



Coimisiún na hÉireann um Chearta
an Duine agus Comhionannas
Irish Human Rights and Equality Commission

Ireland and the United Nations Convention on the Rights of Persons with Disabilities

**Submission to the Committee on the Rights of Persons
with Disabilities for the List of Issues Prior to Reporting**

June 2025

Published by the Irish Human Rights and Equality Commission.

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The Irish Human Rights and Equality Commission was established under statute on 1 November 2014 to protect and promote human rights and equality in Ireland, to promote a culture of respect for human rights, equality and intercultural understanding, to promote understanding and awareness of the importance of human rights and equality, and to work towards the elimination of human rights abuses and discrimination.

Contents

Abbreviations	3
The Irish Human Rights and Equality Commission	5
General observation on the implementation of UNCRPD	7
National Machinery for the Advancement of the Rights of People with Disabilities	9
Public Sector Equality and Human Rights Duty.....	14
Voices of Disabled People	16
Article 5: Equality and Non-Discrimination.....	19
Article 6: Women with Disabilities	22
Article 7: Children with Disabilities	25
Article 9: Accessibility	30
Article 11: Situations of Risk and Humanitarian Emergencies	34
Article 12: Equal Recognition Before the Law	36
Article 13: Access to Justice.....	41
Article 14: Liberty and Security of the Person.....	46
Article 15: Freedom of Torture, Cruel, Inhuman or Degrading Treatment or Punishment....	56
Article 16: Freedom from Exploitation, Violence and Abuse.....	61
Article 17: Protecting the Integrity of the Person.....	70
Article 18: Liberty of movement and Nationality	72

Article 19: Living Independently and being Included in the Community	74
Article 20: Personal Mobility.....	81
Article 21: Freedom of Expression and Opinion, and Access to Information.....	83
Article 22: Respect for Privacy.....	86
Article 23: Respect for Home and the Family.....	88
Article 24: Education	89
Article 25: Health	96
Article 27: Work and Employment	102
Article 28: Adequate Standard of Living.....	106
Article 29: Participation in Public and Political Life.....	110
Article 30: Participation in Cultural Life, Recreation, Leisure and Sport	112
Article 31: Statistics and Data Collection	113
Article 33: National Implementation and Monitoring.....	116

Abbreviations

ADMC Act	Assisted Decision Making (Capacity) Act 2015
AON	Assessment of Need
CAMHS	Child and Adolescent Mental Health Services
CSO	Civil Society Organisation
DAC	Disability Advisory Committee
DPO	Disabled Persons Organisation
DSGBV	Domestic, Sexual and Gender-Based Violence
EPSEN Act	Education for Persons with Special Educational Needs Act 2004
ESRI	Economic and Social Research Institute
EU	European Union
HIQA	Health Information and Quality Authority
HSE	Health Service Executive
IHREC	Irish Human Rights and Equality Commission
IHREC Act	Irish Human Rights and Equality Commission Act 2014
IMM	Independent Monitoring Mechanism
ISL	Irish Sign Language
ISL Act	Irish Sign Language Act 2017
LGBTQIA+	Lesbian, gay, bisexual, transgender, queer/questioning, intersex, asexual, and other sexual orientations and gender identities.
MHE	Mental Health Establishment
NEB	National Equality Body
NDA	National Disability Authority
NDS	National Disability Strategy
NHRI	National Human Rights Institution
NTRIS	National Traveller and Roma Inclusion Strategy
OPCAT	Optional Protocol to the Convention Against Torture
PA	Personal Assistance
PSD	Public Sector Equality and Human Rights Duty
SEN	Special Educational Needs

UNCRC	UN Convention on the Rights of the Child
UNCRPD	United Nations Convention on the Rights of Persons with Disabilities

The Irish Human Rights and Equality Commission

The Irish Human Rights and Equality Commission (‘IHREC’) is both the ‘A’ status National Human Rights Institution (‘NHRI’) and the National Equality Body (‘NEB’) for Ireland.¹ We are the Independent Monitoring Mechanism (‘IMM’) for Ireland under the United Nations Convention on the Rights of Persons with Disabilities (‘UNCPRD’);² the Independent National Rapporteur on the Trafficking of Human Beings;³ and will be assigned the role of the Co-ordinating National Preventive Mechanism (NPM) under the Optional Protocol to the Convention against Torture, pending ratification.⁴ Alongside Northern Ireland’s national human rights and equality bodies, we have a mandate to consider and report on equality and human rights issues with an island of Ireland dimension.⁵ We also have legal powers under the Gender Pay Gap Information Act 2021,⁶ and a role in relation to the EU Artificial Intelligence Act.⁷

We welcome the opportunity to provide information to the UN Committee on the Rights of Persons with Disabilities (‘the Committee’) in advance of the pre-sessional meeting to consider the list of issues to raise with the State in advance of, and during, the review of Ireland’s compliance with the UNCPRD.

¹ In our Strategy Statement 2025-2027, we have prioritised the following aims within the context of our work: developing robust responses to current and emerging threats to human rights and equality; enhancing accountability mechanisms; strengthening the human rights and equality infrastructure in the State; fulfilling our international role as part of a global network of NHRIs and NEBs; and operating as a model organisation for implementing human rights and equality in practice. IHREC, [Strategy Statement 2025-2027](#) (2025).

² Section 103 of the [Assisted Decision-Making \(Capacity\) \(Amendment\) Act 2022](#) amends section 10(2) of the [Irish Human Rights and Equality Commission Act 2014](#) to provide that one of our functions is to promote and monitor the implementation in the State of the UNCPRD.

³ IHREC, [Commission Takes on New Role as Ireland’s National Rapporteur on the Trafficking of Human Beings](#) (2020).

⁴ To be provided under the *Inspection of Places of Detention Bill*, when enacted.

⁵ We work with the Northern Ireland Human Rights Commission (‘NIHRC’) in the Joint Committee, as set out in the Belfast Good Friday Agreement. Following the UK’s withdrawal from the EU, we, along with the NIHRC and the Equality Commission for Northern Ireland (‘ECNI’) comprise the Article 2(1) Working Group of the Dedicated Mechanism. This group is mandated to provide oversight of, and report on, rights and equality issues falling within the scope of the Article 2 [Windsor Framework] commitment that have an island of Ireland dimension.

⁶ [Gender Pay Gap Information Act 2021](#).

⁷ We have been included in a list of nine national public authorities responsible for protecting fundamental rights (‘Article 77 bodies’) under the EU Artificial Intelligence Act. Department of Enterprise, Trade and Employment, [Minister Calleary Announces Key Milestone in the Implementation of the EU Regulation on AI](#) (31 October 2024).

Ireland signed the UNCRPD in 2007 and ratified it in 2018, the last EU Member State to do so. It did not ratify the Optional Protocol until November 2024, which left Ireland an international outlier. Whilst such ratification was an important step, much remains to be done by the State towards the full UNCRPD implementation.⁸

Ireland submitted its first state report to the Committee in 2021.⁹ While the report is welcome, it is limited in its approach and focuses on policy and legislative outputs, rather than measuring outcomes and capturing the lived experience of individuals and communities.¹⁰

This is our first report to the Committee as the IMM for Ireland under the UNCRPD. Our submission builds on and complements our previous submissions to international and European reporting mechanisms, in which we have highlighted the many systemic and persistent barriers to the full realisation of the rights of disabled people in Ireland.¹¹ It is significantly informed by the input of Disabled Persons Organisations ('DPOs')¹², disabled people, including through our Disability Advisory Committee ('DAC'),¹³ and civil society organisations ('CSOs').

