Committee on the Rights of Persons With Disabilities

Topic area A: “Ensuring the right to Health for people with disabilities as stated in the Article 25 of the Convention”
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1. Welcoming letter
Distinguished Delegates,
Welcome to the 2019 Model United Nations of Thessaloniki and to our Committee on the Rights of People with Disabilities. We are looking forward to meet you and hear your ideas on solutions of international problems that affect people with a disability on a global scale.
The Model United Nations within its nature depends on the cooperation and goodwill of its representatives. With each state having unique interests and concerns, it is
definitely challenging to write, negotiate, and pass resolutions. Every stage of the process demands creativity, respect for one another and diplomatic courtesy.

Being a diplomat means calmly and kindly working with other representatives who may have a different point view. Being a diplomat means you have the good will on finding common ground with other diplomats while still protecting your country’s best interest.

Therefore, we expect each delegate to come to the conference with an understanding of his or her country’s positions and a willingness to forge agreements. Both topics that are going to be discussed during our long meetings are matters that still affect millions of people on a personal and social level. Therefore, your ideas and opinions count as it proves that you have developed an understanding of the topic and gained further knowledge through your research.

As your committee chairs, we will work to make the 2019 ThessISMUN successful and enjoyable. We will do our best to make your experience productive ensuring that the views of all delegates will be truly heard and respected.

“Tact is the knack of making a point without making an enemy.”
— Isaac Newton

Sincerely,

The Board of CRPD 2019

2. The Committee on the Rights of Persons with Disabilities

The Committee is one of the ten UN human rights treaty bodies, each responsible for overseeing the implementation of a particular international human rights treaty. States that have signed or ratified (formally confirmed) the Optional Protocol (GA resolution A/RES/61/106) to the Convention on the Rights of Persons with Disabilities have agreed to allow persons within their jurisdiction to submit complaints to the Committee requesting measures to be taken in case terms of the Convention have been violated. The Committee initially amounted to 12 members but when the aforementioned Convention achieved 80 ratifications the Committee increased to 18 independent legal experts whose duty is to guide and monitor the application of the
Convention on the Rights of Persons with Disabilities. It is noteworthy to mention that most of the Committee’s members have a disability; one member is blind, another has a hearing impairment and so on, making them even more knowledgeable on the needs of persons with disabilities. Additionally, the members of the Committee are elected from a list of persons nominated by the States at the Conference of the State Parties and do not serve as government representatives. They are elected for a four-year term with a possibility of being re-elected once. In the CRPD committee, all states parties are obliged to submit regular reports underlining the legislative, judicial, policy and other measures they have taken for the effective implementation of the rights declared in the Convention. After the submission, the Committee’s job is to examine each report and address its concerns and suggestions to the state party.

3. Introduction to the Topic

The right to health is an important human right, as it guarantees the well-being and the prosperity of the contemporary societies. As people with disabilities represent, nowadays, almost 15%¹ of the total population, it is important to realize their need for specified health services and treatment, that might differ based on the person’s age, and disability, of course.

Article 25 of the Convention on the Rights of Persons with Disabilities constitutes a milestone in the international relevant framework, when addressing the rights of persons with disabilities in the field of healthcare and looks as follows: States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular, States Parties shall: a) Provide persons with disabilities

with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health and population-based public health programmes;
b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;
c) Provide these health services as close as possible to people’s own communities, including in rural areas;
d) Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;
e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;
f) Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

According to this Article of the Convention on the Rights of Persons with Disabilities, persons with disabilities should have access to the highest possible standard of health without facing any form of discrimination, by providing affordable and inclusive healthcare, that applies to their needs. Moreover, there are physical barriers, such as the high costs of the services, the distance (take into consideration that most of the services are established in big cities and not in rural areas) and unskilled personnel that works in the hospitals or in the institutions. The right to healthcare, also, includes sexual and reproductive rights. This means that people with disabilities must be aware

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of their gender related health issues and have the right to decide upon their body and not endure processes that they do not approve of. It is of utmost importance that persons with disabilities should participate in the field of health-care autonomously, by deciding themselves about their body.

