zdravi-2020\\_3016\\_5.html](http://www.mzcr.cz/Verejne/obsah/zdravi-2020_3016_5.html).

188. Human rights and ethics form an integral part of the qualification training for the health profession. This area is also included in continuing vocational education, such as specialisation education. Part of compulsory education at all medical faculties in the CR is the teaching of medical ethics. Education in the area of dealing with patients is usually carried out as part of the optional subjects. Education for physicians regarding dealing with patients and medical ethics is then part of the postgraduate education of physicians. As part of the lifelong education of physicians, the Institute of Postgraduate Education in Healthcare organises courses on communication and the most common problems in communication between physician and patient. Healthcare professionals who have acquired professional competence to perform a non-medical healthcare profession and perform direct care complete, inter alia, the basics of physiotherapy and the basics of patient self-sufficiency as part of their qualification studies.

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

189. According to the Health Services Act, a provider of health services is obliged to ensure that patients are acquainted with their rights and obligations in the provision of health services, while they must also be informed about health services and other possible social services that can improve their state of health, in particular about the possibilities of social, vocational and pedagogical rehabilitation.

190. The Health Services Act stipulates that a patient with sensory disabilities or severe communication problems has the right to communicate in a way that is comprehensible to them, and to use communication means or an interpreter. The Act also stipulates that a patient with a sensory or physical disability has the right to use a dog with special training or the right to the presence of a dog in a medical facility.

191. Information and communication on health services for persons with disabilities, including persons with mental disabilities and persons who are blind or deaf are developed with the support of the MoH, and are available in an accessible format. Details can be found on the websites of State and public administration institutions. For example, the Communication Set for Persons with Autism Spectrum Disorder ([http://www.mzcr.cz/Odbornik/obsah/autismus\\_3707\\_3.html](http://www.mzcr.cz/Odbornik/obsah/autismus_3707_3.html)), which facilitates communication between professionals and the general public and vice versa.

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

192. The public health insurance system in the CR is based on the solidarity principle, which guarantees sufficient funds from the premiums paid to cover health care for all insured persons. The amount of premiums paid for an individual insured person does not affect the scope of health services provided to them and is not individually compared with the amount of reimbursements for these services.

193. According to the Public Health Insurance Act, health care and rehabilitation services for persons with disabilities are covered as an entitlement in the same way as for healthy insured persons, including health services in the field of sexual and reproductive health (application of the Health Services Act and the Specific Health Services Act).

194. Medical rehabilitation is regulated by the Health Services Act. This care is provided in the CR in all forms of healthcare and its availability to all those in need is guaranteed by the health insurance companies.

195. Reproductive health care is available to all citizens in the CR, including persons with disabilities. A system of preventive examinations and a system of examinations and screenings in pregnancy, and neonatal screening are set up.

196. The CR has a sophisticated system of quality prenatal care that does not require any financial participation from expectant mothers. Covered care includes screenings for congenital malformations, early detection of gestational diabetes, hypertension, etc. Very high quality care for the majority of pathological conditions, including highly specialised care, regardless of the economic or social situation of the woman, is provided by perinatalogical and intermediate centres.

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

197. The total number of persons with disabilities of working age in the CR can be estimated at 435,000. In 2018, a total of 131,400 persons with disabilities were employed and 34,500 persons with disabilities were registered by the LOCR. It follows that about 270,000 persons of working age with disabilities are not included either in the employment figures or in the records of the LOCR.

198. The very unemployment rate contributes to the improvement of employment of people with disabilities in the labour market. As of July 2019, the LOCR registered 34,500 job seekers with disabilities. This compares to 41,000 job seekers in 2018 and 49,000 in 2017.

199. The table below shows data on the employment rate of persons with disabilities as determined in the Labour Force Sample Survey conducted by the Czech Statistical Office (hereinafter the "CZSO"), broken down by age and gender. Employment rate by type of disability was not established in the sample survey. In 2018, 131,400 persons with disabilities were employed according to the sample survey. In this period, 53,273 persons with disabilities worked in the protected labour market. The share of employed persons with disabilities in the protected labour market was therefore 41%.

