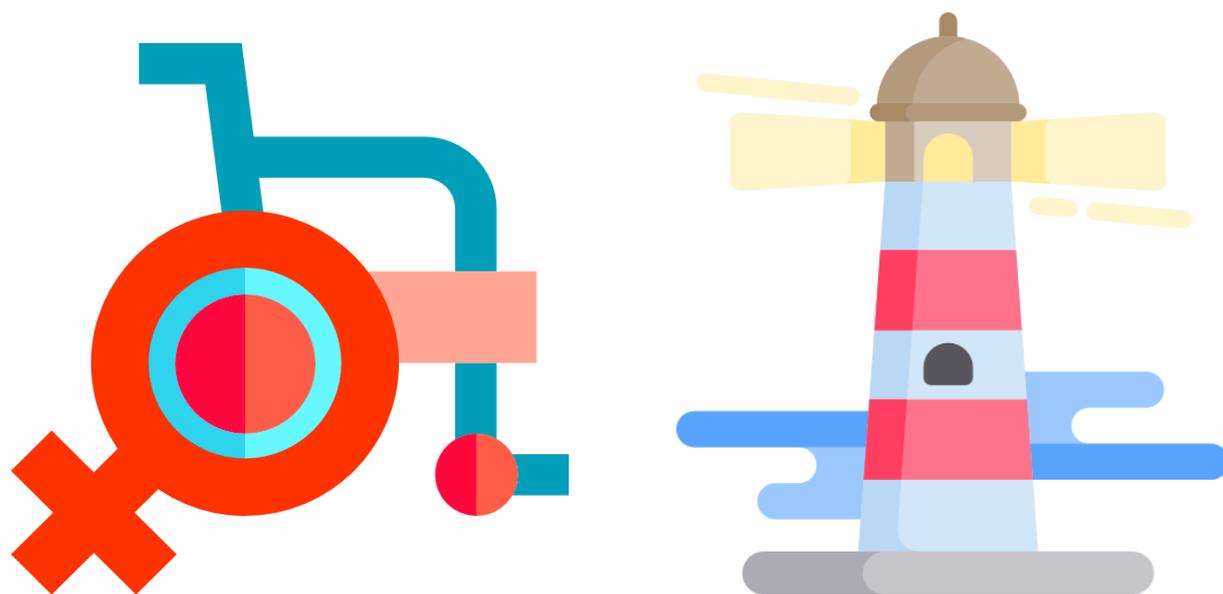


# THE RIGHTS OF WOMEN WITH DISABILITIES AND THE ESTABLISHMENT OF A NATIONAL HUMAN RIGHTS INSTITUTION (NHRI) IN TAIWAN

Parallel Report on the implementation of the Convention on  
the Elimination of all Forms of Discrimination Against Women  
(CEDAW)



March, 2018



Coordinated by  
**Covenants Watch**

# **The Rights of Women with Disabilities and the Establishment of the National Human Rights Institution (NHRI) in Taiwan**

## **Parallel Report on the Implementation of the Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW)**

### **Participating NGOs**

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民間司法改革基金會	Judicial Reform Foundation
法律扶助基金會	Legal Aid Foundation
新北市康復之友協會	New Taipei City Association for Mental Health Survivors (Family Group of People with Mental Illness)
台北市新活力自立生活協會	New Vitality Independent Living Association
台北市行無礙資源推廣協會	Taiwan Access for All Association
台灣廢除死刑推動聯盟	Taiwan Alliance to End Death Penalty
台灣障礙者權益促進會	Taiwan Association for Disability Rights
台灣酷兒權益推動聯盟	Taiwan Gender Queer Rights Advocacy Alliance
台灣國際醫學聯盟	Taiwan International Medical Alliance

**March, 2018**  
**Taipei, Taiwan**

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## **Participating NGOs (in alphabetical order)**

### **Covenants Watch**

As an umbrella organization of human rights groups established on December 10, 2009, the same day that the ICCPR and ICESCR started to take effect in Taiwan, the Covenants Watch (CW) is committed to defending and promoting the dignity and human rights of every person on an equal ground. By monitoring the government of Taiwan in fulfilling its obligations under the international human rights instruments of the United Nations, it aims to build a bridge between international human rights norms and the domestic laws and government policies in the island state.

Covenants Watch is also a collaborative platform for NGOs to work together with joint alternative reports on the implementation of UN core human rights conventions that have legal binding effect on the Taiwanese government. Covenants Watch co-organized 67 and 80 NGOs in 2013 and 2017 respectively for alternative reporting on the ICESCR and ICCPR.