⁸ IHREC, [Correspondence issued to Minister for Children, Equality, Disability, Integration and Youth Re: Accession to the Optional Protocol to the United Nations Convention on the Rights of Persons with Disabilities](#) (2024).

⁹ Department of Children, Equality, Disability, Integration and Youth, [Initial Report of Ireland under the Convention on the Rights of Persons with Disabilities](#) (2021).

¹⁰ See IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024). IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women](#) (2025).

¹¹ IHREC's reports to UN Treaty Monitoring Bodies and European Bodies are available here: IHREC, [Reports to International Treaty Monitoring Bodies](#).

¹² The term Disabled Persons Organisations is used throughout the document noting that some organisations use the language of Disabled Persons Representative Organisations.

¹³ IHREC's [Disability Advisory Committee](#) ('DAC') is a statutory committee established in 2018 to assist and advise the Commission on matters related to its function of keeping under review the adequacy and effectiveness of law and practice in the State relating to the protection of people with disabilities; and advise the Commission on the fulfilment of its UNCRPD Article 33 independent monitoring role. IHREC, [Disability Advisory Committee](#). See S. 10(2)(ha); S. 18 (1)(aa) and S. 18(3)(a) of the *Irish Human Rights and Equality Commission Act, 2014*: "to promote and monitor the implementation in the State of the Convention on the Rights of Persons with Disabilities done at New York on 13 December 2006"; "appoint an advisory committee to assist and advise it on matters relating to its functions under section 10(2)(ha)" and "In the case of an advisory committee referred to in subsection (1)(aa), at least two-thirds of the number of persons appointed under subsection (3) shall have, or have had, a disability within the meaning of section 2 (1) of the *Disability Act 2005*": [Assisted Decision-Making \(Capacity\) \(Amendment\) Act 2022 - Amendment of Irish Human Rights and Equality Commission Act 2014](#).

General observation on the implementation of UNCRPD

We have repeatedly critiqued and called for review and amendment by the State of key legislative frameworks, including to bring forward legislation that adequately safeguards individuals at risk and/or deprived of their liberty.¹⁴ While the Assisted Decision-Making (Capacity) (ADMC ACT) Act 2015¹⁵ represented an important shift towards a rights-based model, its application in practice has presented challenges which require an immediate response.

A comprehensive review of existing legislation and public policy is urgently required, with a priority placed on alignment with the UNCRPD.¹⁶ This is particularly important as Ireland has a dualist legal system, and the State has resisted calls by IHREC and international treaty bodies to incorporate human rights in domestic legislation. This position has been reflected by the UN Human Rights Committee, which has recommended that the State should ensure the prompt and full commencement and reform of legislation concerning capacity and psychosocial disabilities, guaranteeing a human rights-based approach that endorses non-discrimination in line with international standards.¹⁷ The paradigm shift required by Ireland's ratification of the UNCRPD needs to be evident in revised legislation. The partial or non-

¹⁴ In April 2025, the Department of Health circulated a discussion paper regarding the development of Protection of Liberty Safeguards Legislation and opened a public consultation process seeking responses to this paper. Department of Health, Development of Protection of Liberty Safeguards Legislation: Discussion Paper (2025).

¹⁵ Irish Statute Book, [Assisted Decision-Making \(Capacity\) Act 2015](#). Irish Statute Book, [Assisted Decision-Making \(Capacity\) \(Amendment\) Act 2022](#).

¹⁶ We welcome the recent recommendation of the Committee on Economic, Social and Cultural Rights ('CESCR') to the State to conduct an independent and comprehensive baseline study of Irish legislation with the view to designing and adopting all measures necessary to facilitate the full transposition of the Covenant into the domestic legal order. Committee on Economic, Social and Cultural Rights, [Concluding Observations on the Fourth Periodic Report of Ireland](#), E/C.12/IRL/CO/4 (2024) paras. 4-5. IHREC, [Correspondence issued to Minister for Children, Equality, Disability, Integration and Youth Re: Accession to the Optional Protocol to the United Nations Convention on the Rights of Persons with Disabilities](#) (2024). IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 39-40.

¹⁷ [International Covenant on Civil and Political Rights](#) ('ICCPR'), (2023) para. 34. Priority areas including child rights, including discrepancies with the UN Convention on the Rights of the Child ('UNCRC') regarding the rights of disabled children's access to justice; the rights of people with psycho-social disabilities, and protections regarding reasonable accommodations, including measures to ensure access to justice. IHREC, [Submission to the Human Rights Committee on Ireland's Fifth Periodic Report](#) (ICCPR) (2022) p. 91; IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022) pp. 19-20;

commencement of essential legislation must be addressed.¹⁸ At all stages of reviewing, reforming and monitoring compliance with legislation that relates to disability, disabled people and DPOs should be involved, including by providing meaningful opportunities to engage in pre-legislative scrutiny and in the development and implementation of legislation. To date, the State has failed to meet its UNCRPD obligations on participation and consultation on legislation.¹⁹

The State maintains its declarations and reservations to Articles 12,²⁰ 14²¹ and 27²² of the Convention.

¹⁸ For further discussion, see IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 39-40.

¹⁹ For example, we note that during the legislative process in which the *Assisted Decision-Making (Capacity) (Amendment) Act 2022* was drafted and finalised, the consultation and engagement with disabled people and DPOs, in line with UNCRPD, was too limited. Consideration needs to be given to how the UNCRPD principle on participation is given effect in the monitoring of the implementation of the *Assisted Decision-Making (Capacity) Act 2015* and in the development of other disability-related legislation, as mandated by Article 4.3, as well as the UNCRPD Committee's General Comment 7. Similarly, IHREC has previously recommended that, in relation to the reform of the *Mental Health Act*, "the meaningful consultation with, and involvement of persons with psychosocial disabilities, through their representative organisations, including those representing children, in the development, implementation, monitoring and reviewing of the General Scheme and other relevant mental health legislation." IHREC letter to Minister Anne Rabbitte re: *Assisted Decision-Making (Capacity) (Amendment) Act 2022* (July 2023). IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022) p. 23. IHREC, Opening Statement by Adam Harris to the Joint Committee on Equality, Disability, Integration and Youth on the [Pre-Legislative scrutiny of the General Scheme of the Assisted Decision Making \(Capacity\) \(Amendment\) Bill 2021](#) (2022) p. 2.

²⁰ Declaration and reservation: Article 12: "Ireland recognises that persons with disabilities enjoy legal capacity on an equal basis with others in all aspects of life. Ireland declares its understanding that the Convention permits supported and substitute decision-making arrangements which provide for decisions to be made on behalf of a person, where such arrangements are necessary, in accordance with the law, and subject to appropriate and effective safeguards. To the extent article 12 may be interpreted as requiring the elimination of all substitute decision making arrangements, Ireland reserves the right to permit such arrangements in appropriate circumstances and subject to appropriate and effective safeguards." UN Treaty Collection, [Chapter IV Human Rights: 15. Convention on the Rights of Persons with Disabilities](#).

²¹ Declaration: Articles 12 and 14: "Ireland recognises that all persons with disabilities enjoy the right to liberty and security of person, and a right to respect for physical and mental integrity on an equal basis with others. Furthermore, Ireland declares its understanding that the Convention allows for compulsory care or treatment of persons, including measures to treat mental disorders, when circumstances render treatment of this kind necessary as a last resort, and the treatment is subject to legal safeguards." UN Treaty Collection, [Chapter IV Human Rights: 15. Convention on the Rights of Persons with Disabilities](#).

