Mandates of the Special Rapporteur on the rights of persons with disabilities; the Working Group on Arbitrary Detention; the Special Rapporteur on the right to education; the Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context; the Independent Expert on the enjoyment of all human rights by older persons; the Special Rapporteur on extreme poverty and human rights; the Special Rapporteur on the sale and sexual exploitation of children, including child prostitution, child pornography and other child sexual abuse material; the Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment; the Special Rapporteur on trafficking in persons, especially women and children; the Special Rapporteur on violence against women, its causes and consequences; and the Working Group on discrimination against women and girls.

REFERENCE:
AL UKR 5/2021

30 June 2021

Excellency,

We have the honour to address you in our capacities as Special Rapporteur on the rights of persons with disabilities; Working Group on Arbitrary Detention; Special Rapporteur on the right to education; Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context; Independent Expert on the enjoyment of all human rights by older persons; Special Rapporteur on extreme poverty and human rights; Special Rapporteur on the sale and sexual exploitation of children, including child prostitution, child pornography and other child sexual abuse material; Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment; Special Rapporteur on trafficking in persons, especially women and children; Special Rapporteur on violence against women, its causes and consequences; and Working Group on discrimination against women and girls, pursuant to Human Rights Council resolutions 44/10, 42/22, 44/3, 43/14, 42/12, 44/13, 43/22, 43/20, 44/4, 41/17 and 41/6.

In this connection, we would like to bring to the attention of your Excellency’s Government information we have received concerning the situation of persons with disabilities in institutions in Ukraine.

We welcome that Your Excellency’s Government has adopted numerous laws and policies that promote the rights of persons with disabilities to independence, social integration and full participation in the life of society without discrimination, with a view to aligning the national framework with international human rights standards, including the Convention on the Rights of Persons with Disabilities (CRPD).

We also note the efforts made by Your Excellency’s Government over the past five years to strengthen the rights of the child and its objective to end the use of institutional care for children. In particular, we note the adoption of a National Strategy on Reform of the Institutional Care System (2017-2026) on 9 August 2017, and of an action plan to transform the national childcare system. We consider that it has led to some positive developments since 2017, and could contribute to ensuring non-discrimination, and to advance equality, security and liberty for persons with disabilities, including persons with disabilities in institutions.
We wish to express our concern, however, on the continued and widespread use of institutionalization for persons with disabilities, which affects many groups across the life-course, and intersectionally, comprising women, older persons, and children with disabilities, in Ukraine, notwithstanding the efforts made in the past years to adopt legislation to put an end to institutionalization.

We note with concern the recent developments including the proposed amendments to the National Strategy for Reforming the System of Institutional Care and Upbringing of Children for 2017-2026, which raise multiple concerns vis-à-vis international human rights law and standards, including in particular the standards set out in the CRPD.

According to the information received:

As of 1 January 2020, there were a total number of 2,703,006 persons with disabilities registered in Ukraine. Of them, 163,886 were children, of whom 42.7 per cent were girls\(^1\). Data disaggregated by sex and age on the overall totals was not available.

As of 2019, 40,801 adults, of whom 18,986 are women and approximately half are older persons, lived in 282 public residential care institutions\(^2\). This estimation does not include persons who resided in psychiatric hospitals for whom data is not available. Additionally, no data is available on privately run institutions, as the Government does not have a register of those and does not monitor the situation there.

In 2017, the Cabinet of Ministers adopted a Strategy on deinstitutionalization of children, including children with disabilities\(^3\). At the time of writing, no strategy is in place for the deinstitutionalization of adults with disabilities.

In addition, new institutions are being built, including a facility for women with intellectual and psychosocial disabilities in Kyiv. It is alleged that no consultation was held on this matter with civil society, human rights organizations, nor with organizations of persons with disabilities or, in particular, women with disabilities.

In addition to the lack of deinstitutionalization strategies for adults, it is alleged that efforts have diminished in some other areas related to the protection of the rights of persons with disabilities. For instance, in October 2019, the Ukrainian Parliament did not pass the draft legislation introduced in 2017 aiming to reinforce the safety of persons with disabilities against exploitation\(^4\).

It was reported that a number of persons with disabilities were involuntarily admitted into psychiatric hospitals and received forced medication, without

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being informed about the kind of drugs that they were given\(^5\), against the provisions of international human rights law including, inter alia, articles 14 and 17 of the CRPD to which Ukraine is a party since February 2010.

A number of persons with intellectual and psychosocial disabilities have been forced to enter institutions following a Court or administrative decision, or rulings from another authority\(^6\). These persons may be forced to stay in these institutions without the discretion or possibility to leave, because of their health condition, disability, old age and related care needs, or financial situation and the lack of community-based supports to facilitate living arrangements in the community.

We are concerned at the numerous reports of torture and ill-treatment of persons with disabilities in social care and mental health institutions, including via the use of physical restraint, forced nudity, beating, placement in solitary confinement and excessive limitations of freedom of movement.

We are also greatly concerned at the widespread use of physical restraint and isolation of children in institutions\(^7\). This is contrary to international human rights obligations on the prohibition of, and freedom from, torture and inhuman or degrading treatment or punishment, violence and abuse, as provided, inter alia, in articles 15 and 16 of the CRPD and in articles 2 and 4 of the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT).

Ukrainian legislation does not envisage that free legal aid centers be informed in the case of involuntary admission of persons with disabilities in institutions. However, Cabinet of Ministers Resolution No. 1363 of 28 December 2011 obliges government bodies to immediately inform the Coordination Center for Legal Aid Provision of all arrests carried out by police, and detentions. The Resolution does not specifically include involuntary institutionalization, although this constitutes a form of deprivation of liberty.