Furthermore, taking into account the Article above, healthcare services provided by the national governments, should be manned with specialized and trained personnel, who can identify people tendencies for certain disabilities and own the necessary tools and knowledge to prevent it. Apart from that, though, it is very important for doctors to be able to identify not only the primary health condition of the persons with disabilities, but also the secondary health conditions that follow just because a person has a disability. Last but not least, health insurance services should be distributed to persons with disabilities with no discrimination, according to the article, and should not be discouraged, due to the high chance or redress that might occur.

There is no doubt that access to the appropriate healthcare services will help persons with disabilities overcome a great amount of their problems and become more active members within the society. That’s why the United Nations should ensure that human rights are enjoyed by each person without anybody left behind work hard to provide those people with appropriate services that meet their health related needs and they are going to ameliorate their life and their position within the society.

4. Discrimination in Healthcare

Undoubtedly, the Right to Health is a fundamental right that every single person should be guaranteed. It is not limited to the access of the people to hospitals and medical personnel, but it extends further than that. The “Covenant on Economic, Social and Cultural Rights” mentions that the right to health includes the following requirements (Article 12):

“(a) The provision for the reduction of the stillbirth-rate and of infant mortality and for the healthy development of the child;
(b) The improvement of all aspects of environmental and industrial hygiene;
(c) The prevention, treatment and control of epidemic, endemic, occupational and other diseases.
(d) The creation of conditions which would assure to all medical service and medical attention in the event of sickness."^4

Moreover, it is linked to everything that may guarantee a healthy life and environment for the people and it includes, according to the World Health Organization and the Office of the UN Commissioner of Human Rights. More specifically, it is interconnected with “Safe drinking water and adequate sanitation, Safe food, Adequate nutrition and housing, Healthy working and environmental conditions, Health-related education and information, and Gender equality” 5. All of the requirements above provide the people with adequate living conditions, help and promote equal access to healthcare services with any form of discrimination and protect people from any inhumane treatment such as non-consensual treatment and experiments, forced sterilization and inhuman practices like torture.

When it comes to persons with disabilities, this right is more crucial than any other case, given that this community faces a lot of barriers in order to have access to adequate healthcare services. Apart from their physical disabilities, they often have to deal with the lack of infrastructure, lack of availability of services, or other obstacles. That is why states have the responsibility to ensure this right equally to everyone according to their needs. What is more, there should be health services of equal quality both in urban cities and smaller, rural areas, because otherwise there is going to be discrimination among the members of the community. At the moment, people that live in rural areas, face high costs and long distances until they visit a hospital in the big cities that can address effectively their health issues. Also, the difficulties that they face during their transfer, high costs and lack of appropriate infrastructure can pose a threat to their health. Not to mention that people that are confined in their house in rural due to their disabilities are blocked from accessing high quality services and programmes.


Sexual and reproductive rights constitute a very important and distinctive part of the right to health. According to the World Health Organization it is linked to sexual activity and generally each people’s sexuality. Furthermore, it is linked to several health issues, such as gynecological health and generally medical issues that have to do with each person’s gender and sexually transmitted illnesses. Thus, sexual and reproductive rights, as enshrined in the Universal Declaration on Human Rights, are universal and undeniable, as well as totally interdependent with the right to healthcare.

Of course, sexual and reproductive rights are of great importance when it comes to people with disabilities, as, likewise with the general medical problems, there are a lot of risks concerning their sexual and reproductive health. This problem arises since in many cases, people with disabilities do not take their own decisions concerning their body, and often their susceptible to violence and abuse, due to their inability to resist. Moreover, habilitation and rehabilitation describe a process of regaining skills and (re)integrating in the society. Habilitation when applied on people with disabilities highlights the need of therapy to obtain physical and speech/communicational skills that are necessary for their everyday life. Rehabilitation has to do with the re-integration of people with disabilities in the society, and particularly, regaining certain communicational or physical skills that have been lost due to the acquisition of a disability. This includes both social and economical integration, in order to achieve the well-being and prosperity of this group of people, and boost their participation in the everyday life, via education, employment and participation in cultural and leisure activities.