²² Reservation: Article 27 (1): "Ireland accepts the provisions of the Convention, subject to the understanding that none of its obligations relating to equal treatment in employment and occupation shall apply to the admission into or service in any of the Defence Forces, An Garda Síochána (Ireland's National Police Service), the Prison Service, the Fire Brigade, the Irish Coastguard and the Ambulance Service." UN Treaty Collection, [Chapter IV Human Rights: 15. Convention on the Rights of Persons with Disabilities](#).

The Committee should ask the State about Time-bound plans to:

Conduct a comprehensive review of existing legislation and public policy, with the active participation of disabled people and DPO's, focused on consolidating and aligning the fragmented legal frameworks with the UNCRPD,.

Withdraw its declarations and reservations under Articles 12, 14 and 27 of the UNCRPD.

National Machinery for the Advancement of the Rights of People with Disabilities

The State report references multiple institutions and mechanisms, documents and activities but as IHREC, CSOs and international treaty bodies have repeatedly argued, Ireland is 'policy rich, implementation poor'. 2026 will mark the 30th anniversary of the Report of the National Commission on the Status of People with Disabilities.²³ In contrast to the visionary intent, the record of the last three decades is of national machinery that persistently fails to deliver the advancement of rights.

The State's record on equality strategies has been one of failure:

- › Failure to develop policy in a timely and relevant manner;
- › Failure to adequately implement policy and deliver demonstrable impact on inequality and discrimination;
- › Failure to provide adequate oversight; and
- › Failure to approach policy development in a coordinated manner across various equality grounds.²⁴

²³ Commission on the Status of People with Disabilities, [A Strategy for Equality: Report of the Commission on the Status of People with Disabilities](#) (1996). Dáil Eireann Debate, [Report of the Commission on the Status of People with Disabilities: Statements](#) (1 May 1997).

²⁴ IHREC has recommended that the State undertakes research on incorporating intersectionality into equality policymaking, and that equality strategies comprehensively address intersectionality and that the State publish

Despite extensive policy documents,²⁵ Government commitments,²⁶ the establishment of a Cabinet Committee on Disability,²⁷ the establishment of a Disability Unit in the Department of

the conceptual and methodological approach to achieving this. Policy makers responsible for equality strategies should receive training on applying an intersectional lens to equality policymaking. For a detailed assessment of the inequality and rights violations that the communities, the subject of equality strategies face on daily basis: see IHREC, [Ireland and the Rights of the Child: Submission to the Committee on the Rights of the Child on Ireland's combined fifth and sixth periodic reports](#) (2022); IHREC, [Ireland and the International Covenant on Civil and Political Rights: Submission to the Human Rights Committee on Ireland's fifth periodic report](#) (2022); IHREC, [Ireland and the Convention on the Elimination of All Forms of Discrimination against Women: Submission to the Committee on the Elimination of Discrimination against Women for the List of Issues Prior to Reporting on Ireland's 8th periodic cycle](#) (2023); IHREC, [Ireland and the 6th Monitoring Cycle of the European Commission against Racism and Intolerance](#) (2024); IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights: Submission to the Committee on Economic, Social and Cultural Rights on Ireland's Fourth Periodic Report](#) (2024); IHREC, Core Components of National Equality Strategies (2025) p. 5 (*forthcoming*).

²⁵ For an overview of Irish disability legislation, see National Disability Authority (NDA), [Irish Disability Legislation](#). The first National Disability Strategy ('NDS') was launched in 2017 and ran until 2022. Department of Children, Disability and Equality, [National Disability Inclusion Strategy \(2017-2021\)](#) (2020). Other relevant policy documents include: the Action Plan for Disability Services 2024 – 2026, the Autism Innovation Strategy (2024), the National Housing Strategy for Disabled People 2022 – 2027, the Comprehensive Employment Strategy for People with Disabilities 2015-2024, the HSE Roadmap for Service Improvement 2023 – 2026: Disability Services for Children and Young People; the Comprehensive Employment Strategy for People with Disabilities 2015-2024. (2015); Department of Housing, Local Government and Heritage; Department of Children, Disability and Equality; Department of Health, [National Housing Strategy for Disabled People 2022 – 2027](#), (2022); Department of Children, Disability and Equality, [Action Plan for Disability Services 2024 – 2026](#) (2023); Health Service Executive, Children's Disability Network Team, [Roadmap for Service Improvement 2023 – 2026: Disability Services for Children and Young People](#) (2024); Department of Children, Disability and Equality, [Autism Innovation Strategy](#) (2024).

²⁶ Department of the Taoiseach, [Programme for Government 2025 - Securing Ireland's Future](#) (2025); The Irish Times, [Programme for Government aims for 'Step Change' in Disability Services](#) (17 January 2025). In February 2025, our DAC shared their view that the Programme for Government failed to demonstrate a plan to achieve or a commitment to deliver systemic change. Members also expressed the view that focus was disproportionately on children and service delivery/care provision but did not adequately address the needs of disabled adults. IHREC, [Disability Advisory Committee](#).

²⁷ The Government established a Cabinet Committee on Children and Education and Disability in April 2024, with the express purpose of “breaking down silos across Government and making change happen more quickly... to bring new coherence and faster progress on solving the issues that matter most to people with disabilities.” Department of the Taoiseach, [Speech by the Taoiseach Simon Harris - Nomination of Members of Government, Dáil Éireann](#) (11 April 2024). Following the election of a new Government, it was confirmed that a Cabinet Committee on Disability had been established, and that it would be supported by a new Disability Unit in the Department of an Taoiseach. Houses of the Oireachtas, [Departmental Functions Dáil Éireann Debate](#), Written Answers (29 April 2025).

An Taoiseach,²⁸ as well as a Parliamentary Committee on Disability Matters,²⁹ evidence of tangible and impactful outcomes that demonstrate progress towards implementing the UNCRPD is scant.³⁰ Ireland has not had a National Disability Strategy ('NDS') since the previous strategy expired in 2022.³¹ Intersectional and coordinated policy making has been undermined by delayed and limited national equality strategies.³² While it is intended that a new NDS will be published in 2025, delays persist.

In March 2024, we provided the State with a list of recommendations and concrete solutions from United Nations treaty monitoring mechanisms and Council of Europe bodies related to the rights of disabled people in Ireland; however, there has been no structured engagement with us on how the State is implementing these recommendations. To put in place structural and ambitious reforms, the State must prioritise domestic implementation of concluding observations from treaty monitoring bodies, including in the new NDS, and establish and

²⁸ In March 2025, the Taoiseach confirmed the establishment of a new Disability Unit in his department, to "support the work of the Minister for children, disability and equality and other Ministers in driving cross-Government working and collaboration to improve the lives of people with disabilities and enable them to achieve their potential." Houses of the Oireachtas, [Departmental Administrative Arrangements - Dáil Éireann Debate](#) (4 March 2025).

²⁹ The Joint Oireachtas Committee on Disability Matters was established in September 2020 and ceased with the dissolution of the 33rd Dáil in November 2024. The Committee was re-established by the 34th Dáil in April 2025. The Committee considers disability matters including monitoring Ireland's implementation of the United Nations Convention on the Rights of People with Disabilities. Houses of the Oireachtas, '[Our Role: Committee on Disability Matters](#)'. Houses of the Oireachtas, [Committee on Disability Matters](#).