### **Disabled Children's Rights Advocacy Alliance in Taiwan (DCRAAT)**

Disabled Children's Rights Advocacy Alliance in Taiwan (DCRAAT) is composed of children with disabilities and their parents, aiming to defend the basic human rights of children with disabilities. Children with disabilities and their families are confronted by barriers including lack of resources, inadequate legislation and policies, and inaccessible environments. They are absent from the game fields in the park because of the disability unfriendliness of the facilities. They disappear from the playgrounds on campuses because of the poor quality of inclusive education. They are invisible to us because of the denial of transportation and basic public utilities. Their needs have long been disregarded. They lose the equal enjoyment of all rights and support all children, and also across the entire course of lives. DCRAAT is dedicated to actively monitoring the government, participating in relevant policy-making to ensure the children with disability have equal access with other children to fully participate in school, recreation activities and all other aspects of life.

## **Judicial Reform Foundation**

The Judicial Reform Foundation is committed to advancing legal reform by uniting the power of the people in order to establish a fair, just, and trustworthy judiciary for the people.

In realizing its mission, the Judicial Reform Foundation embraces the following core values:

- Fairness and Justice.
- Diversity and Accessibility.
- Professionalism. Innovation. Criticism.

The vision of the Judicial Reform Foundation is to ensure a society in which all people benefit from a fair, just and trustworthy judiciary.

The principal objectives of the Judicial Reform foundation are:

- To harness the power of civil society to advance judicial reform
- To improve the justice, transparency, and democracy of the judicial system
- To end unfair and negligent treatment of the people by the judiciary

## **Legal Aid Foundation (LAF)**

LAF provides the general public with legal aid, with the purpose of defending people's basic litigation rights. Legal aid recipients are those who lack financial means and are unable to receive proper legal protection or exercise their rights; or those who may not lack financial means but should be given aid according to the law, such as those involved in compulsory defense cases (where the minimum punishment of the crime is not less than three years' imprisonment; or where the individual's ability to express in court is impeded by intellectual disability). The services of LAF include legal consultation, mediation and settlement, legal documents drafting and representation in court proceedings.

The Legal Aid Act was passed on December 23, 2003 and was promulgated by the President on January 7, 2004. The Foundation commenced operations on July 1, 2004. Since then, 21 Branch Offices have opened in municipal cities and counties to serve labor, women, children, aboriginal people and migrants. Under Article 6 of the Legal Aid Act, the endowment of the Foundation is NT\$10,000,000,000. The Foundation encourages the public to make donations, and also receives annual contribution budgeted by the Judicial Yuan.

## **New Taipei City Association for Mental Health Survivors (Family Group of People with Mental Illness)**

New Taipei City Association for Mental Health Survivors is a nonprofit, self-help organization of families and consumers of people with mental illnesses founded on July, 3rd, 1994 in New Taipei City, Taiwan.

Our missions:

- Facilitating people with mental illness to integrate into the community
- Enhancing people with mental illness to face and fight against prejudice and stigma

Our beliefs:

- It is courageous for families to shoulder up the responsibility to cope with the difficulties in relation to mental illness, and therefore the society at large should be accepting and supportive.
- Believing each person with mental illness has potentials and opportunities to recover.
- Being a person with mental illness, s/he, like you and me, has the right to live freely in the community.

Our vision:

- Pioneering a variety of services to journey with people with mental illness for a different life.

## **New Vitality Independent Living Association Taipei**

New Vitality Independent Living Association is an organization run by and for people with different types of physical and mental disabilities. Founded in 2007, the organization is devoted to helping people with disabilities to live in the community with dignity by offering them personal assistance to engage in their life activities, aiming to enable people with disabilities to realize their full potential, live independently, and reduce the obstacles and discrimination in their lives.

The biggest difference sets the organization apart from others is the majority of the decision makers (including the board) are with physical or mental disabilities and are cross-disability.

## **Taiwan Access for All Association**

Taiwan Access for All Association is a cross-disability organization in Taipei, Taiwan. It was originally a web-based network (Accessible Life Network), which

provided disability-related news and information by a small group of volunteers with and without disabilities in 2002. As the Network grew, there was a growing demand for accessible tourism and assistive technology information; the network also provided a community platform for people with disabilities to discuss and exchange their experiences. In 2004, Taiwan Access for All Association was officially founded by disabled activists and their allies to support and advocate for disabled people's voices in Taiwan. At present our main services includes mobility assistive devices for rent, accessible travel, and education and advocacy works for the people with disabilities.

### **Taiwan Alliance to End the Death Penalty (TAEDP)**

The Taiwan Alliance to End the Death Penalty (TAEDP) was founded in 2003 by local NGOs and academics, such as the Taiwan Association for Human Rights, and the Judicial Reform Foundation. The Alliance was formed to stress and promote the absolute value of life and human dignity as core to the protection and promotion of human rights.

Profoundly understanding that the society has yet to be exposed to the debate concerning death penalty abolition, and that the general public seems to support capital punishment as a form of revenge against perpetrators of major crimes, the Alliance aims to create an open discussion forum for society on various abolition issues. Furthermore, it advocates shaping a better penal system that both respects the value of life while truly compensating the victims so as to really uphold justice and safeguard human rights for all.

