| **Article 7 – Illustrative indicators on children with disabilities** | | | | |
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| **Full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children** | | | | |
| **Attributes\*/**  **Indicators** | **Equality and non-discrimination** | **Survival, development, and preservation of identity** | **Best interests of the child and respect for evolving capacities** | **Respect for the views of the child** |
| **Structure** | 7.1 All legislation relating to children prohibits discrimination on all grounds[[1]](#endnote-1) and ensures the respect, protection and fulfilment of the rights of children with disabilities on an equal basis with other children.[[2]](#endnote-2)  7.2 All legislation, policies and national action plans/strategies concerning children or persons with disabilities[[3]](#endnote-3) should be inclusive of children with disabilities,[[4]](#endnote-4) and ensure the provision and availability of disability-, age- and culturally-appropriate support for children with disabilities to effectively exercise their right to express their views.  7.3 Adoption of, and mandatory reporting on a disability marker within budget allocations and expenditures across all sectors.[[5]](#endnote-5) | | | |
| 7.4 Adoption of a moratorium on new admissions of children with disabilities into institutions.  7.5 Adoption of a legal requirement to take into account the evolving capacities of children with disabilities and their right to preserve their identities in all decisions affecting them and with respect to medical and related interventions and treatments.[[6]](#endnote-6) (idem 15/17.12)  7.6 Statistics and data collected across all sectors concerning children are appropriately disaggregated[[7]](#endnote-7) and are publicly available in accessible formats.  7.7 Availability of complaints mechanisms that are effective and accessible to children with disabilities permitting them to bring forward complaints. | | 7.8 Adoption of regulations, protocols and guidance for authorities on integrating best interest assessments inclusive of children with disabilities in the design, implementation, monitoring and evaluation of legislation and policies.[[8]](#endnote-8) | 7.9 Adoption of regulations, protocols and other measures to promote both:  a) the inclusion of children with disabilities in children-led organizations and initiatives; and  b) the development of and support of organizations and initiatives led by children and young persons with disabilities.  7.10 Adoption of regulations, protocols and guidance for authorities on the provision of age-, disability- and culturally appropriate assistance in seeking the views of children, consulting with, and actively involving them. |
| **Process** | 7.11 Number and proportion of legislation, national action plans and strategies concerning children and youth, which make explicit references to girls and boys with disabilities.  7.12 Proportion of asylum-seeking and refugee children with disabilities who have access to education, health and social services, disaggregated by sex, age, disability, migrant status and service sector. | 7.13 Proportion of children under 5 years of age whose births have been registered with a civil authority, by age (SDG indicator 16.9.1), sex and disability. | 7.14 Consultation processes undertaken to ensure the active involvement of children with disabilities, including through their representative, on national policy development, implementation and monitoring of all disability-specific and mainstream laws, policies, and programmes and services concerning them.[[9]](#endnote-9) | |
| 7.15 Awareness raising campaigns and activities aimed at combating stereotypes and prejudices concerning children and youth with disabilities, and eliminating harmful practices practiced against them. | | | |
| 7.16 Percentage of public expenditure directed to girls and boys with disabilities across sectors.[[10]](#endnote-10)  7.17 Proportion of awareness raising and information campaigns concerning children and/or targeted at children which are fully accessible and inclusive of children with disabilities.  7.18 Proportion of staff involved in the delivery of programmes and services related to children trained on working with children with disabilities.[[11]](#endnote-11)  7.19 Proportion of received complaints alleging discrimination on the basis of disability, including in conjunction with one or more additional grounds, involving girls and boys with disabilities, that have been investigated and adjudicated; proportion of those found in favour of the complainant; and proportion of the latter that have been complied with by the government and/or duty bearer; each disaggregated by kind of mechanism. | | | 7.20 Awareness raising campaigns and activities concerning the rights and participation of children with disabilities, including on representation of children with disabilities in decision-making processes, targeted at children with disabilities, among others.[[12]](#endnote-12) |
| **Outcome** | 7.21 Under-five mortality rate (SDG indicator 3.2.1) disaggregated by sex and disability.  7.22 Prevalence of undernourishment of children (SDG indicator 2.1.1) disaggregated by sex, age, and disability.[[13]](#endnote-13)  7.23 Prevalence of malnutrition among children under 5 years of age, by type (wasting and overweight) (SDG indicator 2.2.2), disaggregated by sex, age, and disability.[[14]](#endnote-14)  7.24 Proportion and number of children aged 5-17 years engaged in child labour, by sex and age (SDG indicator 8.7.1) and disability.  7.25 Proportion of children and young people: (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics, by sex (SDG indicator 4.1.1) disability and minority or indigenous background. (idem 24.28)  7.26 Number and proportion of children with disabilities in alternative care compared to all children in alternative care (in a family setting / in small group homes or other residential care facilities), disaggregated by age, sex, disability and kind of setting. (idem 23.26) | | | 7.27 Proportion of children with disabilities participating in forums, including through their own organizations, at school, local, regional and national governance levels,[[15]](#endnote-15) disaggregated by sex, age, and disability.  7.28 Number of organizations led by children and young persons with disabilities in the State, disaggregated by kind of disability represented and geographical area or district. |