³⁰ Research commissioned by IHREC found that just 21% of people in Ireland believe that the Government is doing enough to support disabled people. In addition, just 21% of respondents believe that disabled people receive equal opportunities in terms of employment. IHREC, [Just 1 in 5 Agree that Government is doing enough to support Disabled People](#) (2023). As is discussed below, the dearth of data is a systemic challenge to assessing human rights outcomes for disabled people.

³¹ The first NDS was launched in 2017 and ran until 2022. Department of Children, Disability and Equality, [National Disability Inclusion Strategy 2017-2021](#) (2020). A successor national strategy is anticipated to be published in 2025.

³² The first National Traveller and Roma Strategy (2017-2021) was succeeded by the National Traveller and Roma Inclusion Strategy II ('NTRIS' II) (2024-2028). Department of Children, Disability and Equality, [National Traveller and Roma Inclusion Strategy II 2024-2028](#) (2024). The LGBTIQ+ Inclusion Strategy covered the period 2019-2021. Department of Children, Disability and Equality, [LGBTIQ+ Inclusion Strategy 2019-2021](#) (2019). The National LGBTIQ+ Inclusion Strategy II 2024-2028 was published on 12 June 2025. Department of Children Disability and Equality, [National LGBTIQ+ Inclusion Strategy II 2024-2028](#) (2025). The National Strategy for Women and Girls covered the period 2017-2020. Department of Justice, [National Strategy for Women and Girls 2017-2020](#) (2017). The Migrant Integration Strategy covered the period 2017-2020, extended to 2021. Department of Children, Disability and Equality, [Migrant Integration Strategy](#) (2020).

resource the necessary mechanisms for implementation.³³ Despite financial investment and commitments, the State's response to the widespread rights violations and inequalities experienced disabled people has been grossly inadequate to date.

There is a clear need for:

- › improved coherence in policy development and disability service delivery;
- › improved access to data in service of resource allocation;
- › cross-government coordination and cross-sectoral policy development and accountability;
- › provision of consistent and accessible information on available supports at key transition points;
- › measures to strengthen DPO capacity to enable full engagement with policy making and data collection;
- › a commitment to co-creation of policy; and
- › the provision of training, toolkits and resources that support human-centred design principles.³⁴

³³ Our Strategy Statement 2025-2027 commits us to monitor and report on the State's compliance with the full range of human rights and equality treaties to which it is bound: IHREC, [Strategy Statement 2025-2027](#) (2025) p. 16.

³⁴ Our expectation is that the forthcoming NDS will have a welcome priority focus on evidence, collaborative governance, intersectionality, implementation, and accountability and should be aligned with other equality strategies. This means that rights holders and representative groups would be engaged throughout the lifecycle of the equality strategy, and that the strategy and implementation plan would have clear targets, performance indicators, impact, metrics, outcomes, timeframes and budget lines. The strategy should include a lifecycle approach to effectively address the needs and experiences of Irish society including children, young people, and older people; a regional and local perspective, and an Island of Ireland dimension; whole-of-government approach and leadership; defined roles for CSOs throughout the lifecycle of the strategy; and independent, accountable monitoring structures. Further, there should be explicit compliance with the PSEHRD. IHREC, Core Components of National Equality Strategies (2025, *forthcoming*). See also Department of Public Expenditure NDP Delivery and Reform, Disability Policy in Focus: A Report on Knowledge Sharing Symposia for Improved Policymaking and Outcomes (2025); DPO Network, [Disability Policy in Focus - DPER Knowledge Sharing Symposia for Improved Policy Policymaking and Outcomes Event](#) (2024); Community Platform, [Submission to the UN Committee on Economic, Social and Cultural Rights: Fourth Periodic Review of Ireland](#) (2024) pp. 8-11.

The Committee should ask the State:

Whether the National Disability Strategy and its associated action plan are underpinned by resourced implementation and accountability structures, including independent oversight of delivery, and monitoring of measurable outputs and outcomes to improve the UNCRPD compliance.

How it will ensure a coordinated approach to the implementation of the new National Disability Strategy and the equality strategies covering women and girls, LGBTQIA+ people, migrants, and Travellers and Roma.

Public Sector Equality and Human Rights Duty

Section 42 of the Irish Human Rights and Equality Commission Act 2014 ('IHREC Act')³⁵ imposes a statutory obligation on all public bodies to have regard to the need to eliminate discrimination, promote equality, and protect human rights in carrying out their functions. The Public Sector Equality and Human Rights Duty ('PSD') is the national mechanism under which discrimination can be advanced, recognised, and addressed. Implementation remains inconsistent across the public sector.³⁶

The PSD promotes consultation with organisations representing rights holders, to identify the issues relevant to them in advance of development of services, policies or programmes. Properly implemented, the PSD can assist in identifying the disproportionate impact of unrecognised and unaddressed obstacles in accessing State services faced by disabled people, including those with intersecting identities.

We continue to provide guidance and training to public bodies on implementing the PSD.³⁷ Nevertheless, we have identified gaps in compliance, including failure to conduct effective Equality and Human Rights Impact Assessments and a lack of meaningful engagement with affected groups.

The Committee should ask the State about:

Whether it will issue a formal communication, in the form of a circular, to public bodies to advance compliance with the Public Sector Equality and Human Rights Duty, with the aim to embed equality in policy planning, budgeting, service delivery frameworks and to recommend

³⁵ Section 42 of the [Irish Human Rights and Equality Commission Act, 2014](#). See also IHREC, [Public Sector Equality and Human Rights Duty](#).

³⁶ In our forthcoming Annual Report for 2024, we will report that only 39% of public bodies that provided data to our PSEHRD portal for 2024 met their publication obligations in part or in full, though we welcome that this figure is an increase of 52% of public bodies when compared against the 2023 figures. 62% of all public bodies are not compliant with any publishing requirements.

³⁷ IHREC, [Implementing the Public Sector Equality and Human Rights Duty – 2nd Edition](#) (2024). See also IHREC, [Public Sector Equality and Human Rights Duty](#). Training has focused on methodologies to assist public bodies to consider the intersectionality of equality and human rights issues faced by disabled people.

the use of Equality and Human Rights Impact Assessments with transparent publication of findings in relation to outcomes for disabled people in Annual Reports.

Whether the forthcoming National Disability Strategy includes specific reference to obligations under Section 42 of the Irish Human Rights and Equality Commission Act 2014 with particular attention to Section 42(1).

What steps will be taken to ensure that public bodies carry out an assessment of the issues faced by disabled people with respect to relevant functions in consultation with DPOs and CSOs with specific attention to intersectionality and report on progress in compliance with their obligations under section 42 of the Irish Human Rights and Equality Commission Act 2014.

Voices of Disabled People

In preparing our submission, we have drawn on the expertise and on-the-ground experience and insights of a wide range of rights-holders and CSOs, including through holding a Civil Society Forum focused on the right to independent living,³⁸ a forum for representatives of DPOs,³⁹ holding bilateral engagements, reviewing civil society evidence and analysis, and engaging with our DAC.⁴⁰ We developed guidance to support CSOs in reporting to and engaging with the Committee during this ‘list of issues’ process.⁴¹ In our correspondence and meetings, we have repeatedly raised with the State the importance of funding DPO/CSO engagement and the imperative of resourcing full participation.⁴²

We have consistently reminded the State of its obligations to consult with and actively involve disabled people, including through their representative organisations, in the development and implementation of legislation and policy frameworks and procedures to ensure the full and equal involvement of disabled people in legislation, policies, strategies and action plans.⁴³

We have recommended that the State takes active steps to support the establishment and capacity and active engagement of DPOs at community, regional and national levels,

³⁸ We held a consultation on the UNCRPD that focused on the right to independent living in April 2025, which was attended by a wide representation of national and local CSOs, including DPOs, as well as self-advocates and family advocates and representatives of academic institutions and public bodies.