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De-institutionalization depends on having viable community living options in place. Persons with intellectual and psychosocial disabilities of all ages in Ukraine face enormous obstacles to their right to live independently and be included in the community, including the lack of accessible and affordable housing. Social housing is not accessible nor provided to persons with disabilities, including those who were raised in institutions when they were children and had to exit the institution upon becoming adults. Despite the provisions of Law No. 2671-VIII “On Social Services” of 17 October 2019, which aim to provide services for supported living arrangements, social support and inclusive education for persons with intellectual and psychological disabilities, it is reported that these services are available only in a few communities and for a limited number of persons. This does not comply with the provisions of human rights standards, including articles 19 and 28 of the CRPD.

Community services and facilities for the general population do not seem to be available to persons with disabilities on an equal basis with others, nor are they responsive to their needs. Consequently, many persons with disabilities are still forced to live in institutions and long-term care facilities simply because there is no other option available. As of 1 January 2020, 31,200 persons with disabilities, 46.5 per cent of whom are women, resided in long-term care institutions in Ukraine\(^8\). Furthermore, long-term facilities for persons with intellectual and psychosocial disabilities are mostly located in rural areas where access to medical care and other basic services outside the institutions is limited.

*Intersectional impacts: women with disabilities in institutions*

Laws and policies of Ukraine promoting equality of women do not take into account the situation of women with disabilities. We are concerned at the reports of sexual violence committed against residents of institutions for persons with intellectual and psychosocial disabilities and inhumane and degrading conditions such as forced nudity\(^9\). In 2015, the Committee on the Rights of Persons with Disabilities (CRPD Committee) expressed its concern about the reports of trafficking, sexual abuse and exploitation of women with disabilities in institutions\(^10\).

Two draft Laws bearing the name “On Introducing Changes to Some Legislative Acts of Ukraine on Enhanced Combating of Human Trafficking and Protection of Victims of Human Trafficking” have been presented to the Parliament in 2017. One of the draft laws was revoked. The other one was approved at the first reading on 7 November 2017 and prepared for the second reading. However, to date, the draft law remains pending\(^11\).

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\(^10\) See CRPD/C/UKR/CO/1, p. 3.

The draft envisages measures by the central executive authorities to protect persons with disabilities from sexual violence and exploitation. We welcome that the draft law includes persons with disabilities, however we remain concerned that its being gender-blind may constitute a barrier to the specific protection needs of women and girls with disabilities who are victims of trafficking, particularly those living in institutions.

We are concerned that women and girls with disabilities are greatly exposed and subject to sexual violence and exploitation in institutions. For instance, in 2019, the National Police in Zaporizhzhya opened investigations against staff members of a state-run institution for children with disabilities on allegations of forced labour and exploitation of children.

Additionally, we are concerned at the lack of data, including age-disaggregated data, on gender-based violence against women and girls with disabilities and the widespread lack of access for women and girls with disabilities to temporary shelters and protection services, as well as rehabilitation, for survivors of domestic violence.

**Intersectional impacts: children with disabilities in institutions**

According to the Law No. 2402-III “On the Protection of Childhood” of 26 April 2001, child protection is defined as a “nationwide strategic priority”. A Strategy for deinstitutionalization of children for 2017-2026 and an action plan were adopted in August 2017. On 1 June 2020, the Cabinet of Ministers issued a decree “On approving of the Plan of measures for the implementation of the second stage of the National Strategy for reforming of the system of the institutional care and upbringing of children for the period 2017-2026”. This National Strategy and Action Plan for its implementation were approved in 2017 and were considered a significant step towards the protection of children’s rights but also towards the application of the Convention on the Rights of the Child (CRC) and the CRPD, to which Ukraine is a party. This reform was expected to decrease the number of children, and later on, adults with disabilities in institutions and/or long-term care facilities in the future.

In 2020, the Cabinet of Ministers developed a draft order “on amendments to the National Strategy for Reforming the System of Institutional Care and Upbringing of Children for 2017-2026”, which amends the abovementioned strategy. The draft order envisages the exclusion from the National Strategy of Institutions of special general secondary education, institutions for specialized educations, lyceums with round-the-clock stay of the child, and postpones the termination of placement of young children, under 3 years of age, in ‘baby

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14 See [https://www.msp.gov.ua/news/19579.html](https://www.msp.gov.ua/news/19579.html) and [https://www.msp.gov.ua/projects/645/?fbclid=IwAR2WqBDc1p9rVI2G0_aJ_RW4npwM9ODDA9mnpPKg11hn8ISAwqnoTw3dFy](https://www.msp.gov.ua/projects/645/?fbclid=IwAR2WqBDc1p9rVI2G0_aJ_RW4npwM9ODDA9mnpPKg11hn8ISAwqnoTw3dFy)
homes’ until 2026\textsuperscript{14,15}.

We are concerned that, if adopted, the draft order would have the effect of excluding special boarding schools, education and rehabilitation centers and sanatoria (boarding schools) from the scope of deinstitutionalization. The exclusion of special boarding schools for children with disabilities from the list of residential care institutions that were part of the deinstitutionalization strategy would constitute a significant and worrisome step backwards towards ending institutionalization and would lead, \textit{inter alia}, to increased isolation and marginalization of children with disabilities.

Despite the measures taken to implement the National Strategy for reforming of the system of the institutional care and upbringing of children for the period 2017-2026, we are concerned that the proposed amendments to the strategy do not comply with international human rights law. If adopted, the reform would constitute a failure to achieve the objectives of strategic plans to develop suitable alternative care options and deinstitutionalization.

Children with intellectual and psychosocial disabilities are very often subjected to institutionalization upon reaching adulthood, because of the lack of education, socialization, habilitation and rehabilitation services in children’s institutions. They are also negatively impacted by the lack of social housing and support to independent living and community living for adults with disabilities.