### **Taiwan Association for Disability Rights (TADR)**

Taiwan Association for Disability Rights (TADR) is composed majority of disabled members responsible for policy decision in order to fulfill Article 33 of CRPD for a DPO to monitor the government. TADR emphasized on promoting equal rights that ought to be possessed by people with disabilities, to maintain their human rights, to facilitate international exchanges and cooperation with pioneers and leaders in the aspect of disability, to bring in effective implementation projects, to persuade legislative committees and make recommendations to government, to provide training opportunities for disabled policy advocates to visit and learn from other developed countries' experience and to enhance awareness of human rights of disabled people from international perspectives.

In order to eliminate discriminations towards disabled people, we emphasized particularly on promoting community education and in together added in elements

of drama musicals and hip-hop rapping performance in order to reinforce general public's understanding towards disabled people. Moreover, we provided legal consultations, speed up technical development of assistive devices and cultivated cultural innovation as we wished to start from the basic and one's core beliefs. We aimed to facilitate disabled people to participate in the community, cultural activities and public policies so as to achieve community integration and enjoyed human rights and freedom as everyone does in the community.

### **Taiwan Gender Queer Rights Advocacy Alliance**

Taiwan Gender Queer Rights Advocacy Alliance is formed by a group of people with multiple identities, i.e., people who are homosexual, bisexual, transgender, transgender, queer and questioning, etc. and at the same time with social vulnerabilities like physical or mental disabilities, epilepsy, or are infected with rare diseases, HIV, etc.

These individuals who carry multiple social stigma are often excluded by the society and difficult to seek support groups. The members of Taiwan Gender Queer Rights Advocacy Alliance have all experienced such hardship and decided to speak out for people of their kinds. Seeking to be recognized and understood, the alliance aims to fulfill the equality of all human beings, realizing zero discrimination in all living spaces and to improve the rights and interests of people with different multiple identities.

### **Taiwan International Medical Alliance (TIMA)**

Founded in Jan 2001, the Taiwan International Medical Alliance (TIMA) is dedicated to promoting the right to health and alleviating the health inequalities among different social strata and classes, both domestically and regionally. TIMA has been working with Cambodian partners on the development and enforcement of health-related policies, including tobacco control. As a member organization of the Covenants Watch, TIMA takes up the responsibility of developing human rights policies and quantitative human rights methods, such as human rights indicators and impact assessment.

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## Executive Summary

Covenants Watch was established in December 10, 2009, the day that the ICESCR and ICCPR started to take effect in Taiwan. As a member organization composed of human rights groups, human rights workers, lawyers and scholars, its objective is to monitor the government in fulfillment of its human rights obligations under core United Nations human rights treaties.

Covenants Watch has successfully coordinated a coalition of NGOs (68 NGOs in 2012-2013 and 80 NGOs in 2015-2016) to participate in the shadow reporting in the previous two international reviews of the government's implementation on the Two Covenants (the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights). In 2015-2017, to prepare for the Parallel Report on Convention on the Rights of Persons with Disabilities (CRPD), Covenants Watch provided training programs and organized seminars and forums for human rights groups and organizations of persons with disabilities (OPDs).

This report was co-authored by 11 groups, with more than half of them being organizations of persons with disabilities (OPDs). Other organizations include veteran human rights groups engaged in comprehensive human rights issues, judicial reform, promotion of the abolition of the death penalty, prison reform, legal aid, and economic and social rights promotion. This collaboration has contributed to the general human rights organizations' awareness of the issues faced by People with Disabilities and the strategies used to in rights defense and advocacy. In addition, it allowed for OPDs to gain a deeper understanding of human rights principles and frameworks.

This report was generated as follows: The topics are first grouped by subject matter and relevance. Group leaders then gather teams to discuss and revise preliminary drafts. Finally, several executive editors reorganize the content to improve the flow between related articles with differing content, thereby making the draft more coherent and consistent. It is worth noting that in order to increase the representation and weight of this report, the responses to each and every provision mentioned have gained the consensus of all participating groups. With regards to issues that have been debated amongst the groups, we have chosen to be

frank about our disagreements and have described each stance for the purposes of review by international experts. One such example is the issue of prenatal screening and rights pertaining to related issues such as advice for abortion due to abnormalities, abortion rights and abortion timeframe. (Please refer to [Article 16 in conjunction with Article 12, Paragraph 44 of this Report.](#))

We would like to thank all participating groups for their invaluable contributions, the executive editors, volunteers who have lent their assistance in translating the report, as well as the support for Covenants Watch by many individual donors, for without their help, this report would not have been possible.