³⁹ We held a consultation on the UNCRPD with representatives of national and local DPOs in May 2025.

⁴⁰ IHREC, [Disability Advisory Committee](#).

⁴¹ IHREC, [Guidance to Civil Society on the Reporting Process under the UN Convention on the Rights of Persons with Disabilities – the ‘List of Issues’ Stage](#) (2025).

⁴² We have repeatedly raised with the State the necessity of funding CSOs’ participation in international treaty mechanisms. IHREC, [Ireland and the Sustainable Development Goals Submission to the 2023 UN High-Level Political Forum on the second Voluntary National Review of Ireland](#) (2023) p. 12. IHREC. Correspondence with Department of Children, Disability and Equality re: Civil society participation at Ireland’s eighth periodic report under the Convention on the Elimination of All Forms of Discrimination Against Women (2 April 2025).

⁴³ We have called upon the State to take practical and tangible action to ensure meaningful, continuous, resourced and unhindered participation of disabled people in decisions that affect them, including through their representative organisations, and to learn from the disability movement on the value of the human rights model and rebalancing power dynamics. Committee on the Rights of Persons with Disabilities, [General comment No. 7 \(2018\) on the Participation of Persons with Disabilities, Including Children with Disabilities, Through their Representative Organizations, in the Implementation and Monitoring of the Convention](#) (2018) para. 53. See, for example, IHREC, [Submission to the Mental Health Commission’s Public Consultation on the Rules and Code of Practice Governing the use of Seclusion and Restraint](#) (2021) pp. 14-18; IHREC, [Policy Statement on Care](#) (2023) p. 15. Also of relevant is adherence to Section 42 of the [Irish Human Rights and Equality Commission Act, 2014](#). See also IHREC, [Public Sector Equality and Human Rights Duty](#).

representing diverse groups.⁴⁴ State funding to enable DPOs to monitor the Convention is inadequate.⁴⁵ The State must ring-fence adequate resources for the ongoing establishment, development, active participation and meaningful engagement of DPOs,⁴⁶ and must develop a system to monitor and evaluate the performance of the State and other actors involving and enabling the participation of DPOs and disabled people. This Commitment should be a pillar of the forthcoming NDS with agreed processes for delivering same.

The Committee should ask the State about:

The provision of multi-annual, ring-fenced and core funding for DPOs and relevant civil society organisations, including community development, rural and grassroots organisations, which ensures decent work and adequate wages for staff and builds capacity to meet increasing need for advocacy and services, and includes resourcing for full participation in international treaty mechanisms.

⁴⁴ Measures to adequately resource DPOs should be a key pillar of any UNCRPD Implementation Strategy. This would properly provide for the leadership by disabled people in the evolution of a new strategy, in its effective implementation, and in its evaluation. IHREC, [Letter to the Minister for Minister for Children, Equality, Disability, Integration and Youth, regarding the State's accession to the Optional Protocol to the United Nations Convention on the Rights of Persons with Disabilities](#) (2024).

⁴⁵ While the State repeatedly highlights the critical contribution of CSOs at an international level, it does not adequately fund Irish CSOs to attend UN State Reviews. We have called for such funding to be made at a level that matches the rising costs of foreign travel and includes funding of required participation supports, for example ISL interpreters and personal assistance for disabled rights holders. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the Committee on Economic, Social and Cultural Rights on Ireland's fourth periodic report](#) (2024) p. 15. We have previously highlighted situations whereby the State recognised disabled people as key stakeholders, but did not provide the resources required for their full participation, including the provision of accessible information and administrative support to DPOS. IHREC, [Ireland and the Sustainable Development Goals Submission to the 2023 UN High-Level Political Forum on the second Voluntary National Review of Ireland](#) (2023) p. 12.

⁴⁶ We have previously called for the establishment and work of community, local and national DPOs - noting the recognition of the UNCRPD of diverse forms of impairment and the intersecting needs of specific groups - including through increasing and reorienting funding to allow for the genuine inclusion of disabled people. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the Committee on Economic, Social and Cultural Rights on Ireland's fourth periodic report](#) (2024) p. 15. We have called for sustainable core funding, capacity building and training. IHREC, [Consultation on Terms of Reference and Work Programme for the Joint Oireachtas Committee on Disability Matters](#) (2020) p. 6. [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the UN Committee on Economic, Social and Cultural Rights for the List of Issues on Ireland's Fourth Periodic Report](#) (2021) p. 21. IHREC, [Ireland and the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence](#) (2022) pp. 33-34.

Measures to ensure an enabling and accessible environment for the active and informed participation of DPOs and civil society organisations in decision-making and monitoring mechanisms, including universal design, provision of accommodation and funding.

Article 5: Equality and Non-Discrimination

The prohibition on disability discrimination is currently confined to employment and the provision of goods and services in the Employment Equality Acts, 1998⁴⁷ and the Equal Status Acts 2000-2018⁴⁸ respectively.⁴⁹ The Equality Acts contain a litany of exemptions to the prohibition.⁵⁰ The definition of disability⁵¹ contained within the Equality Acts, while broadly interpreted in practice, contains highly medicalised wording that is not aligned with the Convention.⁵² Different thresholds apply to the provision of reasonable accommodation in employment, and in provision of goods and services; the definition of reasonable accommodation with regards goods and services establishes a duty that is narrow in scope and not UNCRPD compliant.⁵³ Concerns arise with the functioning and effectiveness of the

⁴⁷ [Employment Equality Act, 1998](#).

⁴⁸ The [Equal Status Acts, 2000-2018](#) include the [Equal Status Act, 2000](#), [Equality Act 2004](#), [Equal Status \(Amendment\) Act 2012](#), and [Equality \(Miscellaneous Provisions\) Act 2015](#) which prohibit discrimination in the provision of goods and services, the provision of accommodation and access to education, on any of the nine grounds set out in the legislation (gender; civil status; family status; sexual orientation; religion; age; disability, race; Traveller community; and housing (only in the provision of accommodation)). There is another equality ground only relevant to housing: being in receipt of [housing assistance payment](#) (HAP).

⁴⁹ Queries made to IHREC regarding discrimination on the basis of disability far exceed queries regarding any other equality ground. See IHREC, [Annual Report 2023](#) (2024) p. 13.

⁵⁰ Section 14(a)(i) of the [Equal Status Act, 2000](#) states “Nothing in this Act shall be construed as prohibiting the taking of any action that is required by or under any enactment or order of a court.” The effect of this section is to remove from the ambit of anti-discrimination protection any measure required by law. Read together with a limited definition of ‘service’ under [Section 2 of the Equal Status Act, 2000](#), it serves to exempt a broad range of crucial State services from the duty to not discriminate. IHREC, [Submission on the Review of the Equality Acts](#) (2021) pp. 32-33.

⁵¹ Section 2(1) of the [Equal Status Act, 2000](#) defines “disability” as (a) the total or partial absence of a person’s bodily or mental functions, including the absence of a part of a person’s body, (b) the presence in the body of organisms causing, or likely to cause chronic disease or illness, (c) the malfunction, malformation or disfigurement of a part of a person’s body, (d) a condition or malfunction which results in a person learning differently from a person without the condition or malfunction or (e) a condition, disease or illness which affect’s a person’s thought processes, perception of reality, emotions or judgement or which results in disturbed behaviour.