<i>Age category total</i>	<i>Employment rate</i>			<i>Unemployment rate</i>		
	<i>2016</i>	<i>2017</i>	<i>2018</i>	<i>2016</i>	<i>2017</i>	<i>2018</i>
15-29 years	14.8%	22.1%	25.1%	32.9%	10.5%	18.2%
30-44 years	31.6%	34.5%	42.9%	17.7%	10.0%	4.7%
45-59 years	30.1%	38.3%	38.8%	14.9%	9.5%	6.6%
60 years and over	5.6%	7.3%	7.6%	13.5%	5.6%	-
<b>Total</b>	<b>18.7%</b>	<b>22.8%</b>	<b>25.3%</b>	<b>16.4%</b>	<b>9.1%</b>	<b>6.7%</b>

<i>Age category men</i>	<i>Employment rate</i>			<i>Unemployment rate</i>		
	<i>2016</i>	<i>2017</i>	<i>2018</i>	<i>2016</i>	<i>2017</i>	<i>2018</i>
15-29 years	12.9%	24.9%	30.2%	26.3%	-	15.4%
30-44 years	33.1%	32.8%	37.3%	17.0%	14.7%	6.8%
45-59 years	28.7%	38.0%	35.9%	13.2%	9.0%	5.5%
60 years and over	8.9%	11.1%	11.9%	13.6%	6.4%	-
<b>Total</b>	<b>19.5%</b>	<b>23.7%</b>	<b>25.3%</b>	<b>15.0%</b>	<b>9.5%</b>	<b>6.7%</b>

<i>Age category women</i>	<i>Employment rate</i>			<i>Unemployment rate</i>		
	<i>2016</i>	<i>2017</i>	<i>2018</i>	<i>2016</i>	<i>2017</i>	<i>2018</i>
15-29 years	18.5%	18.2%	17.1%	40.2%	-	-
30-44 years	30.1%	36.1%	48.7%	18.4%	-	-
45-59 years	31.3%	38.6%	41.2%	16.1%	9.8%	7.4%
60 years and over	2.7%	3.7%	3.3%	-	-	-
<b>Total</b>	<b>18.0%</b>	<b>21.9%</b>	<b>25.3%</b>	<b>17.7%</b>	<b>8.8%</b>	<b>6.7%</b>

Source: MoLSA.

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

200. Since 2017, the following measures have been taken to improve the employment of persons with disabilities on the open labour market:

- Adjustment of the parameters of the obligatory share of employment of persons with disabilities (from 1 January 2018 the limit for alternative performance was reduced, which in turn reduced the total volume of alternative performance in favour of direct employment of persons with disabilities);
- Introduction of records of alternative performance of employment of persons with disabilities;
- Implementation of the project “Development of the System of Support for the Employment of Persons with Disabilities on the Open Labour Market” (from 1 June 2017 to 30 June 2022) – the project aim is to support the employment of persons with disabilities on the open labour market and to ensure the cooperation of all stakeholders. The project strengthened the staffing of the LOCR by 99 new employees who provide counselling to persons with disabilities in terms of finding work on the open labour market and establish cooperation with employers.

201. Employers are also motivated to employ persons with disabilities on the open labour market through income tax rebates. Each employer who employs a person with a disability may use a tax rebate of CZK 18,000 for each such employee (level I or II disability) and CZK 60,000 for each employee with a more severe disability (level III disability).

202. As of 1 January 2017, the lower minimum wage rate for disability pension recipients was repealed, and now the minimum wage thus applies in the same amount to persons with disabilities and employees without disabilities.

203. Regarding the issue of supporting the employment of persons with disabilities on the open labour market, see also the answers to question 4 and 22(c).