## ANNEX

1. \*The attributes chosen for Article 7 on children with disabilities mirror the guiding principles of the Convention on the Rights of the Child: i.e. non-discrimination; right to life, survival and development; best interests of the child; and respect for the views of the child, as they are applicable to all children, including children with disabilities. The CRC guiding principle “right to life, survival and development” has been amended as “survival, development and preservation of identity” to reflect the CRPD principle enshrined in Article 3(h) for respect for the right of children with disabilities to preserve their identities. Reference to this CRPD principle in the context of survival and development is important as it articulates the concern for decisions taken on the basis of survival and development which may overlook or dismiss the right of children with disabilities to preserve their identities. For example, decisions on treatment purported to correct or fix an impairment which may deny or impact upon a facet of their identity. The attribute on best interest of the child is presented together with respect for the evolving capacities of the child, which features in both the CRC and CRPD, to highlight the need to consider the evolving capacities of the child when determining their best interests; and that as a child matures, their views have increasing weight in the assessment of their best interests (see [CRC Committee general comment no 14](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fGC%2f14&Lang=en), CRC/C/GC/14). Children with disabilities are a group within the general population of children who may face greater barriers in having their evolving capacities recognised and respected.

   Including disability, sex, age, migrant status, minority or indigenous background, etc., and explicitly recognises multiple & intersecting forms of discrimination and the denial of reasonable accommodation as constituting disability-based discrimination. [↑](#endnote-ref-1)
2. This includes, among others, the:

   * Right to be heard and express their views with the provision and availability of disability and age-appropriate assistance;
   * Right to seek and receive information;
   * Right to life and development to one’s full potential;
   * Right to preserve one’s identity;
   * Right to physical and mental integrity, including effective prevention of harmful practices and non-consensual psychiatric interventions;
   * Obligation to actively involve and closely consult them;
   * Application of the principle of the best interest of the child and respect for the evolving capacity of the child, as a primary consideration;
   * Right to be informed, trained and educated about their rights;
   * Right to adapted play, sport and education.