Additionally, we note that, while some positive developments were made towards inclusive education through legislative changes\textsuperscript{16}, children with disabilities still face great obstacles to access inclusive education. These barriers include, \textit{inter alia}, the lack of infrastructure, services, equipment, appropriate resource allocation, and assistance provided to children with disabilities in schools generally, and a consequent attitude by parents of children with disabilities against the closing of specialized schools. This in turns leads to and reinforces the persistent culture of institutionalization for children with disabilities in childcare institutions and special boarding schools. In addition, should the draft order “on amendments to the National Strategy for Reforming the System of Institutional Care and Upbringing of Children for 2017-2026” be adopted, their access to education would be more hampered and the development of inclusive education will be slowed down. We are concerned that this may amount to a retrograde step in national efforts to implement the provisions of international human rights standards on the right to education and on CRPD provisions on inclusive education, per article 24.

\textsuperscript{14} See https://www.msp.gov.ua/news/19579.html and https://www.msp.gov.ua/projects/645/?fbelid=IwAR2WqBDc1p9tV12G0_aJ_Rw4npuM9ODDA9mnpPKg1fmm8iSAwqnoIw3dEnY.


Furthermore, we are concerned that children with disabilities in institutions, who are removed from families and their communities, are more at risk of experiencing sexual violence, abuse, sale, illegal adoption and trafficking, including trafficking for organs\textsuperscript{17}. As noted by the Special Rapporteur on sale and sexual exploitation of children, “[sale and sexual exploitation of children] appear to be most prevalent against marginalized children struck by poverty, conflict, social exclusion and discrimination; children on the move; children with disabilities; children living in residential care; and children left behind by their parents (A/HRC/43/40, para. 17.) The Special Rapporteur noted, disability may constitute a crucial factor that heightens the risk of being subjected to sale and sexual exploitation for girls and boys (ibid, para 68). “ […] the illicit practices of adoption, including inter-country adoption of children with special needs, is also common, in which States prioritize the adoption of children because they do not have appropriate childcare policies, including in some cases by falsifying documentation to classify children as having “special needs” to render them adoptable abroad when such adoptions are prioritized or facilitated” (A/HRC/34/55, para. 34). Children with disabilities placed in institutions who are transferred to adult psychiatric facilities or social care institutions when they are as young as 16 years are at high risk of, and exposed to, isolation, exclusion and neglect. It is reported that several long-term care institutions for children with intellectual and psychosocial disabilities have created adult departments to which the children are transferred after reaching the age of 18, and end up staying in one facility for their entire life.

In its recent General Recommendation No. 38 on Trafficking of Women and Girls in the Context of International Migration, (CEDAW/C/GC/38, 6 November 2020), the Committee on the Elimination of Discrimination Against Women (CEDAW) noted that women and girls with disabilities may be at particular risk of trafficking, where their life experiences are marked by serious human rights deprivations\textsuperscript{18}. In her address to the CRPD Committee on 8 March 2021, the Special Rapporteur on Trafficking in Persons, especially women and children, highlighted that risks and vulnerability to trafficking may be linked to institutional and congregated settings and noted that Article 16 (3) of the CRPD requires States Parties to ensure that “all facilities and programmes designed to serve persons with disabilities are effectively monitored by independent authorities.” The Special Rapporteur also highlighted that identification of victims of trafficking is a positive obligation on states, and is not dependent on self-identification. It is, therefore, critical to ensure that information for victims of trafficking and those at risk of exploitation is accessible and easily available, and that the specific risks faced by persons with disabilities, are recognized and addressed by all actors involved in National Referral Mechanisms.

The lack of allocation of adequate financial, human and structural resources for deinstitutionalization programmes is also a concern. Reportedly, there is a lack of financial allocations towards child protection and family-based alternative care for children with disabilities, and local authorities may have difficulties to implement the reform for the realisation of deinstitutionalisation,

\textsuperscript{18} See CEDAW/C/GC/38, para. 20)
and particularly with regard to introducing new social services to support families with children with disabilities—i.e. strengthening the “gatekeeping”219. No clear data is available on this matter. Reportedly, a working group on development of social services was introduced recently, in order to, among others; look into the financial mechanisms put in place on deinstitutionalization at the local level. Indeed, adequate resources are not necessarily available for actions supporting family reunification or for the prevention of family separation.

The lack of national data on the prevalence of children needing protection or on the reasons children are referred to institutions also contributes to the difficulty of policy makers and service providers to plan and budget the programmes of child protection, including deinstitutionalization. We are concerned that this undermines the provisions set forth in article 31 of the CRPD, on statistics and data collection, which require States Parties to undertake the necessary data collection on persons with disabilities to create and implement policies that give effect to the provisions of the Convention.

The impact of the COVID-19 pandemic on the rights of persons with disabilities and older persons with disabilities in institutions

The COVID-19 pandemic has put people’s health at risk but also created a negative socio-economic impact on their well-being, including barriers in accessing health care and other social services with a particularly negative impact on persons with disabilities, older persons and women. It also aggravated the humanitarian consequences of the ongoing armed conflict that Ukraine is experiencing, thus increasing the protection needs of persons with disabilities, especially older persons with disabilities, persons living with dementia or cognitive decline, and persons with psychosocial disabilities living in institutions, or who are homeless20. Many psychiatric hospitals in Ukraine have reported outbreaks given that the length of the treatments may have facilitated the spread of COVID-19.