⁵² The current definition has been interpreted expansively by the WRC and the Labour Court. It is inclusive of a wide range of impairments and does not require that a duration or threshold of disability be established. The definition nonetheless contains stigmatising medicalised language and must be amended while maintaining the broad scope of protection that has been established. IHREC, [Submission on the Review of the Equality Acts](#) (2023) pp. 47-48.

⁵³ Section 4 of the [Equal Status Act, 2000](#) provides that discrimination includes refusal or failure by the provider to do all that is reasonable to accommodate the needs of a person with a disability by providing special treatment or facility, if without such special treatment or facilities it would be ‘impossible or unduly difficult’ for

legislation, procedure and practices of judicial bodies⁵⁴, the provision of adequate compensation and lack of access to legal aid,⁵⁵ including in disability discrimination cases.⁵⁶

A State review of equality legislation⁵⁷ represented a unique opportunity to significantly strengthen equality legislation and improve protections for disabled people. We welcome the recent publication of the General Scheme of the Equality (Miscellaneous Provisions) Bill 2024.⁵⁸ We acknowledge that the General Scheme represents some progress in advancing

the person to avail of the service. The service provider is not obliged to provide any reasonable accommodation in circumstances where such provision would give rise to a cost, other than nominal cost. What amounts to a nominal cost is not specified and will depend on the circumstances such as the size and resources of the provider. In addition, the legislation does not allow for complaints of intersectional discrimination. IHREC, [Submission on the Review of the Equality Acts](#) (2023) pp. 79-82. Department of Children, Disability and Equality, [The Review of the Equality Acts](#) (2025).

⁵⁴ This includes the Workplace Relations Commission, the Labour Court, and the Courts more generally noting that pursuant to the *Intoxicating Liquor Act 2003* (as amended) challenges to discriminatory practices in access to licensed premises must be brought to the District Court and not to the Workplace Relations Commission giving rise to difficulties and obstacles to such access. IHREC, [Report of a Review of Section 19 of the Intoxicating Liquor Act 2003 Carried out Pursuant to Section 30 of the Irish Human Rights and Equality Commission Act 2014](#) (2022).

⁵⁵ In June 2022, the Government initiated a review of the Civil Legal Aid Scheme, which IHREC submitted a response to in 2023. IHREC, [Submission to the Civil Legal Aid Review](#) (2023). The review remains pending with no date for publication.

⁵⁶ Our work providing legal assistance to disabled people in discrimination cases has indicated several issues with the operation of the Equality Acts, including inaccessible complaints forms, burdensome notification requirements and strict time-limits for taking a complaint. Considerations arise in respect of hearings in the Workplace Relations Commission being in public and the lack of accessible and clear administrative process for seeking anonymity in such proceedings, which may impact on disabled people; inconsistencies in listing times and notice given for hearings; and inadequate compensation limits, particularly for egregious violations of the law such as denial of access to education. The *Civil Legal Aid Act, 1995* excludes tribunals from its remit which includes the Workplace Relations Commission and Labour Court, putting legal aid out of reach for the majority of equality cases and victims of discrimination. We have recommended this be addressed and that Civil Legal Aid Scheme is expanded to include a wider range of areas including, at a minimum, employment and equality cases before the Workplace Relations Commission. IHREC, [Submission on the Review of the Equality Acts](#) (2023) pp. 32-33; 36-39; 79-82; IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 20.

⁵⁷ In June 2021, the Minister for Children, Equality, Disability, Integration and Youth announced a review of the Equality Acts, including the *Equal Status Acts, 2000-2018* and the *Employment Equality Acts, 1998-2015*. Government of Ireland, [Programme for Government](#) (2020) p. 77. IHREC submitted substantial advice and recommendations on the shortcomings and issues we have identified in the legislation during the review process. IHREC, [Recommendations on the Review of the Equality Acts](#) (2021). IHREC, [Submission on the Review of the Equality Acts](#) (2023).

⁵⁸ Department of Children, Disability and Equality, [General Scheme of the Equality \(Miscellaneous Provisions\) Bill 2024](#) (2025).

Ireland's equality legislation. However, several issues have not been addressed.^{59 60} The review of equality legislation remains unpublished, with no commitment to publish the review in the 2025 Programme for Government.⁶¹

The Committee should ask the State about:

The failure to publish the final report of the Equality Acts Review.

Timeline and plans to reform and modernise Ireland's equality legislation, including by repealing section 14 of the Equal Status Act 2000 and providing for intersectional discrimination in the Equality Acts.

Plans to improve the efficiency and accessibility of the Workplace Relations Commission and the Labour Court.

The inadequacy of the protection against discrimination currently provided by equality legislation to disabled people and intersectional groups.

⁵⁹ IHREC, [Submission on the Review of the Equality Acts](#) (2023) pp. 44-46; IHREC, [Letter to Department of Children, Equality, Disability, Integration and Youth – General Scheme of the Equality \(Miscellaneous Provisions\) Bill 2024](#) (January 2025). We note the concluding recommendations of UN treaty monitoring mechanisms recommending that the State amend section 14 of the Equal Status Acts (ESA) to ensure that an effective remedy is available for discrimination that has a legislative basis. Committee on the Elimination of Discrimination against Women, [Concluding Observations on the Combined Sixth and Seventh Periodic Reports of Ireland](#), CEDAW/CO/IRL/6-7 (2017) para. 13.

⁶⁰ The proposed legislation does not address the exemption of public functions from the prohibition of discrimination, challenges to proving indirect discrimination or issues relating to the collection and publication of disaggregated equality data, and provisions to strengthen and expand the PSEHRD. For more on the outstanding issues remaining in equality legislation see: IHREC, [Letter to the Department of Children, Equality, Disability, Integration and Youth on the General Scheme of the Equality \(Miscellaneous Provisions\) Bill 2024](#) (2025).

⁶¹ Government of Ireland, [Programme for Government 2025: Securing Ireland's Future](#) (2025). As the National Equality Body, we have invested significant resources into engagement with the review of the Equality Acts including two substantial submissions, the establishment of the Future of Equality Legislation Advisory Committee, a policy statement on socio-economic status as a discriminatory ground, and engagement with Government Departmental officials. Despite this, the Government has failed to consider many of our recommendations in proposed reforms. IHREC, [Recommendations on the Review of the Equality Acts](#) (2021); IHREC, [Submission on the Review of the Equality Acts](#) (2023); IHREC, [Letter to Department of Children, Equality, Disability, Integration and Youth – General Scheme of the Equality \(Miscellaneous Provisions\) Bill 2024](#) (January 2025).

Article 6: Women with Disabilities

In April 2022, 22% of women and girls in Ireland were disabled.⁶² There is an urgent need for intersectional policy making and solution-focused collaboration between bodies tasked with implementation.⁶³

Our DAC has highlighted a number of specific concerns regarding disabled women including redress for survivors of mother and baby homes,⁶⁴ gender-based violence in institutional and domestic settings,⁶⁵ and challenges regarding leadership of disabled women. We note CSOs' concerns regarding gendered impacts of means-testing for social protection⁶⁶ and poorer health outcomes for disabled women.⁶⁷

⁶² Central Statistics Office, [Census 2022](#) (2023).