**Covenants Watch, Taiwan**

**March 2018**

## Overview

### **The population of women with disabilities in Taiwan: Taiwan government fails to adopt a human rights-based model of disability**

1. Globally, one in ten people are considered as Persons with Disabilities (UN Women Watch, 2016), of which 51% are women (Disability Awareness in Action, 2015). Compared to developed countries such as Sweden, UK, US and Canada where Persons with Disabilities account for 16 - 20% of the total population, ours is significantly lower at 5 to 7% (1.17 million as of December 2016). Official recognition of persons with disability is restricted to individuals with persons with a disability 'certificate', which forms the basis all national statistical data in the national report. According to this definition, the proportion of disabled males stands at 5.62% of the total male population, and women with disabilities account for 4.27% of the total female population. This is far lower than the global average which stands at around 10%.
2. While the population of women in our country aged 30 and above outnumbered that of men, the number of women with disabilities at all age groups is lower than that of men with disabilities. This phenomenon differs from trends seen globally. For example, in Sweden the population of women with disabilities outnumbered that of men with disabilities. It begs the question: Do these statistics accurately reflect actual numbers or are they a gross underestimation?
3. The Taiwan government has been reluctant to adopt the human rights model set by the Convention on the Rights of Persons with Disabilities (CRPD), which sees disability as an outcome of the interaction between a person's physical, mental, intellectual or sensory impairments and surrounding barriers (e.g. environmental, legal, informational...). From the government's perspective, a broader definition of disability, i.e. a rights model of disability, will only lead to the breakdown of the social welfare system, for all persons with disabilities are entitled to varied kinds of social benefits to some degree.
4. This report holds that: NOT ALL persons with disabilities are in need of cash benefits. Yet, ALL persons with disabilities, along with other vulnerable groups of society, can only fully enjoy their rights in an inclusive, barrier-free environment. We recommend that the CEDAW Review Committee stand with

the CRPD International Review Committee to urge the government to adopt an inclusive and rights-based model of disability.

## Article 2: Policy Measures

### Data collection and analyses (in response to paragraphs 2.6 and 3.1 of the State Report)

5. In paragraph 6 of the COR of the Review on CEDAW (2013), it was recommended that the government enact comprehensive legislation covering all fields of gender equality with a view to ... (vi) systematically collecting and analyzing data disaggregated by sex and other relevant criteria; .... Covenants Watch has suggested the Directorate-General of Budget, Accounting and Statistics (DGBAS) to start the process of either (i) redesign the sampling strategies of the various surveys conducted by different government agencies to better reflect the marginalized populations, (ii) to streamline all the surveys to make data more comparable throughout, or (iii) identify important indicators and ask the legislature to agree the DGBAS to link different databases, to allow more sophisticated disaggregation of data. To our best knowledge, the government has not taken concrete actions to improve data collection or analysis.
6. In a number of general comments, UN core human rights treaties mention the circular process of indicator-benchmark-scoping-assessment (IBSA) and recommends implementing it to longitudinally monitor the State regarding its implementation of human rights duties. Both the collection of data and the IBSA require competence in the field of human rights statistics. Human rights groups repeatedly requested the DGBAS to train the personnel from statistical offices on skills of human rights statistics. They also requested the office to make thorough investigations on the methods of categorization, collection and analysis for demographical data regarding official statistics and administrative surveys, in hopes of generating quality statistical data on human rights while respecting the privacy and dignity of citizens.
7. **We look forward to seeing** the Review Committee state clearly in the Concluding Observations and Recommendations to urge the government to

learn and adopt human rights tools, such as human rights indicators, human rights statistics, and human rights impact assessment. A competent governmental agency should be designated the responsibility of monitoring various agencies on their performance on human rights duties. We suggest that the Executive Yuan establish a Department of Human Rights, a similar structure like the Department of Gender Equality; the two department should work closely to install human rights competencies in governmental agencies, to educate officials on human rights issues, and to monitor the progress.

**Protection against domestic violence and sexual assault for women with disabilities (in response to paragraphs 2.16 and 2.32 of the State Report)**

8. Intimate partner violence involving persons with disabilities account for only 3% of the total number of cases reported. This low statistic may be attributed to the fact that people with disabilities often do not have the means to seek help and even when they do, may have difficulty in communicating their abusive experiences. Hence, it is hard to obtain accurate statistics on the situation.
9. According to Zhou et al. 2016, the number of people with disabilities who have been sexually assaulted increased from 581 in 2008 to 1,100 in 2014. Official statistics on domestic violence and sexual assault cases in 2015 reveal that the proportion of female victims is much higher than that of male victims. In addition, women with disabilities are more susceptible to abuse; with twice the number of domestic violence cases and four times that for sexual assault compared to other women. (refer to Tables 1 and 2)
10. It is recommended that the Government increase the sensitivity and awareness of front line personnel (teachers, law enforcement and judicial officers, social workers, health care personnel etc.) to violence issues so that they can better detect signs of abuse. In addition, women with disabilities should have access to sex education and gender equality education, so that they will be equipped with the necessary knowledge and skills that allow them to better assess dangerous situations and seek out relevant resources for assistance and protection. The government should review the current channels of assistance provided, or examples, emergency shelters, protection and resettlement, counseling, and legal assistance, in order to determine if they have adequately met the diverse needs of women with disabilities. In addition, they should

engage the use of multiple media platforms and channels to increase publicity and bring attention to these schemes.