During the quarantine measures imposed by the Government as part of the COVID-19 response, the institutionalization of persons with disabilities increased their social isolation, as visits, including by family members, were not allowed from March to mid-November 202021. Additionally, the Government banned visits to care institutions for older persons, persons with disabilities and persons with intellectual and psychosocial impairments in the

21 Cabinet of Ministers of Ukraine, Regulation No. 641, 22 July 2020. On 11 November 2021, the Regulation No 641 was amended to allow visits by relatives and legal representatives once a week.
areas under the “yellow” level of quarantine and higher\textsuperscript{22}. It is reported that only a few facilities managed to organize outdoor visits. Some facilities did not have phones and internet connections, and residents were therefore prevented from communicating with their families. It is expected that the ‘adaptive quarantine’ period, established by the Government from 24 February to 30 June 2021, will have the same effects on persons with disabilities and older persons living in institutions. In this regard, we are also concerned that most of the persons with disabilities and older persons living in institutions do not have any access to psychosocial or mental health services.

The COVID-19 pandemic has highlighted the prominent importance of protecting the rights of persons with disabilities to live in community rather than in institutions. In order to comply with the provisions of the CRPD and to ensure non-discrimination, equality, security and liberty of persons with disabilities, developing comprehensive community-based support services is more necessary than ever\textsuperscript{23}.

On 22 July 2020, the Cabinet of Ministers issued resolution N\textsuperscript{632} to implement the law “[o]n government support for families with children”. This resolution has a narrow scope and limits social assistance that single parents receive only to those who meet certain conditions, notably having a formal employment, or being a single social taxpayer or a registered job seeker for at least three months. These criteria disproportionately affect women and women with disabilities, and constitute a retrogressive in the implementation of Ukraine’s obligations under international human rights law.

On 12 March 2020, following a regulation issued by the Cabinet of Ministers of Ukraine, all schools were closed, including boarding schools for children with disabilities. As a consequence, all children living in institutions were returned to their families or communities. We note that no prior assessment of the children’s family situations, nor protection needs, were taken into consideration while making the decision, which has led to the children being exposed to abuse and neglect as a consequence of their return, while also limiting their access to education and social protection. We note that, following this incident, the Ministry of Social Policy in collaboration with UNICEF, initiated a programme in five regions of Ukraine to assess the needs of children returning from boarding institutions because of COVID-19 and their families, in order to ensure child protection as appropriate and prevent

\textsuperscript{22} On 22 July 2020, the Government of Ukraine (Cabinet of Ministers) issued Resolution No. 641 that eased off initial quarantine requirements from March 2020, including those banning all visits to social care institutions (see https://www.kmu.gov.ua/mpas/pro-vstanovlenya-karantinu-ta-zapr-641). The new system foresaw the assignment of ‘red’, ‘orange’, ‘yellow’ and ‘green’ zones (‘red’ being most restrictive) of COVID-19 outbreak to regions or districts, depending on the statistics and on a number of pre-established criteria. The criteria include: bed occupancy by COVID-19 patients, the average amount of testing, the COVID-19 infections growth rate and a coefficient of detection of cases of COVID-19 infection. The transition of the region from one zone to another is possible if there are changes in one of the indicators for five days in a row. The basic mandatory requirements for all ‘zones’ include wearing face masks in public places and holding public events only with more than five square meters per person. In the ‘yellow zone’ restrictions include visits to social care institutions for older persons and persons with disabilities, except for emergency personnel. In the ‘orange zone’ it is prohibited to hold public events with more than one hundred people and with no more than one person per twenty square meters. The ‘red zone’ prohibitions include the suspension of public transport, work of educational institutions and shopping malls, cafes and restaurants.

further institutionalization when possible, including with the provision of support plan to families\textsuperscript{24}.

Because of COVID-19, and in the light of the current conflict situation in Ukraine, freedom of movement has been restricted, and hundreds of people were not able to cross the contact line to return to their home or to take care of relatives with disabilities. Furthermore, the lockdown increased the exclusion and the isolation of persons with disabilities in Ukraine\textsuperscript{25}.

We are concerned over the negative impact of the COVID-19 pandemic on persons with disabilities in Ukraine, particularly for those living in institutions, and the spread of the virus in many private and public institutional residence facilities. The lack of access to medical care for persons in institutions including persons with health conditions other than COVID-19 is also a concern, together with the lack of access to information about the pandemic for persons with disabilities in institutions and those in psychiatric hospitals, including in accessible formats and with clear guidance for potentially infected persons. As observed by the Special Rapporteur on sale and sexual exploitation of children, “[g]lobally, confinement measures, economic shutdowns and the disrupted provision of already limited child protection services have exacerbated the vulnerability of the most vulnerable children, including children with disabilities; […] and children living in institutions, as cases of violence, sexual abuse and exploitation of children confined in these premises are likely to go undetected. During the COVID-19 pandemic and lockdowns, the defining negative aspects of institutionalization have become increasingly blatant and tend only to worsen with the disruption of service provision and the lack of reporting and oversight\textsuperscript{26}.

Persons with disabilities and older persons, especially those in institutions, are disproportionately affected by the COVID-19 pandemic\textsuperscript{27}. The risks to get infected is amplified for persons with disabilities and older persons living in long-care facilities and institutions, including with regard to the contacts with caregivers and the difficulty to practice physical distancing for both residents and those who work in the institutions. The Independent Expert on the enjoyment of all human rights by older persons pointed to the negative impacts that measures to contain the pandemic had on the rights of older persons in care homes.\textsuperscript{28} Additionally, it is reported that long-term institutions did not provide adequate medical care to persons with intellectual and psychosocial disabilities who had been infected with the COVID-19 virus\textsuperscript{29}.