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

204. Support for the employment of persons with disabilities is implemented through Act No 435/2004 Coll., on employment (hereinafter the “Employment Act”). Tools and measures aimed at supporting the employment of persons with disabilities are implemented by the LOCR. These are:

- Vocational rehabilitation;
- A contribution for the establishment of a job for a person with a disability, which may be provided to employers on the open and sheltered labour markets. This is a contribution for the acquisition of equipment needed to create a job for a person with disability. This contribution may also be used support the start of self-employment activity for a person with disability;
- A contribution to cover operating costs incurred in connection with the employment of persons with disabilities, which may be provided to employers on the open labour market. The employer is entitled to receive this contribution for increased administrative costs, costs of operating staff and work assistants, transport costs and modifications to the premises.

205. Every employer with more than 25 employees is obliged to employ persons with disabilities at the mandatory rate of 4% of the total number of employees. This obligation may be fulfilled in the following equivalent ways or combinations:

- (a) By employing persons with disabilities in an employment relationship;
- (b) By purchasing products or services from employers employing more than 50% of persons with disabilities on their staff;
- (c) By a payment to the State budget.

206. Another instrument is a contribution to support the employment of persons with disabilities on the sheltered labour market. This contribution is payable to employers



employing more than 50% of persons with disabilities on their staff. The contribution amounts to 75% of the actual wage costs incurred for employees with disabilities, up to a maximum of CZK 12,800 per month. In addition, the employer can claim an increase in the allowance for the costs of operating staff and work assistants, the costs of transporting disabled persons to the workplace and the costs of adapting the workplace.

207. On 1 January 2018, the system of defining sheltered work positions was replaced with a one-off recognition system for employers on the sheltered labour market. This change will help to improve control and monitoring activities in the sheltered labour market segment.

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

208. The Employment Act distinguishes between the terms “person interested in a job” and “job seeker”, although the purpose of both categories is employment intermediation. A person with a level III disability may not become a job seeker, with the exception of a person with a level III disability who is capable of gainful employment under very extraordinary conditions.

209. Persons with level III disabilities are persons with the most serious types of disabilities which, in connection with impaired mobility, do not allow these persons to fulfil the obligations of a job seeker. Job seekers must report to the relevant LOCR office on specified dates.

210. Therefore, given the above facts, for persons with level III disabilities for which the performance of work is not possible under very extraordinary conditions, it is more advantageous to apply to the LOCR to be included in the register of persons interested in a job at any workplace of the LOCR, which is more advantageous compared to the register of job seekers due to the difficult mobility of these persons.

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

211. In the area of pension insurance, there is no need to take any other special measures in relation to persons with disabilities beyond the existing legislation. Statistics from August 2019 show that of the total number of pensioners (2,892,000), 83% are recipients of old-age pensions, 15% of disability pensions [of which 6% are recipients of disability pensions for level III disability, 3% are recipients of level II disability pensions and 6% are recipients of level I disability pensions] and 2% are recipients of survivors' pensions. In terms of a comparison of the average amounts, only old-age pensions and disability pensions for level III disability can be compared – in these cases, the percentage rate for determining the amount of the pension is the same for each year of insurance; the average amount of disability pensions for level III disability is 89% of the average amount of an old-age pension.

212. How the percentage of the disability pension for level I or II disability is determined, graded according to the degree of decline in working capacity, shows that gainful activity by their beneficiaries is directly assumed. Accordingly, it follows that these disability pensions should thus not be a person's sole income and that their receipt does not automatically constitute participation in pension insurance. The situation is different in the case of receiving a disability pension for level III disability, which counts towards the period of participation in pension insurance - it is actually a replacement (non-contributory) insurance period, for which no payments are made yet is included in the insurance period at a rate of 80%.