⁶³ Our participation on national strategy steering groups has highlighted that this approach siloes members of structurally vulnerable groups and their civil society representatives from one another, where they must compete for time, attention, resources and action. State commissioned research into the implementation of previous national equality strategies concluded that there are numerous obstacles at an administrative level to effective implementation including collaboration between stakeholders. Centre for Effective Services, [Realising the Promise of National Equality Policy](#) (2023). We note with concern that the recommendations of the report commissioned by the State do not appear to have been applied adequately to subsequent strategies. IHREC, [Observations on the Draft National Traveller and Roma Inclusion Strategy 2024-2028 and Draft Action Plan 2024-2028](#) (2024). See also our commentary regarding equality strategies above. "National Machinery for the Advancement of the Rights of People with Disabilities."

⁶⁴ Including delays in accessing compensation.

⁶⁵ See Article 16 - Freedom from Exploitation, Violence and Abuse for discussion on institutional abuse and Domestic, Sexual, and Gender-Based Violence (DSGBV).

⁶⁶ In our engagements with CSOs, we heard reports of loss of social supports for women who become coupled. It was noted that for disabled women, there is an added layer of structural vulnerability to domestic violence and lack of marriage equality.

⁶⁷ See Article 25 – Health.

There are almost no targets relating to gender across the various national strategies on disability.⁶⁸ Despite well-established poorer outcomes in employment⁶⁹ and higher risk of exposure to violence, abuse and exploitation,⁷⁰ there are no measures targeting disabled women in national strategies on disability, employment or domestic, sexual and gender-based violence ('DSGBV').⁷¹ There is a consistent failure to consider the perspective of disabled women within policies targeting women and disabled people respectively.

⁶⁸ For example, there is an absence of gender-sensitivity in mental health provision in Ireland. While the 'Sharing the Vision: A Mental Health Policy for Everyone' includes gender-sensitive approaches as a recommendation and key action, gender-sensitive mental healthcare has yet to be embedded in HSE National Service Plans. The 2022-2024 Implementation Plan, and subsequently the 2025-2027 Implementation Plan, committed to including Key Performance Indicators (KPIs) on women's mental health in HSE Service Plans; however, KPIs have not yet been developed. The 2025-2027 Implementation Plan commits to developing a toolkit for embedding women's mental health, including specific actions and indicators, by 2026. Department of Health, [Sharing the Vision: A Mental Health Policy for Everyone](#) (2022) p. 95. Department of Health, [Sharing the Vision: A Mental Health Policy for Everyone: Implementation Plan 2025-2027](#) (2022) p. 29. Health Service Executive, [National Service Plan 2023](#) (2023); Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) para. 58. We note the Joint Oireachtas Committee on Disability Matters recommendation that all national strategies for disabled people must ensure the inclusion of high-level gender-based targets. Under the UNCRPD implementation a mechanism must be introduced to enable meaningful alignment of all strategies affecting people with disabilities across Government Departments while ensuring that all national strategies for disabled people include high-level gender-based targets. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 31.

The National Strategy for Women and Girls largely deferred responsibility for issues facing disabled women to the National Disability Inclusion Strategy which subsequently contained only one reference to women. The Strategy acknowledges the greater marginalisation of disabled women with regards health, public participation and socio-economic circumstances but expressly states these issues will be addressed by the National Disability Inclusion Strategy. Department of Justice and Equality, [National Strategy for Women and Girls 2017-2020](#) (2017) pp. 30; 44; 51. Department of Justice and Equality, [National Disability Inclusion Strategy 2017-2021](#) (2017) p. 12.

⁶⁹ The 2021 Indecon International Research Economists (Indecon) Cost of Disability in Ireland Report found that "while the national labour force participation rate was 61.4%, the rate for persons with a disability was less than half this at 30.2%. For women with disabilities the percentage labour market participation rate was even lower at 25.8%". Department of Social Protection, [The Cost of Disability in Ireland](#) (2021) p. 37.

⁷⁰ Women's Aid, Trinity College Dublin and The Disabled Gender Based Violence Taskforce, [Disabled Women's Experiences of Intimate Partner Abuse in Ireland: Research Project Report](#) (2024).

⁷¹ See Government of Ireland, [Comprehensive Employment Strategy for People with Disabilities 2015-2024](#) (2015) and Government of Ireland, [Third National Strategy on Domestic, Sexual & Gender-Based Violence 2022-2026](#) (2022). We have called for strategies that address the particular needs of structurally vulnerable victims and survivors, including disabled women. IHREC, [Ireland and the Council of Europe Convention on Preventing and Combatting Violence against Women and Domestic Violence](#) (2022). IHREC, [Ireland and the International Covenant on Civil and Political Rights – Submission to the Human Rights Committee on Ireland's 5th Periodic Report](#) (2022).

The Committee should ask the State about measures to:

Ensure an intersectional approach in national equality and human rights strategies, including measures to reflect the intersectional nature of inequality on equality groups and on the basis of multiple impairments.

Address educational, employment and health outcomes for disabled women and girls.

Ensure the participation of disabled women in the co-design, implementation, monitoring and evaluation of national equality and human rights strategies, through accessible mechanisms.

Develop a trauma-informed and universally accessible continuum of supports for women and girls experiencing gender-based violence.

Article 7: Children with Disabilities

In 2022, 17.5% of children and young people aged 0-19 identified as having a disability.⁷²

Issues arising for disabled children in Ireland are not adequately addressed through current law and policy. Disabled children are not actively involved in consultations on activities that affect them and as a result their experience does not feed into policy formation.⁷³

Over a period of several years, children's mental health services have remained insufficient and inadequate.⁷⁴ We note with concern that the Inspector of Mental Health Services could not provide an assurance to parents that their children will have access to a safe, effective and evidence-based mental health service.⁷⁵

⁷² Central Statistics Office, [Census 2022](#) (2023).

⁷³ We have called for close consultation with, and active involvement of disabled children and their representative organisations in policy making. IHREC, [Ireland the Rights of the Child](#) (2022) p. 60-61. See also Office of the Ombudsman for Children, [Mind the Gap: Research on Barriers to the Realisation of Rights of Children with Disabilities in Ireland](#) (2021) p. 119. The Oireachtas Joint Committee on Disability Matters has noted that disabled children "may have been overlooked" in the preparation of the *Child Care (Amendment) Bill 2023*. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 33. We note current policies that aim to deliver services for disabled children including: Government of Ireland, [National Policy Framework for Children and Young People 2023-2028](#) (2023). Health Service Executive, Children's Disability Network Team, [Roadmap for Service Improvement 2023 – 2026: Disability Services for Children and Young People](#) (2024). An inclusive and wide ranging consultative process, including the voices of disabled children and/or their parents is required under the statutory obligations of the [Public Sector Equality and Human Rights Duty](#).

⁷⁴ See Article 14 - Liberty and Security of the Person; Article 15 - Freedom of Torture, Cruel, Inhuman or Degrading Treatment or Punishment. We have called on the State to take urgent action to improve the quality of services and increase funding provision, to establish an accessible and independent child specific mental health advocacy and information service and provide adequate and sufficient mental health services for children. IHREC, [Ireland the Rights of the Child](#) (2022) pp. 73-75. IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) pp. 83-86. UN Committee on the Rights of the Child, [Concluding Observations on the combined fifth and sixth periodic reports of Ireland](#) (2023) CRC/C/IRL/CO/5-6, para 31. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 40.

⁷⁵ The Inspector of Mental Health Services concerns included the risk to safety and wellbeing of children receiving mental health services, the management of that risk, and the lack of clinical governance. As a result, she recommended "the immediate and independent regulation of CAMHS by the Mental Health Commission to ensure the State and HSE act swiftly to implement the governance and clinical reforms to help guarantee that all children have access to evidence-based and safe services, regardless of geographical location or ability to pay." Mental Health Commission, [Independent Review of the provision of Child and Adolescent Mental Health Services \(CAMHS\) in the State by the Inspector of Mental Health Services](#) (2023) p. 5. See also College of Psychiatrists of Ireland, [A Model of Governance and Management Structures for Child and Adolescent Mental Health Services in Ireland](#) (2025) p. 9.