While we do not wish to prejudge the accuracy of these allegations, we wish to express our deep concern at the situation of persons with disabilities, comprising women, children and older persons with disabilities living in institutions. We call for

\textsuperscript{24} https://www.unicef.org/ukraine/en/node/2191
\textsuperscript{26} See A/HRC/46/3, paras. 34 and 49-50.
\textsuperscript{28} A/75/205 paras 41, 50, 51
Your Excellency’s Government to prioritize its efforts towards aligning its legislation and policies with the CRPD and other international human rights standards, with a view to putting an end to the institutionalization of persons with disabilities and ensuring that their right to live independently and in the community is implemented and respected.

We also recommend that Your Excellency’s government strengthens its efforts to ensure that persons with disabilities, comprising women, children, and older persons with disabilities, can enjoy their rights to equality and non-discrimination, and to be safe from violence, ill-treatment, abuse and neglect including in the context of institutionalisation.

In connection with the above alleged facts and concerns, please refer to the Annex on Reference to international human rights law attached to this letter which cites international human rights instruments and standards relevant to these allegations.

As it is our responsibility, under the mandates provided to us by the Human Rights Council, to seek to clarify all cases brought to our attention, we would be grateful for your observations on the following matters:

1. Please provide any additional information and/or comment(s) you may have on the above-mentioned allegations.

2. Please explain the actions that your Excellency’s Government has undertaken, or is planning to take, to comply with the provisions of international instruments towards deinstitutionalization of persons with disabilities, comprising women, children and older persons with disabilities.

3. Please provide information on measures taken to implement the provisions of Article 9 of the ICCPR, including the right of anyone detained to challenge the legality of his or her detention before a court, as envisaged by article 9(4) of the ICCPR. Please elaborate on the steps taken to ensure that detained persons have access to legal assistance of their own choosing in order to ensure an effective exercise of this right.

4. Please provide information on measures taken to implement the provisions of Article 14 and Article 19 of the CRPD, by ensuring that persons with disabilities are able to enjoy their right to live independently in their community.

5. Please provide information and disaggregated data on the impact of the pandemic on persons with disabilities, including on their exercise of the right to adequate housing.

6. Please provide information on whether, and if so, how, the conditions of placement into these institutions take into consideration gender issues, age, and other circumstances such as the consequences of COVID-19.

7. Please highlight the steps that your Excellency’s Government has taken, or is planning to take, to get a gatekeeping system for the
prevention of further placement of children with disabilities into institutional care.

8. Please provide information on measures taken to strengthen the right to quality inclusive education of children with disabilities.

9. Please provide information on measures that Your Excellency’s Government has undertaken, or is planning to take, against trafficking, sexual abuse and exploitation of women and girls with disabilities in institutions and in family settings, and to prosecute and punish perpetrators, ensuring effective, proportionate and dissuasive sanctions are imposed and that where offences are committed against children, or committed by a public official in the performance of their duties, that such circumstances are considered as aggravating in the determination of the penalty imposed on the perpetrator.

10. Please provide information on the measures taken to provide for the physical, psychological and social recovery of victims of trafficking in persons with disabilities, including, in appropriate cases, in cooperation with non-governmental organizations, as well as remedies and compensation to victims / survivors of such crimes.

11. Please provide information on measures taken to ensure access to justice, and to effective remedies for persons with disabilities in institutional and family settings who are victims of trafficking in persons. In particular, please provide information on the measures taken to implement child-friendly justice procedures to support child victims of trafficking with disabilities in participating in criminal justice proceedings.

12. Please provide information on measures taken to ensure early identification and referral for specialised assistance of persons with disabilities who are victims or potential victims of trafficking, and to ensure that they are provided with the support that may be required to exercise their legal capacity in accordance with Article 12 of the CRPD, in all relevant legal proceedings.

This communication and any response received from your Excellency’s Government will be made public via the communications reporting website within 60 days. They will also subsequently be made available in the usual report to be presented to the Human Rights Council.

While awaiting a reply, we urge that all necessary interim measures be taken to halt the alleged violations and prevent their re-occurrence and in the event that the investigations support or suggest the allegations to be correct, to ensure the accountability of any person(s) responsible for the alleged violations.

We may publicly express our concerns in the near future as, in our view, the information upon which the press release will be based is sufficiently reliable to indicate a matter warranting immediate attention. We also believe that the wider public should be alerted to the potential implications of the above-mentioned allegations. The press release will indicate that we have been in contact with your
Excellency’s Government’s to clarify the issue/s in question.

We would like to inform your Excellency’s Government that after having transmitted a joint communication to the Government, the Working Group on Arbitrary Detention may transmit the cases through its regular procedure in order to render an opinion on whether the deprivation of liberty was arbitrary or not. Such letters in no way preclude any opinion the Working Group may render. The Government is required to respond separately to the joint communication and the regular procedure.

Please accept, Excellency, the assurances of our highest consideration.

Gerard Quinn
Special Rapporteur on the rights of persons with disabilities

Miriam Estrada-Castillo
Vice-Chair of the Working Group on Arbitrary Detention

Koumbou Boly Barry
Special Rapporteur on education

Balakrishnan Rajagopal
Special Rapporteur on adequate housing as a component of the right to an adequate standard of living, and on the right to non-discrimination in this context

Claudia Mahler
Independent Expert on the enjoyment of all human rights by older persons

Olivier De Schutter
Special Rapporteur on extreme poverty and human rights

Mama Fatima Singhatel
Special Rapporteur on the sale and sexual exploitation of children, including child prostitution, child pornography and other child sexual abuse material

Nils Melzer
Special Rapporteur on torture and other cruel, inhuman or degrading treatment or punishment

Siobhán Mullally
Special Rapporteur on trafficking in persons, especially women and children

Dubravka Šimonovic
Special Rapporteur on violence against women, its causes and consequences

Melissa Upreti
Chair-Rapporteur of the Working Group on discrimination against women and girls
Annex

Reference to international human rights law

In connection with above alleged facts and concerns, we would like to refer to the attention of your Excellency’s Government the international human rights standards that are applicable in this case. They are enshrined, inter alia, in: the Universal Declaration of Human Rights; the International Covenant on Civil and Political Rights (ICCPR) and the International Covenant on Economic, Social and Cultural Rights (ICESCR), (acceded to by Ukraine on 12 November 1970); the Convention on the Rights of Persons with Disabilities (CRPD) and its Optional Protocol, (ratified by Ukraine on 4 February 2010); the Convention on the Rights of the Child (CRC) (ratified by Ukraine on 28 August 1991); and the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT) (ratified by Ukraine on 24 February 1987).