**Table 1: Report on victims of domestic violence - People with disabilities (2015)**

Victims	Total	Male		Female		Unknown		National Population	Total	Male	Female	Victims	
	Number of people (A)	Number of people (B)	Percent age (B/A)	Number of people (C)	Percenta ge (C/A)	Number of people (D)	Percenta ge (D/A)		Number of people (E)	Number of people (F)	Total (G)	Male (B/F)	Female (C/G)
Total	63,730	17,300	27.1%	45,877	72.0%	553	0.9%	Total	23,492,074	11,712,047	11,780,027	0.148%	0.389%
People without Disabilities	57,336	14,962	26.1%	41,896	73.1%	478	0.8%	People without disabilities	22,336,424	11,056,603	11,279,821	0.067%	0.371%
People with Disabilities	6,394	2,338	36.6%	3,981	62.3%	75	1.2%	People with Disabilities	1,155,650	655,444	500,206	0.202%	0.796%

**Table 2: Report on victims of sexual assault - People with disabilities (2015)**

Victim	Total	Male		Female		Unknown		National Population	Total	Male	Female	Victims	
	Number of people (A)	Number of people (B)	Percent age (B/A)	Number of people (C)	Percenta ge (C/A)	Number of people (D)	Percenta ge (D/A)		Number of people (E)	Number of people (F)	Total (G)	Male (B/F)	Female (C/G)
Total	6,215	939	15.1%	5,228	84.1%	48	0.8%	Total	23,492,074	11,712,047	11,780,027	0.008%	0.044%
People without disabilities	5,144	760	14.8%	4,347	84.5%	37	0.7%	People without disabilities	22,336,424	11,056,603	11,279,821	0.007%	0.039%
People with disabilities	1,071	179	16.7%	881	82.3%	11	1.0%	People with disabilities	1,155,650	655,444	500,206	0.027%	0.176%

### Article 3: Guarantee of Basic Human Rights and Fundamental Freedoms for Women with Disabilities

#### Lack of comprehensive framework to address multiple and intersectional forms of discrimination (in response to paragraph 3.1 of the State Report)

- With regard to the multiple and intersectional discrimination faced by women with disabilities in public and private sectors, no comprehensive plan has been put forth by our government to improve the current situation. There has been no extensive data or survey statistics compiled to date to reflect, specifically, the difficult conditions in which women with disabilities are subjected to. In addition, there is a lack of gender perspective in the current government legislation pertaining to the rights of persons with disabilities. Finally, different departments and agencies are separately responsible for varying issues including but not limited to: gender equality, women's welfare, people with

physical and mental disabilities, social security, education, employment, medical care, justice, resulting in a lack of information sharing and resource integration.

12. The Gender Equality Policy Guidelines, enacted by the administration in December 2011 and amended in January 2017, serves as the fundamental premise for programs and policies pertaining to issues of gender equality in our country. However, we are concerned that the Guidelines do not adequately address and protect the rights of women with disabilities. Firstly, there was no consultation or involvement of bodies representing women with disabilities during the various phases of development, implementation and revision of the Guidelines. Moreover, while the proposal did raise the subject of women with disabilities and the disadvantages they deal with in their private and public lives, it was sorely lacking in concrete measures and action plans to counter the problem.
13. In Paragraphs 24 – 27 of its Concluding Observations, the International Review Committee on CRPD (2017) recommends that “the State design and implement effective programs including affirmative action measures to promote the rights of women and girls with disabilities and eliminate discrimination in all aspects of their lives” and that “the State amend its Gender Equality Policy Guidelines to incorporate provisions that fully address all the requirements of women and girls with disabilities on an equal basis with others, and align the Gender Equality Policy Guidelines with General Comment No. 3 of the UN CRPD Committee.”
14. We recommended that the following actions be taken:
  - (1) Implementing data collection and research to present accurate statistics pertaining to the kinds and types of discrimination women with disabilities face;
  - (2) Improving communication between authorities and agencies to allow better integration of human resource and resource sharing, so as to propose and fully implement a comprehensive plan for the protection of the rights of women with disabilities by involving all stakeholders including government agencies, civil society and women with disabilities in the process;

- (3) Devising future courses and workshops on human rights education for all civil servants.