   [↑](#endnote-ref-2)
3. And/or are relative to sectors concerning, among others, gender equality, health, social protection, combating violence, education, access to information, freedom of expression, participation in public and political life, migrant integration, access to justice, culture and recreation. [↑](#endnote-ref-3)
4. This includes measures targeting children with disabilities, including ensuring the inclusion of children with disabilities systematically within the development and delivery of child-rights impact assessments which determine and foresee the impact of any proposed policy, legislation, regulation, budget or other administrative decision which affect children (See [general comment no.14](https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fGC%2f14&Lang=en) of the Committee on the Rights of the Child, para. 99). [↑](#endnote-ref-4)
5. Mandatory reporting should document the extent to which programmes have:

   the inclusion and empowerment of persons with disabilities as a primary objective;

   significant activities and mechanisms to support the inclusion and empowerment of persons with disabilities;

   no focus on the inclusion of persons with disabilities;

   disaggregation by sex, age, geographical location, and other grounds relating to different layers of identity, such as minority or indigenous background or migrant status. [↑](#endnote-ref-5)
6. Particularly with respect to treatments and interventions whose effectiveness is uncertain or deemed controversial and which are invasive and/or irreversible. For example, the administration of psychotropic drugs including neuroleptics; experimental mercury detoxification treatments, growth attenuation therapy, sterilization, behavioural modification regimes such as the administration of electric shocks and packing of autistic children; conductive education for children with cerebral palsy; limb-lengthening for children with restricted growth, etc. [↑](#endnote-ref-6)
7. By age, sex, disability, migrant status, minority or indigenous background, and other prohibited grounds of discrimination. [↑](#endnote-ref-7)
8. Which recognise and explicitly include:

   The prohibition of discrimination on the basis of disability and the provision of reasonable accommodation;

   Respect for the rights of the child, including the right to express their views freely with due weight given to their views in all matters affecting them and the right of the child to preserve their identity as it relates, among others, to their sex, gender, impairment/disability, social, cultural and linguistic identity and their intersections;

   The evolving capacities of the child which should not only assess the physical, emotional, educational and other needs at the specific moment of the decision, but should also consider the child’s future and potential development;

   Appropriate measures to ensure effective and equal opportunities which may require positive measures aimed at redressing a situation of inequality. [↑](#endnote-ref-8)
9. This indicator requires verifying concrete activities undertaken by public authorities to involve persons with disabilities in decision-making processes related to issues that directly or indirectly affect them in line with article 4(3) of the CRPD and [general comment no. 7](https://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CRPD/C/GC/7&Lang=en) of the CRPD Committee, including consultation meetings, technical briefings, online consultation surveys, calls for comments on draft legislation and policies, among other methods and mechanisms of participation. In this regard, States must

   ensure that consultation processes are transparent and accessible;

   ensure provision of appropriate and accessible information;

   not withhold information, condition or prevent organizations of persons with disabilities from freely expressing their opinions;

   include both registered and unregistered organizations;

   ensure early and continuous involvement;

   cover related expenses of participants. [↑](#endnote-ref-9)
10. Such as education, participation, health, social protection, culture and recreation, among others. [↑](#endnote-ref-10)
11. This includes:

    the human rights based approach to disability;

    child rights impact assessments inclusive of children with disabilities;

    the obligation to provide reasonable accommodation;

    the best interest of the child;

    the evolving capacities of children with disabilities and their right to preserve their identities;

    accessible and alternative forms of communication;

    provision of disability and age-appropriate assistance;

    involving children with disabilities within the design, implementation and monitoring of training. [↑](#endnote-ref-11)
12. This includes their parents and relatives, staff working for and with children (i.e. teachers, etc.) and the community at large (i.e. including peers, classmates, etc.), and should ensure the participation of girls and boys with disabilities in the design, implementation and monitoring of awareness raising and information programmes. [↑](#endnote-ref-12)
13. The prevalence of undernourishment (PoU) is an estimate of the proportion of the population whose habitual food consumption is insufficient to provide the dietary energy levels that are required to maintain a normal active and healthy life.  [↑](#endnote-ref-13)
14. <https://www.unicef.org/disabilities/files/Stronger-Together_Nutrition_Disability_Groce_Challenger_Kerac.pdf> [↑](#endnote-ref-14)
15. See Council of Europe, Child participation assessment tool, available at <https://rm.coe.int/16806482d9>. [↑](#endnote-ref-15)