Article 19 of the CRPD sets out the right of persons with disabilities to live independently and be included in the community and to choose where and with whom they live. It stipulates that States must ensure that persons with disabilities have access to a range of in-home, residential and other community support services, including personal assistance necessary to support living and inclusion in the community, and to prevent isolation or segregation from the community and community services and facilities for the general population are available on an equal basis to persons with disabilities and are responsive to their needs.

The provisions of Article 19 prohibit institutionalization and challenge social protection policies that segregate persons with disabilities in social care or medical settings. In its General comment No. 5 (2017) on living independently and being included in the community, the Committee on the Rights of Persons with Disabilities stressed that, in order to respect the rights of persons with disabilities under Article 19 of the CRPD, States need to phase out institutionalization. 30 We wish to highlight that Article 19 should be read in conjunction with Article 28 of the CRPD on adequate standard of living and social protection, which sets out the obligation of States to develop alternatives to institutional care for persons with disabilities and to further their deinstitutionalization, including by ensuring access to public housing programmes.

Ensuring that older persons enjoy autonomy and independence is critical for their well-being and enjoyment of all human rights. Independence is a key element in the UN Principles for Older Persons adopted by the General Assembly (A/RES/46/91) in 1991. The Principles also stress that older persons should remain integrated in society and should have access to social and legal services to enhance their autonomy, protection and care. Art. 23 of the Revised European Social Charter of 1996, ratified by Ukraine on 21.12.2006, stipulates the right of older persons to social protection, enabling them, among other things, to choose their lifestyle freely and to lead independent lives in their familiar surrounding for as long as they wish and are able. Recommendation CM/Rec(2014)2 of the Committee of Ministers of the Council of Europe on the promotion of human rights of older persons recognizes that older persons are “entitled to lead their lives independently, in a self-determined and autonomous manner”. Furthermore, the Special Rapporteur on the rights of persons

30 See CRPD/C/GC/5, para. 49.
with disabilities noted that the significant barriers faced by older persons to exercise their rights due to the intersection between ableism and ageism and recommended that the rights of older persons with disabilities should be mainstreamed into all disability and ageing-relate policies and programmes.\(^3\)

We would like to draw your attention to Article 13 of the International Covenant on Economic, Social and Cultural Rights recognizes the right of everyone to an education that is “directed to the full development of the human personality and the sense of its dignity”.

The right to adequate housing is enshrined in Article 11 of the International Covenant on Economic, Social and Cultural Rights (ICESCR) and Article 28 of the CRPD. As highlighted by the Committee on Economic, Social and Cultural Rights, it must be understood not only to include the provision of four walls and a roof, but essentially as the right for everyone to stay in a place in security, peace and dignity (General Comment No. 4, para.7), conditions which cannot be met in long-term congregate living institutional arrangements.

The right to adequate housing for persons with disabilities includes furthermore the essential element of access to required support services, including social and psychological services, and if required reasonable accommodation, to enable persons with disabilities to live independently and participate fully in all aspects of life (Articles 2, 5.3 and 19 of the CRPD). In the context of deinstitutionalization, the right to adequate housing furthermore strictly requires that no one is discharged into a homelessness or substandard housing. After deinstitutionalization, everyone should have access to adequate and affordable housing with long-term security of tenure, in which they can live alone or together with others in a community and place of his or her choice.\(^3\)

In addition, we wish to refer to the 2020 report of the current Special Rapporteur on the right to adequate housing to the General Assembly (A/75/148), in which he called attention to the negative impact of the Covid-19 pandemic on persons with disabilities, including the emotional and psychological toll experienced by persons with disabilities in care institutions. We also wish to recall the 2017 report of the former Special Rapporteur on the right to adequate housing to the General Assembly (A/72/128), in which she recommended that, in consultation with persons with disabilities and their organizations, States should ensure that all persons with disabilities are able to live free from institutionalization and that access to adequate housing, the requisite services and appropriately trained support is provided in the community.\(^3\)

We also wish to bring to the attention of your Excellency’s Government that the institutionalization of persons with disabilities falls within the definition of discrimination, as provided in Article 5 of the CRPD, and the consequent immediate obligation of States to repeal all laws and regulatory frameworks that allow for, or condone institutionalization for persons with disabilities who have the right to live in the community.