213. With effect from 1 June 2018, a new benefit was introduced - the long-term attendance allowance, the purpose of which is to ensure the security of persons who provide long-term care to other persons in the home environment after discharge from hospitalisation in a healthcare facility for a specified support period. The care recipient must have a serious deterioration in health, which requires at least seven days of hospitalisation, and on the day of discharge it is confirmed that the need for full-time care will last at least another 30 days. The maximum benefit period is 90 calendar days. The employer is obliged to excuse the employee's absence from work during the provision of long-term attendance.

214. Benefit assistance to persons with disabilities is regulated by the Act on Providing Benefits for Persons with Disabilities (see the answer to question 17(a)). Since 2012,

spending on benefits under this law has increased every year and the number of beneficiaries has also increased.

215. In accordance with the requirements of the representatives of persons with disabilities, the model of multipurpose use of the dependency assessment for the purposes of the Act on Providing Benefits for Persons with Disabilities was subsequently abandoned. Since 2014, the dependency assessment scheme has ceased to be used for the purposes of the disability card and the mobility allowance. The medical condition of entitlement to the allowance for mobility was linked to the entitlement to a card for persons with disability, extraordinarily severe disability, and extraordinarily severe disability.

216. The allowance for a special aid also underwent changes during this period with a positive impact on persons with disabilities and their families. There has been a significant reduction in the price of the aid determining whether or not income is assessed for entitlement to the allowance. There has been a fundamental change in the determination of the amount of the allowance for the acquisition of a motor vehicle. The list of aids for which an allowance can be provided has also been expanded. When deciding on a child's entitlement to the allowance and its amount, there is an obligation to always pursue the best interests of the child.

217. The provision of the care allowance to persons who, due to their state of health, need the care or assistance of another person, is regulated by the Social Services Act. The number of beneficiaries of this allowance and the amount of funds spent are growing every year. In 2019, there was a significant increase in the amount of the allowance for persons in dependency levels III and IV who do not use residential social services.

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

218. The CR is not currently considering reintroducing a supplementary social benefit with the aim of raising the standard of living of families with children with disabilities above the subsistence minimum. The reasons for the existence of a social supplement for families with a disabled member decreased significantly after the introduction of the care allowance. The increase in the care allowance by CZK 2,000 (per month) is due to a dependent child under 18 years of age receiving the allowance and to a parent receiving the allowance who takes care of a dependent child under 18 years of age, if the income of these persons and persons assessed together with them is less than two times their subsistence minimum. The family has significantly improved access to income-tested State social support benefits or benefits in material need (subsistence allowance, housing supplement, emergency immediate assistance). The protection of persons with disabilities and children is also contained in the Act on the Subsistence Minimum, which stipulates that the subsistence minimum may not be used for a dependent child, for a person with level III disability (or for a recipient of an old-age pension and a person over 68 years of age).

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

219. The issue of regulating the limitation of legal capacity of persons with disabilities has undergone a significant shift in the CR in the reference period. Instead of complete deprivation of capacity to perform legal actions, the Civil Code regulates from 1 January 2014 the institute of limitation of legal capacity, which can be used as follows: "only in the interests of the person concerned, after seeing him/her and with full recognition of his/her rights and his/her personal uniqueness. At the same time, the extent and degree of a person's inability to take care of one's own affairs must be carefully taken into account." It is also stipulated that a person's legal capacity may be limited only if they would otherwise be in danger of serious harm and if, in view of their interests, milder and less restrictive measures are not sufficient.

220. As a result of the above change, an amendment to the individual electoral laws was adopted with effect from 7 April 2014, by which the obstacle to the exercise of the right to vote consisting in deprivation of capacity to perform legal actions was terminologically changed to the obstacle of limitation of legal capacity to exercise the right to vote. A consequence of the new legislation was that in 2019, municipalities in the CR registered in the permanent electoral rolls only 10,309 persons with an obstacle to exercising their active

right to vote. The obstacle to the exercise of the right to vote consisting in the limitation of legal capacity remains in the electoral laws for the time being, however it would be appropriate to discuss it and explore the possibilities of its elimination in the future.