**The Establishment of the National Human Rights Institution (NHRI) (in response to Paragraph 3.9 of the Convention-specific Document and Paragraphs 125-126 of the Common Core Document of the State Report)**

15. Since the initiation of the system of reviewing that state human rights reports in Taiwan, the establishment of the NHRI has been urged by each and every international review committee in its Concluding Observations and Recommendations following the review of the state reports on ICCPR & ICESCR (2013 and 2017), CEDAW (2014), CRPD (2017), and CRC (2017).
16. President Tsai promised in January 2017 that the government would reveal its plan to establish the NHRI before the end of that year, but there hasn't been any formal announcement to this date (March 1, 2018).
17. Covenants Watch invited Mrs. Rosslyn Noonan (previous chairperson of the International Coordinating Committee) representing Asia Pacific Forum and FORUM-ASIA, to conduct a scoping mission on the establishment of NHRI in July 2017. The scoping mission interviewed a wide array of civil society organizations and government agencies. All individuals and representatives of agencies interviewed during the mission (including the Judicial Yuan, Control Yuan, Legislative Yuan, and the Ministry of Justice, Ministry of Education, and Ministry of the Interior) welcomed the establishment of the NHRI.
18. The scoping mission recommended that the NHRI be set up in the Control Yuan, while reminding at the same time that the current Control Yuan does not comply fully with the Paris Principles and that major revisions to the organization and functions of the Control Yuan be made.
19. The government has not responded publicly to the suggestions of the scoping mission. On Jan. 11, 2018, according to the spokesman of President's Office, the President said that, regarding the establishment of the NHRI, there has already been a proposal submitted by the Control Yuan (to the President's Office Human Rights Consultative Committee, POHRCC). The President has asked the vice president to invite members of POHRCC, human rights groups, and

legislators to initiate further discussion “to arrive at consensus on the positioning and institutional design of the NHRI”. Nothing about the above task force has been heard.

20. While it is not clear when the Control Yuan will send its proposal to the Legislative Yuan, NGOs continued to work with legislator Yu to submit a Control-Yuan based proposal to the Legislative Yuan in the coming months.

## **Article 7: The Right to Political and Public Life of Women with Disabilities**

### **Insufficient representation of women with disabilities in policy making (in response to paragraphs 7.1 - 7.2 of the State Report)**

21. In recent years, while the government has actively promoted the one-third gender principle to executive committees from various organizations in order to increase women representation in all areas of governance, women with disabilities remain sidelined. Specific requests were made in the Gender Equality Policy Guidelines for all relevant parties, including the gender equality task force, the Municipal Women's Rights Council and gender equality advocacy groups, to increase the representation and participation in governance and policy-making of women and LGBTQ people who are from the indigenous group, new immigrants, in older age, with disabilities, in employment and from the agricultural and remote areas. However, with the exception of activist groups for women of disabilities, there remains little to no representation of women with disabilities in the offices of the central government and municipal councils and even organizations representing equal rights for women. There are regrettably no seats in our current legislative council who represent the interests of women with disabilities.
22. **We recommend** that the government refer to the CRPD General Comment No. 3 on women and girls with disabilities, and the latest ICESCR General Comment No. 23 on working conditions, and the "Incheon Strategy"<sup>1</sup> presented by the United Nations Economic and Social Commission for Asia and the

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<sup>1</sup> United Nations Economic and Social Commission for Asia and the Pacific (UNESCAP), 2012, [“Incheon Strategy to ‘Make the Right Real’ for Persons with Disabilities in Asia and the Pacific”](#).

Pacific (ESCCAP) in 2012 to develop incentives and/or action plans encouraging active participation of women with disabilities in areas of policy-making and legislation.

23. **FYI:** In Paragraph 17 of its Concluding Observations, the International Review Committee on CRPD (2017) recommends that: “the State establish a formal mechanism to ensure the effective participation of persons with disabilities and their representative organizations at the local and national levels. Effective participation must include family-based organizations, organizations of women, children, indigenous persons and other marginalized populations of persons with disabilities, and include all impairment types. The State must meaningfully consult with organizations of persons with disabilities in the design, implementation and monitoring of laws, public policies, budgeting and action plans that have an impact on the decisions that affect their lives to ensure their autonomy and self-determination.”

## **Article 10: The Right to Education of Women with Disabilities**

### **Gender inequality among persons with disabilities (in response to paragraphs 10.4 of the State Report)**

24. Women with disabilities have lower levels of education: According to the 2011 Assessment Report on the Living Conditions and Needs of women with disabilities, the illiteracy rate amongst women with disabilities is 26.43% (compared to 7.35% for men with disabilities). In contrast, while 38.7% of the general population aged 15 and over possess college and above qualifications, only 11.12% of People with Disabilities possess similar qualifications; with women with disabilities at 7.3% and Men with Disabilities at 13.99%.
25. The current regulations and policies have not adequately addressed the problems of low school attendance rates amongst women with disabilities and gender inequality in education. As the State Report and the annexed Table 6.2 indicate, during the academic period of 2011-2015, the average enrollment of women with disability in all levels of education was 32.92%, a number that is significantly lower than that of men with disability (67.08%). If the Government argues that there is sufficient legislation and support systems available to ensure that the discriminative barriers have been removed, why is there no

significant improvement in education statistics of women with disabilities during those academic years?