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and actively participate in social life, otherwise they will stay marginalized. It is necessary that those services, like healthcare services, are distributed both in urban areas and big cities and rural areas and small towns, as every person with disability should have a life of quality with high living standards and not face discrimination and victimization.

5. The debate over the issue

More than 650 million people globally live with a disability. The majority of those people live in developing countries, rural areas and suburban areas. This mean that, this group of people hardly has access to health-care services, while people with psychosocial disabilities can afford their health treatment, and women with disabilities cannot obtain gender-sensitive health services. Based on one survey carried out by WHO during 2018, 35%-50% of people with disabilities in the developed world and 76%-86% in developing countries haven’t received any healthcare services during 2017.

What is more, there are physical barriers when it comes to accessing health-care services. First of all, in many cases the medical personnel are not adequately trained to meet people’s needs, especially in the field of secondary health conditions, which consists of illnesses or impairments that can be caused just because the person has an impairment, also known as primary health condition. In other words, this can lead to lack of awareness concerning the future of those people and the deterioration of their situation. Besides that, medical personnel should work more on the field of communication with persons with disabilities. This means, that during examinations patients should be able to communicate with their doctors and gain information about their condition in sign language, for deaf people or Braille for blind people. Secondly, in most countries there are no special and exclusive areas, where persons with disabilities can carry out their examinations and ask for treatment. Thus, they are

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obliged to ask for help and treatment in places, that are overburdened, due to the presence of other patients as well with any form of disability. Therefore, persons with disabilities have to wait long queues, in overloaded rooms, which means that the medical personnel may not be in the position to dedicate adequate time to focus on their health issues and provide them with care. This phenomenon takes place mostly in state-funded hospitals, since the majority of persons with disabilities do not have high salaries to afford medical treatment in private clinics.

Moreover, in many cases persons with disabilities do not have the ability to use certain infrastructure and machines that are necessary for their treatment or for their examinations, for instance, due to their height or their measurements. Thus, people that are confined in a wheelchair need bigger machines that aren’t accessible in many cases or that are of high costs. In addition, in many countries medical infrastructure and machines are outdated and old and do not meet the international standards, so as a result, the examinations might not be valid. Further than that, persons with disabilities face discrimination when it comes to accessing healthcare insurance. In other words, people with pre-existing disabilities are often denied healthcare insurance or if they are able to obtain a healthcare coverage, they enjoy limited benefits. This happens, due to the fact that a great number of persons with disabilities isn’t occupied with a job and, therefore, they aren’t eligible with insurance. Another form of discrimination that occurs from this issue is that the costs for obtaining health insurance are very high and persons with disabilities cannot afford them, taking into account the total expenses that this community has.

Additionally, people with disabilities should have access to both habilitation and rehabilitation processes, that are important for their integration in the society. However, those services are often of high cost and many people with disabilities, who have been marginalized and unemployed for a huge part of their lives, especially in the developing world, cannot use them. Furthermore, once again people that work there are not skilled and trained enough to deal with persons with disabilities or there is lack of communication. As a result, they are left behind as the society progresses under awful living conditions suffering from poverty, lack of respect for their dignity and lack of participation in the society.
Sexual and reproductive health and the rights that derive from this, are often neglected by people with disabilities, their families and their doctors. Of course, there is no doubt that one factor that leads to this misinformation occurs due to the doctors’ lack of traineeship and knowledge for this issue. Despite that, this ignorance is caused by the fact that people with disabilities and their families are often so focused on their primary health conditions that put their sexual and reproductive health aside. For this reason, they occasionally do not receive information regarding sexually transmitted diseases that is why, in many cases they are susceptible to them.