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

221. As regards providing information to voters with disabilities, the MoI has been cooperating with the GBPD since 2017, through which organisations associating persons with certain types of disabilities are provided in advance with information on voting so that it can be translated into a format that is legible and understandable to persons with visual or hearing impairments. In connection with the elections to the European Parliament in 2019, the MoI, in direct cooperation with the Society for the Support of Persons with Mental Disabilities in the CR, participated in the preparation of an information leaflet for voters with mental disabilities, published in the Easy-to-Read format. The MoI published this information leaflet on its website and recommended, in particular, that municipalities and facilities intended for people with disabilities and carers provide the leaflet to those voters for whom it could facilitate the exercise of their right to vote.

222. The MoI communicates with representatives of organisations of persons with disabilities and is in contact with the Office of the Ombudsman. The implementation of knowledge from practice requires legislative enshrinement, which is why the MoI has inserted their regulation in the draft Act on Election Administration, which in a separate part contains provisions aimed at supporting persons with disabilities in exercising their right to vote, where, in particular:

- It clarifies the rules for assistance in the polling station – not requiring the assistant to have an active voting right in a given type of election, nor precluding the assistance of a district election commission member (which must be recorded); the law emphasises the binding of the assistant to the voter's instructions and the confidentiality obligation for the assistant;
- In response to the abolition of the distribution of ballots to households, it allows voters to obtain ballots from the municipal authority already on days when voting takes place in advance; the voter's right to receive the ballots in the polling station will not be affected;
- It allows voting in a portable ballot box even in the vicinity of the polling station if it is not physically possible for the voter to access the polling station, including the possibility to change the electoral district ad hoc for this reason;
- It regulates the overuse of voting via portable ballot boxes in the case of residential medical and social services facilities;
- It obliges the MoI to publish information on barrier-free accessibility of polling stations and voting principles in Czech sign language in the election administration information system.

The MoI submitted a draft act on election administration to the government in January 2020.

#### **Reply to paragraph 24 (c) of the list of issues**

223. The number of elected candidates with disabilities is not determined as part of the processing of election results, and the MoI does not determine it in any other way. No measures were taken by the MoI to support candidates with disabilities, and in particular women with disabilities. The MoI's task is to manage, ensure and control the organisational and technical preparation, conduct and execution of elections, but it cannot in any way interfere with the process of selecting candidates, which takes place within the electoral parties.

#### **Reply to paragraph 25 of the list of issues**

224. On 15 February 2019, Act No 50/2019 Coll., amending Act No 121/2000, on copyright, on rights related to copyright (the "Copyright Act"), became effective. This led to the implementation of the EU Directive and Regulation on the implementation of the

Marrakesh Treaty - the World Intellectual Property Organization Treaty to Facilitate Access to Published Works for Persons Who Are Blind, Visually Impaired or Otherwise Print Disabled.

## **C. Special obligations (Articles 31–33)**

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

225. In the CR, statistical information on persons with disabilities is available from many different administrative and agenda sources. Each of these sources defines a person with a disability according to the purpose for which it serves. The definition is different for recipients of the care allowance, for recipients of a disability pension, for holders of a disability card or for employed persons with disabilities according to the Employment Act. There is also a different definition for pupils with SEN under the Education Act.

226. In the Sample Survey on Persons with Disabilities in 2018 (hereinafter “SSPD 2018”), the CZSO focused on persons who according to the “self-reported” principle stated long-term restrictions in the performance of routine activities due to health reasons. This method is also used for international comparability of disability, as this is a harmonised issue in the unified European EU-SILC survey and in the EHIS health survey.

227. As the SSPD 2018 did not cover persons living outside private households and children, and due to the great fragmentation of available data on persons with disabilities, the study Children with Disabilities and Persons with Disabilities Living Outside Private Households – 2017, 2018 was prepared, which also maps available sources. This study is available on the CZSO website here: <https://www.czso.cz/csu/czso/deti-se-zdravotnim-postizenim-a-osoby-se-zdravotnim-postizenim-zijici-mimo-soukrome-domacnosti-2017-2018>.