26. To ensure that women with disabilities enjoy equal rights to education, we recommend that the government commission a comprehensive and in-depth survey to better understand and determine the barriers to education they face. This includes survey statistics of women who receive other forms of education (for example home education) and impact assessments of social prejudice, gender roles and stereotypes, accessibility disparities between urban and rural areas, sexual violence/abuse and personal safety, and the lack of a barrier-free and gender-sensitive infrastructure.

## **Article 11: The Right to Work of Women with Disabilities**

### **Employment challenges for women with disabilities (in response to paragraphs 11.3, 11.16 and 11.28 of the State Report)**

27. The employment rate of women with disabilities in Taiwan is 11.8%, well below that of men with disabilities (22%) and women in the general population (48.7%). In addition, 23.5% of unemployed women with disabilities reportedly suffer discrimination and unfair treatment, a percentage that is higher than that of their male counterparts (15.1%).
28. In the Gender Mainstreaming Executive Plan of 2014-2017, the Ministry of Labor pledged to provide and/or create 1,500 jobs for women with disabilities each year, but there is no statistic available indicating how many women with disabilities who have successfully entered the workforce through the scheme. The report also stated that the Ministry planned to increase vocational courses and training rates amongst women with disabilities from 48% to 48.5%. It is unclear whether these schemes have been effective in improving employment and training rates in women with disabilities. In addition, the government has not provided appropriate resources and assistance to women with disabilities whose obligated duties in the home hinder their active participation in training and return to the workforce.
29. Regarding women with disabilities, it is necessary for the government to acknowledge the additional societal burdens placed on women to look after

their family and the impact on women with disabilities seeking employments. The Government should focus on removing barriers and challenges facing women with disabilities seeking employment.

30. **It is recommended** that the following actions be taken to improve the employment rate of women with disabilities:
- (1) Undertaking effective measures such as reviewing quota systems in the workplace, encouraging job redesign to better accommodate the characteristics of people with disabilities, and providing access to vocational training and placement services.
  - (2) Analyzing and determining the barriers present to women with disabilities who are seeking gainful employment and implementing effective measures to improve the situation.
31. FYI: In Paragraphs 68 – 69 of its Concluding Observations, the International Review Committee on CRPD (2017) expresses its concerns that “labor market participation of persons with disabilities, especially women, is disproportionately lower than that of persons without disabilities” and recommends “state develop measures, intensify efforts, and allocate sufficient resources to promote the employment in the open labor market of persons with disabilities, especially women;

## **Article 12: The Right to Health of Women with Disabilities**

### **Unfriendly medical environments and services (in response to paragraphs 12.14 and 12.21 of the State Report)**

32. Women with disabilities face difficulties finding community-based preventive care services: The Health Promotion Authority under the Ministry of Health and Welfare, together with the health bureaus, health offices, and hospitals of each county and municipality have adopted “Mammography Vehicles,” “Pap Smear Vehicles,” and other similar programs to tour communities and provide cervical and breast cancer screening. However, these touring vehicles all have steps, which prevent women with disabilities from boarding and receiving the appropriate screening. Further, mammogram devices on these vehicles only operate on standing individuals. If women with disabilities wish to go to a

hospital or health center for screening, the limited number of rehabilitation and health buses that provide transportation for PWDs mean that seeking preventive treatment remains inconvenient.

33. We recommend the Ministry of Health and Welfare gather data on number and proportion of women with disabilities who receive health check-ups, breast cancer screening, and cervical cancer pap smears to improve barrier-free access to medical facilities and equipment (including medical examination equipment and instruments, community touring screening vehicles, and shuttles for community hospitals etc.).

### **Forced Abortion and sterilization**

34. Forced abortion and sterilization is not a rare phenomenon, yet the government has failed to take actions. Actually, in the preparation meetings of 2016 state reports on the two Covenants, the Ministry of Health denied that there is such phenomenon in Taiwan.
35. We urge the Committee to include these two points in your concluding observations:
  - (1) To demand the government to conduct a survey or any way appropriate to get a clearer picture of the severity of this issue on the ground.
  - (2) To urge the Ministry of Health to work with professional, medical association, say for example, the medical associations of gynecologists and obstetricians to provide guidance or guiding principles on this issue and consider the procedures of this kind not only seriously violate medical ethics but also a crime. without the explicit consent of the person with disability in question.

### **Pregnancy, childbirth, and postnatal care for women with disabilities (in response to paragraphs 12.26 and 12.34 of the State Report)**

36. Women with disabilities are not expected to become mothers and consequently do not easily receive health information and adequate service: Pregnancy, childbirth, and postnatal care for women with disabilities are even more challenging to access when compared to women without disabilities. The design of examination tables, delivery tables and related equipment are ill-suited for use by women with disabilities across the board. Pregnancy health

education, postnatal infant information, and related material tend to be unsuitable for use by women with disabilities. Designers seem not to have fully considered the needs of women who have special visual, intellectual, and physical needs.