Furthermore, there are stereotypes among the society that consider people with disability to be “asexual and genderless human beings”\(^{13}\), therefore there is no need for information upon their sexual and reproductive health. Of course, the biggest victims of all of the aforementioned are women, since their biological needs for medical support are more and more urgent compared to those of men, due to their special and unique organism and their reproductive function. Last but not least, there have been reports that people with disabilities, who end up in specialized institutions, and most importantly those patients that face psychosocial disabilities, often face discrimination and violence. Indeed, people with disabilities are more often to face any form of violence (including sexual abuse regardless of their gender) during their lives, since in most cases are less possible to resist or to report the incident in a police department, since they feel dependent to their abusers.

6. Actions of the international community

**Past Actions**

**UN Convention on the Rights of Persons with Disabilities\(^ {14}\)**

This Convention that was adopted on 13 December 2006 constitutes the main principal, when it comes to the rights of persons with disabilities.

Article 25: More specifically its Article 25 is dedicated to the main responsibility of

\(^{13}\)iddcconsortium.net. (2018). [online] Available at:

the states to provide this community with the necessary health services that meet each
ones’ special needs. The Convention states that each member-state should offer free
or affordable healthcare, highlights the importance of accessing health services that
are addressed to people with disabilities and emphasizes that those services should be
equally accessed by both people in big cities and people in rural areas. Also, it is
worth mentioning, that this Convention underlines the fact that people with
disabilities should enjoy health services without facing any form of discrimination or
exclusion either by the medical personnel nor by the states themselves. Finally, it
stresses the importance of raising awareness about their health conditions, along with
human rights, dignity, autonomy, and needs.

Article 26: Furthermore, this Article of the Convention highlights the responsibility of
the state in cases of rehabilitation of the people with disabilities especially in the areas
of health via the provision of specific services and programmes. That’s why, it urges
member-states to achieve integrational procedures for people with disabilities in all
sectors of the society and use the latest technologies for this purpose.

Standard Rules on the Equalization of Opportunities for Persons with Disabilities
(1993)

Before the adoption of the UN Convention on the Rights of Persons with Disabilities,
the United Nations took initiatives to ameliorate the position of people living with
disabilities, especially in the area of health and rehabilitation. The document above
was adopted in the 20th of December 1993 by the UN General Assembly and it
consists of 22 rules that the member-states should follow to meet the needs of people
with disabilities. More specifically, Rule 2 is dedicated to the health of this
community underlining the importance of the existence of well-trained medical
personnel, the access to health services, treatment and technology by people with
disabilities and, eventually, the equality between all members of the society. On the
other hand, Rule 3 presents the issue of rehabilitation, stressing the significance of
how training of the personnel to give advice and to carry out rehabilitation

Disabilities | United Nations Enable. [online] Available at:
https://www.un.org/development/desa/disabilities/standard-rules-on-the-equalization-of-
procedures, people’s access to appropriate rehabilitation services and programmes and the role of family in rehabilitation, can play a determinant role to help people with disabilities integrate into the society.\textsuperscript{16}

UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)\textsuperscript{17}

Convention on the Elimination of All Forms of Discrimination Against Women is one of the most fundamental international legal documents regarding the rights of women. Apart from that, though, it mentions the responsibility of the states for legislation and measures that are going to facilitate the access to health services regarding people’s sexual and reproductive rights. Of course, people with disabilities, and especially women, are not left behind by this legal document. States-Parties should provide them with the appropriate services linked to gynecological issues, such as pregnancy.