We wish to refer your Excellency’s Government to article 9 of the ICCPR whereby everyone has the right to liberty and security of person, no one shall be

\(^{31}\) A/74/186

\(^{32}\) See Article 19 CRPD, CESCGR, General Comment No.4, and A/72/128)

\(^{33}\) See A/72/128, para. 82(a)(iii).
subjected to arbitrary arrest or detention and no one shall be deprived of his liberty except on such grounds and in accordance with such procedure as are established by law. In this respect, we recall that to establish that a detention is indeed legal, anyone detained has the right to challenge the legality of his or her detention before a court, as envisaged by article 9(4) of the ICCPR. According to the UN Basic Principles and Guidelines on Remedies and Procedures on the Rights of Anyone Deprived of their Liberty to Bring Proceedings before a Court (A/HRC/30/37), the right to challenge the lawfulness of detention before a court, which is in fact a peremptory norm of international law, applies to all forms of deprivation of liberty, including not only to detention for purposes of criminal proceedings but also to situations of detention under administrative and other fields of law, including involuntary confinement in medical or psychiatric facilities. Moreover, it also applies ‘irrespective of the place of detention or the legal terminology used in the legislation. Any form of deprivation of liberty on any ground must be subject to effective oversight and control by the judiciary.’ We further note that in order to ensure an effective exercise of this right, the detained persons should have access to legal assistance of their own choosing as stipulated in the UN Basic Principles and Guidelines.34

Article 10 (1) of the ICCPR establishes that all persons deprived of their liberty shall be treated with humanity and with respect for the inherent dignity of the human person. In its in General Comment No. 21, the Human Rights Committee explained that this provision applies to anyone deprived of their liberty under the laws and authority of the State, including in prisons, hospitals, psychiatric institutions, or elsewhere, without discrimination.

Article 14 of the CRPD on liberty and security of person also prohibits unlawful and/or arbitrary detention on grounds of disability, including confinement to a residential or detention facility, involuntary deprivation of liberty or non-consensual medical treatment. Article 14.1(b) affirms that disability shall in no case justify a deprivation of liberty. The Committee on the Rights of Persons with Disabilities has categorically stated that the implementation of Article 14 requires respecting the right of persons with disabilities to choose their place of residence, as enshrined in Article 19. The Committee has repeatedly expressed concern about the institutionalization of persons with disabilities and the lack of support services in the community and has recommended implementing support services and effective deinstitutionalization strategies in consultation with organizations of persons with disabilities.

Recently, in a joint statement, the Committee and the Special Envoy of the United Nations Secretary-General on Disability and Accessibility stressed that States parties should accelerate measures of deinstitutionalization of persons with disabilities from all types of institutions.35

Although States took extraordinary measures to protect the health and well-being of the population in light of the COVID-19 pandemic, we wish to remind Your Excellency’s Government that, even in the context of a public health emergency, these measures need to be based on the rule of law and be aligned with human rights standards. In particular, emergency declarations and policies that are based on the

34 See also A/HRC/30/37, annex, principle 20 and corresponding guideline 20.
35 Joint statement by the Chair of the United Nations Committee on the Rights of Persons with Disabilities, on behalf of the Committee on the Rights of Persons with Disabilities and the Special Envoy of the United Nations Secretary-General on Disability and Accessibility - Adopted on 1 April 2020, available on https://www.ohchr.org/EN/HRBodies/CRPD/Pages/CRPDStatements.aspx
COVID-19 outbreak should not be used as a basis to target or allow discrimination against particular individuals or groups, including persons with disabilities.\textsuperscript{36} This is in line with the provisions of Article 4 of the International Covenant on Civil and Political Rights (ICCPR).\textsuperscript{37}

Article 11 of the CRPD on situations of risk and humanitarian emergencies provides the obligation of States to take all necessary measures to ensure the protection and safety of persons with disabilities in situations of risk, crisis and emergency, which includes health emergencies such as the COVID-19 pandemic.

In its Guidelines on the right to liberty and security of persons with disabilities,\textsuperscript{38} the Committee stressed that Article 14 of the CRPD does not allow any exception whereby persons may be detained on the grounds of their actual or perceived impairment. Any legislation providing instances in which persons may be detained on the grounds of their actual or perceived impairment, provided there are no other legitimate grounds for their detention, including that they are deemed dangerous to themselves or others, are discriminatory in nature and amount to arbitrary deprivation of liberty.

Article 23 of the CRPD provides for the right to home and family, including ensuring that children with disabilities have equal rights with respect to family life and not to be separated from their parents against their will where such separation is not necessary for the best interests of the child. In its General Comment No. 5 on living independently and being included in the community, the CRPD Committee echoed the concerns of the CRC Committee regarding the high number of children with disabilities placed in institutions, and reiterated the call to support such children’s ability to live in their family, extended family, or foster care (para. 12).

We wish to recall that, in its 2015 Concluding Observations on the initial report of Ukraine, the Committee on the Rights of Persons with Disabilities expressed its concern at the existing “various forms of abuse, including those that can amount to cruel, inhuman or degrading treatment against persons with disabilities, particularly boys and girls in condition of institutionalization.”\textsuperscript{39} It also expressed concern at instances of trafficking, sexual abuse and exploitation of women and girls with disabilities in institutions. The Committee recommended, inter alia, that Ukraine “strengthen its efforts for deinstitutionalization and, in the interim period, provide persons with disabilities in institutions with adequate standards of living including quality nutrition and access to privacy.” The Committee also recommended the systematic monitoring of institutions for children with disabilities, the implementation of protection measures for children with disabilities who remain institutionalized and undertaking measures to eliminate any risks of organs trafficking involving children with disabilities. In addition, article 34 of the Convention on the Rights of the Child, ratified by Ukraine on 27 February 1991, prohibits all forms of sexual exploitation and sexual abuse, including of children with disabilities in view of article 2 of the Convention.

Article 28 of the CRPD specifically recognizes the rights of persons with disabilities to an adequate standard of living and social protection, and to the


\textsuperscript{37} See also https://undocs.org/pdf?symbol=en/E/CN.4/1985/4

\textsuperscript{38} See A/72/55 (Annex), para. 6.