37. We recommend that the Ministry of Health and Welfare strengthen education and training for medical personnel through multi-media materials. This allows medical personnel to provide women with disabilities with adequate health education relating to pre- and postnatal services (including infant care information).
38. FYI: In Paragraphs 64 – 65 of its Concluding Observations, the International Review Committee on CRPD (2017) expresses its concerns that “women and girls with disabilities lack equal access to sexual and reproductive healthcare as mandated by the UN CRPD Committee’s General Comment No. 3” and recommends that “state increase the training and sensitivity of healthcare professionals on providing sexual and reproductive healthcare services to women and girls with disabilities consistent with the UN CRPD Committee’s General Comment No. 3.”

**Insufficient support in family planning and child raising (in response to paragraphs 10.30 of the State Report)**

39. The Government merely describes services provided for women's reproductive health (mainly subsidies for prenatal screening and fertility regulation) but has not been able to provide concrete plans to provide vital family planning education. This makes it difficult to ensure that people with disabilities are well equipped to “freely and responsibly form decisions on family planning”.
40. People with Disabilities do not receive relevant support in the process of child rearing. Existing policies and services do not incorporate support for People with disabilities, including the provision of relevant support services (such as personal assistant support), care of young children (feeding, washing diapers, bathing) and other related aids.
41. Due to discriminatory attitudes about the ability of People with Disabilities in raising children, children of people with disabilities are more likely to be discriminated against and/or forcibly removed from their homes by social welfare personnel. It is suggested that the government surveys and compares

the home replacement statistics, including number, proportion and gender, of children with parents with disabilities to that of regular families.

## **Article 16: Marriage and Family Life, in conjunction with Article 12**

### **Reproductive autonomy of women with disabilities (in response to paragraph 16.24 of the State Report)**

42. The government should strengthen the protection of the integrity of women with disabilities. They should not be pressured into 'voluntary' abortion or sterilization. Under the Genetic Health Act, when a person or his or her spouse suffers from hereditary, infectious or psychiatric disorders, he/she may voluntarily undergo abortion (article 9) and sterilization (article 10) and physicians are obliged to "recommend" treatment for the patient. In the event where the disease is not curable, and it is deemed necessary, the physician "must" recommend abortion and/or sterilization procedures (article 11).
43. According to Article 11 of the Genetic Health Act, if a fetus is found to have abnormalities during a prenatal examination, it is the duty of the physician to inform the patient and/or their partner and, if deemed necessary, make recommendations for an abortion. Article 9 states that in the event where the pregnant woman, her partner and/or their biological parents suffer from any form of hereditary, infectious or psychiatric disorders, the mother has the right to seek abortion procedures voluntarily. However, due to the general discrimination against people with disabilities, women with disabilities are routinely subjected to strong persuasions by physicians to terminate their pregnancies. Without adequate support and know-how, many feel pressured to take the advice of their treating doctor and 'voluntarily' seek abortions.
44. It is worth noting that in the preparation of this report, we found that there were vast discrepancies among human rights groups, women's groups and disability groups with regards to their opinion and stance on prenatal screening and fetal diagnoses. Related issues such as advice for abortion due to abnormalities, abortion rights and abortion timeframe are highly contentious amongst these groups. Human rights and women's groups tend to believe that women should have reproductive autonomy, the right to freely decide whether

to give birth to the offspring with disabilities, and the right to decide for abortion without a stipulated timeframe. They argue that an arbitrary time frame placed without medical basis would only add to the stress they are under. In addition, many political philosophers such as Martha Nussbaum believe that the genetic health laws are not discriminatory against people with disabilities. In particular, it is noted that only a few genetic diseases can be effectively detected during prenatal screenings. If these pregnancies were terminated, it will not affect the overall gene pool or genetic diversity of the population. However, the parties involved in the report and disability rights group do not agree with the above position. We suggest that the words "abnormal" and "obstructing eugenics" be removed from the Genetic Health Act. In summary, all parties agree that the duty of the physician lies solely in informing the concerned parties of their diagnoses. Unlike stated in the Genetics Health Act, they should not be responsible for actively advising abortion for pregnant women whose fetus have been found with abnormalities.

45. We recommend that the law is amended to include a legal obligation for treating physicians to inform the pregnant mothers and provide them with assistance and appropriate consultations. Doctors should not influence the mother's decision on her fetus' right to life. Instead they should approach the matter with a neutral attitude and collaborate with social workers and other professionals to provide pregnant women with sufficient resources and information so that they can make their own informed decisions.
46. FYI: In Paragraphs 48 - 49 of its Concluding Observations, the International Review Committee on CRPD (2017) expresses its concerns that "the Eugenic Health Act and the Mental Health Act permit coerced abortion and sterilization of persons with disabilities, and note the impact upon girls and women with disabilities, especially those with intellectual and/or psychosocial disabilities" and recommends that "State amend the Eugenic Health Act and the Mental Health Act such that legal, procedural, and social protections, including but not limited to, freely accepted supported decision-making and legal representation, are put into place to prevent coerced medical procedures against persons with disabilities."

## Covenants Watch

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