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

228. In 2018, the CZSO, in cooperation with the Institute of Health Information and Statistics of the CR, conducted a sample survey on persons with disabilities (SSPD 2018) living in private households. This sample survey of persons with disabilities in households was conducted in the CR in 2018 for the first time. This method made it possible to focus on the subjectively perceived difficulties and needs of these people.

229. Data on a set of 6,800 persons with disabilities are available for analysis and data processing. The results of the survey were published on the CZSO website: <https://www.czso.cz/csu/czso/vyberove-setreni-osob-se-zdravotnim-postizenim-2018>.

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

230. The questions from “The Washington Group Short Set of Questions on Disability” served as the inspiration for the creation of the SSPD 2018 questionnaire and were largely used therein. This set of questions is almost completely included in the 2019 EHIS European Health Survey. The Washington Group’s Short Set of Questions will not be part of the 2021 Population and Housing Census, in which the number of questions is significantly reduced to the minimum necessary extent.

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

231. The main principles for the implementation of foreign development cooperation and humanitarian aid are set out in the period of validity of the UN Agenda for Sustainable Development of the Strategy of Foreign Development Cooperation of the Czech Republic for 2018–2030. The strategy defines Inclusive Social Development as one of the main objectives. Within this thematic area, activities focus mainly on health, education and the promotion of social inclusion. The aim is, inter alia, to create a society open to all groups of the population, including socially excluded and otherwise disadvantaged groups.

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

232. Within the six priority countries of the CR's Foreign Development Cooperation, the topic of improving the living conditions of persons with disabilities is taken into account to a certain extent in cooperation programmes with Bosnia and Herzegovina, the Republic of Moldova, and Georgia.

233. In Bosnia and Herzegovina, foreign development cooperation seeks to improve the living conditions of persons with disabilities through the implementation of projects under the thematic priority of good governance. The "Support for the Integration of Persons with Disabilities into Society in Bosnia and Herzegovina" project, the implementation of which was completed in 2019, responded to the needs of Bosnian centres for inclusion of persons with disabilities through the transfer of Czech experience and know-how, especially in the employment of such persons.

234. In the Republic of Moldova and in Georgia, the topic of improving the lives of persons with disabilities is partly reflected in the thematic priority of inclusive social development. Activities under this thematic priority focus mainly on improving social protection systems for disadvantaged groups. So far, for example, persons with mental disabilities, persons with autism spectrum disorders, and persons in home care dependent on the help of others have been supported.

**Reply to paragraph 28 of the list of issues**

235. As part of monitoring the implementation of the Convention, the Ombudsman conducts research and investigations, visits facilities where persons with disabilities live, provides awareness-raising activities on the rights of persons with disabilities, and works closely with persons with disabilities and their organisations, as well as with the UN Committee on the Rights of Persons with Disabilities.

236. The Ombudsman has established an advisory body, which submits to the Ombudsman systemic topics in the field of protection of the rights of persons with disabilities, provides the Ombudsman with consultations and practical information, participates in the Ombudsman's comments procedures on legal regulations, and provides opinions on the Ombudsman's strategic documents concerning the rights of persons with disabilities. The advisory body has 11 members. They are persons with disabilities and people defending the rights of persons with disabilities.

237. As part of their activities, the Ombudsman carries out the following research in relation to persons with disabilities:

- Research on the availability of social services for families with children with disabilities;
- Research on the availability of an instrument for vocational rehabilitation for persons with disabilities;
- Research on the employment of persons with disabilities in the public sector;
- Research on the availability of social services asylum houses and reception centres for persons with disabilities;
- Research on the conditions of people living in homes for persons with disabilities;
- Research into the accessibility of train transport for people using wheelchairs.