\textsuperscript{39} See CRPD/C/UKR/CO/1, p. 6.
enjoyment of those rights without discrimination on the basis of disability. It also creates an obligation for States to take appropriate measures to ensure that persons with disabilities receive equal access to mainstream social protection programmes and services — including basic services, poverty reduction programmes, housing programmes, and retirement benefits and programmes — as well as access to specific programmes and services for disability related needs and expenses. In recognition of the fact that persons with disabilities often incur additional expenses, States shall take into account disability-related costs to ensure a sufficient allocation of benefits for persons with disabilities. Social protection systems must also respond to the needs of heterogeneous groups within the disability community, including persons who may be easily forgotten in policymaking, such persons with psychosocial or intellectual disabilities.

Article 7 of the CRPD states that children with disabilities enjoy all human rights and fundamental freedoms on an equal basis with other children, that the best interests of the child are a primary consideration in all actions concerning children with disabilities, and that children with disabilities are able to express their views on all matters affecting them and that such views are given due weight.

Concerning the right to inclusive education, in particular practices such as segregation, denial of reasonable accommodation and lack of supports for students with disabilities, we wish to highlight that article 24 of the CRPD affirms the right to quality inclusive education for persons with disabilities at all levels of education. According to, paragraph 1, States parties must ensure the realization of the right of persons with disabilities to education through an inclusive education system at all levels, from pre-schools to extracurricular activities, and for all students, including persons with disabilities, without discrimination and on equal terms with others. Paragraph 2 establishes the obligation of States to provide reasonable accommodation of the individual's requirements and necessary support to facilitate effective education.

Article 15 of the CRPD complements other human rights instruments on the prohibition of torture or any form of cruel, inhuman or degrading treatment inflicted under any pretext or circumstance, such as articles 2 and 4 of the CAT. The lack of disability related support, accessibility and reasonable accommodation places persons with disabilities in sub-standard conditions of institutionalization and/or detention that are incompatible with the prohibition of cruel, inhuman or degrading treatment or punishment, as stated under article 15(2) of the Convention.

We wish to underscore that article 16 of the CRPD affirms the States’ obligation to protect persons with disabilities from all forms of exploitation, violence and abuse, including their gender-based aspects. It sets an obligation for States to prevent the occurrence of all forms of abuse by ensuring the independent monitoring of all facilities and programmes designed to serve persons with disabilities and calls for thorough investigations of allegations concerning serious human rights violations. Article 16 should be read in conjunction with articles 5 and 12 which affirm that persons with disabilities as equal before and under the law and provides for their equal protection against discrimination.

We would also like to bring to Your Excellency’s attention Article 1 of the United Nations Declaration on the Elimination of Violence against Women, which provides that the term "violence against women" means any act of gender-based
violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life. In this context, we wish to recall that the Committee on the Elimination of Discrimination against Women (CEDAW) in its General recommendation No. 19 (1992), updated by General Recommendation No. 35 (2017), defines gender-based violence against women as impairing or nullifying the enjoyment by women of human rights and fundamental freedoms, and constitutes discrimination within the meaning of article 1 of the Convention on the Elimination of All forms of Discrimination Against Women (ratified by your Excellency’s Government on 12 March 1981), whether perpetrated by a State official or a private citizen, in public or private life.

In her report on violence against women with disabilities (A/67/227), the Special Rapporteur on violence against women highlighted that although women with disabilities experience many of the same forms of violence that all women experience — when gender, disability and other factors intersect — the violence against them takes on unique forms, has unique causes and results in unique consequences. While noting that women with disabilities were more likely to experience gender-based violence, the Special Rapporteur recommended that States implement country-level reforms to improve health-care services and facilities in general, including in respect of sexual and reproductive health, and more specifically, to reduce unnecessary imprisonment of individuals with disabilities. She also recommended that States improve and expand disaggregated data collection (gender, age, disability), including on the prevalence, manifestations, causes and consequences of violence against women with disabilities.

On the issue of women with disabilities, the Working Group on discrimination against women and girls expressed in its thematic report on Health and Safety (A/HRC/32/44) that a gender-sensitive approach needs to take into account the specific needs for care and protection of older women, including those widowed, living alone or displaced, those with dementia or other disability, those in need of palliative and geriatric care and those in emergency situations; as these women are most at risk of multiple forms of discrimination, violence and poverty.

The Working Group further expressed that women with disabilities face particular barriers in accessing health care for reasons of cost, distance, discriminatory attitudes, and lack of physical access or information. This seriously limits their access to immunization and reproductive health care. In some settings women with disabilities, particularly intellectual disabilities, are subjected to forced sterilization or termination of pregnancy or to long-term contraception, with relatives or doctors taking decisions on their behalf without their informed consent, in violation of their right to exercise legal capacity guaranted under the CRPD.

Women with disabilities are disproportionately subject to intimate-partner violence, owing to the mutually reinforcing dynamics of gender and disability. The Special Rapporteur on the rights of persons with disabilities has called on States to guarantee women with disabilities safe participation in matters affecting their lives, especially in relation to sexual and reproductive rights and gender-based violence, including sexual violence, matters which are cited in a recent study as high-priority concerns for women and girls with disabilities.
Finally, in its thematic report on women deprived of liberty (A/HRC/41/33), the Working Group expressed that older women with disabilities are also at particular risk of confinement in homes or institutions, owing to prejudices based on both age and disability (A/HRC/40/54).

Furthermore, we would like to draw the attention of your Excellency’s Government to the United Nations Protocol to Prevent, Supress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime (Palermo Protocol). We also would like to refer to Principle 10 and Principle 13 of the OHCHR Recommended Principles and Guidelines on Human Rights and Trafficking.

The Council of Europe Convention on Action against Trafficking in Human Beings, which your Excellency’s Government ratified in 2010, sets out important obligations aimed at improving the protection of victims of trafficking. We would also like to refer to Articles 3, 4 and 14 of the European Convention on Human Rights.

The full texts of the human rights instruments and standards recalled above are available on www.ohchr.org or can be provided upon request.