**Current Actions**


After the endorsement of World Health Assembly on May 2013 to the WHO Director General to produce an action plan according to WHO and World Bank’s reports on disability, World Health Organization came up with this document.\textsuperscript{18} This Action Plan includes objectives based on the situation nowadays that are going to ameliorate people’s with disability position globally. More specifically, it proposes policies, measures and legislations in order to (a) eliminate the obstacles faced by the community when it comes to the enjoyment of their right to health, (b) use new technologies and services to extend and strengthen rehabilitation procedures, and (c)


strengthen and promote international co-operation via the collection of comparable data that are going to be used on future scientific research.\textsuperscript{19}

\textbf{Sustainable Development Goals (2015-2030)}

During 2015 world leaders adopted the 2030 Agenda for Sustainable Development, which aims to end various problems around the world, achieve peace and prosperity, and create a better and more sustainable future within the next 15 years.\textsuperscript{20} In particular, Goal #3 discusses efforts and measures that should be taken in order to decrease and overcome certain diseases and illnesses and “ensure well-being and and healthy lives at all ages”\textsuperscript{21}. There are two targets that directly affect people with disabilities: firstly, member-states should raise the quality of health services and provide safe and effective medicines, and secondly, they should ensure sexual and reproductive health for every member of the community by creating effective and quality health-care services for this purpose.\textsuperscript{22} Moreover, Goal #10, states that even though progress has been made, there are still inequalities that should be addressed, especially when it comes to the access on healthcare services, education and employment.\textsuperscript{23} For this reason, it calls for the empowerment and promotion of social, cultural, political rights of all people regardless of sex, race, religion or disability.\textsuperscript{24} This can only happen, by abolishing all discriminatory laws and policies. This target is very important for people with disabilities, as the UN urges member-states to take appropriate measures to enhance their participation in every field of their social lives, which is going to have as a result their access to healthcare.

\textsuperscript{24}United Nations | Goal 10 :: Sustainable Development Knowledge Platform. [online] Available at: https://sustainabledevelopment.un.org/sdg10 [Accessed: 17 Dec 2018]
European Union
Article 26 of the Charter of Fundamental Rights of the European Union (2000) respects the need of integration of people with disabilities in the life of the society and recognizes that they should be benefited by measures that are going to improve their social position and enrich their participation in the society. EU Disability Strategy 2010-2020 was adopted in order to implement the UN Convention on the Rights of People with Disabilities in their legislation. This document’s main aim is to ameliorate their position and take necessary steps concerning the field of health, education, participation, accessibility, social protection and employment. Thus, the EU urges member states to provide with equal access to good quality healthcare services, so that to ensure their well-being and a good quality of life.

7. Conclusion
Today, during the twenty-first century, modern societies have taken major steps to tackle inequalities for people with disability and health services. In spite of making important progress, though, people with disabilities in developing countries still struggle to enjoy their right. Less developed countries cannot ensure a variety of health services exclusively based on the needs of people with disabilities, not to mention the appropriate infrastructure. Therefore, people with disabilities in those parts of the world struggle to use the health services that they need, because either they cannot afford them, or they cannot access them. There is no doubt, that there has been an important amelioration of the position of people with disabilities within the society, but no society can be considered

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progressive and developed if it doesn’t ensure its citizens rights. The right to health is one of the most fundamental human rights, that can guarantee equality, prosperity and the well-being within a country. Therefore, it is a responsibility for the global community to act, in order to achieve what Sustainable Development Goal #10 aims at and this is elimination of inequalities. However, it is obvious that equality is not enough, but states also must focus on the special needs that each minority demands. And that’s why the United Nations should realize that people with any disabilities have more special and specified needs, especially in the health sector that should be addressed.

8. Points to be addressed

- How Member States can effectively implement Article 25 in their national legislations?
- What is the role of UN and its instruments regarding the provision of high-quality health services to people with disabilities?
- How can Member-States ensure sexual and reproductive health and rights for people with disabilities?
- How can we ensure the effective implementation of the right to affordable healthcare in all countries?
- In what ways the medical personnel can work more effectively in order to deal with persons with disabilities and provide them with the necessary infrastructure and examinations?
- How can Member-States ensure that persons with disabilities are able to obtain health insurance without facing any form of discrimination and inequalities?
- What measures should be taken, both nationally and internationally, in order to raise people’s access in healthcare services both in urban and rural areas?
- What steps can we take to raise awareness concerning health rights of people with disabilities?
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21. Europa.eu European Union | CHARTER OF FUNDAMENTAL RIGHTS