The State's failure to fully commence the Education for Persons with Special Educational Needs Act 2004 ('EPSEN Act'),⁷⁶ which provides for an assessment of educational need, and to administer an accessible, adequate, efficient Assessment of Need ('AON')⁷⁷ process, as required by the Disability Act 2005 pushes many disabled children and their families to undertake long and costly legal battles to secure their rights.⁷⁸ We are extremely concerned by the adversarial⁷⁹ and litigious approach of the State to the provision of disability supports and services further delaying access to education for disabled children.⁸⁰ The absence of a clear legal right to supports and services identified in the AON is a significant limitation that needs addressing.

⁷⁶ Sections 3-13 of the [Education for Persons with Special Educational Needs Act, 2004](#) (EPSEN Act) provide a statutory entitlement to an education assessment, the creation of an Individual Education Plan ('IEP'), the provision of education supports set out in the IEP, a review of the IEP and an independent appeals process for the assessment of the IEP. These provisions have never been commenced. We have called for the human rights model of disability to be fully integrated across all other relevant legislation, including the *EPSEN Act 2004*, to ensure harmonisation and UNCRPD compliance. See IHREC, [Ireland the Rights of the Child](#) (2022).

⁷⁷ In the absence of commencement of *EPSEN Act 2004*, the regime for an AON is provided by the *Disability Act 2005*. This assessment process is different and assesses need for educational services rather than assessing the education needs of a disabled child. It is diagnosis led rather than needs led, and compulsory to access services and a base level of support on disability, despite the variance in needs among disabled people with the same disability. For more see IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) pp. 46-54. For more on the shortcomings of the AON process see Article 25 – Health.

⁷⁸ The *Disability Act 2005* provides for a complaint's procedure. In the first instance families/caregivers can complain to a Complaints Officer or appeal to the Disability Appeals Officer regarding a delay in an AON or the AON itself. They may make a recommendation or determination respectively, for the HSE to complete the AON within a specified time-period. If the HSE or service-providers fails to implement the recommendation /determination by the date specified, the family/caregiver can apply to the Court for a direction to implement the recommendation/determination. Department of Children, Disability and Equality, [Office of the Disability Appeals Officer](#) (2019).

⁷⁹ A report by the Office of the Ombudsman details that "Parents have told us how they have had to fight for supports for their children for years on end and they feel, quite simply, they are no longer able to manage without proper backing from the State...Parents have also told us how they're too afraid to admit how exhausted and stressed they are because whenever they have, the HSE has referred them to Tusla and questioned their fitness to parent." Office of the Ombudsman for Children, [Nowhere to Turn – Children with Disabilities Left with No Support](#) (2023) p. 3.

⁸⁰ Between 2018 and 2020, 212 legal actions were taken against the HSE in relation to overdue AON. During 2023, 44 of 72 new appeal applications were made to the Office of the Disability Appeals Officer, all 44 of which related to the HSE's failure to complete the AON process within specific timeframes. Houses of the Oireachtas, Dáil Éireann Debate, [Assessment of Needs for Children with Special Education Requirements](#) (8 March 2022). Office of the Disability Appeals Officer, [Annual Report 2023](#) (2024).

The AON process is not fit for purpose and is characterised by multi-year waiting lists and unmet needs.⁸¹ Despite consistent calls for reform of the AON process, at the time of writing, there are over 15,300 AONs applications overdue for completion.⁸² Policy interventions are failing to meaningfully address this significant issue. We note the recent commitments made by the Government to escalate policy changes with the aim of addressing the waiting lists for AONs.⁸³ This process must have due regard to PSD obligations⁸⁴ and must not reduce or in any way weaken the existing legal right to an assessment.

⁸¹ The Assessment of Needs ('AON') process is provided for in the *Disability Act, 2005* and is the process through which the Health Service identifies the health needs and services for disabled children. The *Disability Act, 2005* provides that an assessment should be provided within 6 months of receipt of application. In 2020, the Ombudsman for Children published a detailed report on the challenges faced by children who require an AON and recommended policy and legislative responses, including revising the *Disability Act, 2005*, adopting human rights based and child-centred approaches, revising the *EPSEN Act 2004* and provision of additional resources. These recommendations have not been implemented. Ombudsman for Children, [Unmet Needs: A Report on the Challenges Faced by Children in Ireland who Require an Assessment of their Needs](#) (2020). See also IHREC, [Ireland and the Rights of the Child](#) (2022).

⁸² The gap in service provision is exemplified by "an increasing number of children with disabilities who are left in emergency departments or respite services in an effort by their parents to secure the services they need. This means that these children can often reside in hospitals for prolonged periods beyond medical need." Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) pp. 39-40. Houses of the Oireachtas, Dáil Éireann Debate, [Statement by Minister of State at the Department of Children, Disability and Equality \(Deputy Hildegarde Naughton\)](#) (20 May 2025).

⁸³ This follows a High Court decision in 2022 that ruled that assessments of need should take more than 30 hours, which resulted in the HSE changing its model of assessment. The applicants argued that the HSE's standard operating procedure (SOP) did not comply with the *Disability Act 2005* because it only consisted of 90-minute assessments which merely referred the applicants on for further assessment in local child services. The court held that the SOP frustrated the statutory intention of the *Disability Act 2005* "by reason of the patent failure to properly construe the breadth of the assessment obligation". See The Irish Times, [No Action on High Court Assessment of Needs Disability as Last Government 'Couldn't Agree'](#) (21 May 2025). [C.T.M. \(A Minor\) Suing by His Mother and Next Friend v The Assessment Officer the Health Service Executive \[2022\] IEHC 131](#).

⁸⁴ Section 42 of the *Irish Human Rights and Equality Commission Act, 2014*. Section 42 of the *Irish Human Rights and Equality Commission Act, 2014* requires public bodies, in the performance of their functions, to have regard to the need to eliminate discrimination, promote equality and protect human rights of staff and people availing of their services and to assess, address and report on progress in relation to equality and human rights in their strategic plan and annual reports in a manner that is accessible to the public: Section 42 of the [Irish Human Rights and Equality Commission Act, 2014](#).

Children face challenges accessing personal assistance and sign language interpretation services.⁸⁵ The State should ensure there are clear pathways to secure adequately resourced services.

There is a prevalence of ableist bullying and an inadequacy of anti-bullying measures for disabled children.⁸⁶

A paradigm shift is required in how the State approaches the rights of disabled children. We have previously called on the State to provide independent advocacy services for children.⁸⁷ We note recommendations from DPOs that any independent advocacy service must include the right for each child to receive a representative advocate, respect for the will and preferences of disabled children, including adequate and independent resourcing and accessibility for children with intellectual disabilities.⁸⁸

⁸⁵ Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. For the DPO consultation, the thematic areas of focus were Access to Justice, Deprivation of Liberty and Independent Living. As part of these consultations, participants noted the need for a legislative right to personal assistance (PA) to facilitate freedom and choice. Participants noted that assistance to live independent as children, including to participate fully in educational settings, is a prerequisite to living independently and participating in community life in adulthood. In this way, PA services and appropriate class-room support can play a preventing role with regard to institutionalisation. Similarly, it was noted that provision of sign language interpretation in educational settings is required for full participation and to enable children to develop socially, intellectually and emotionally.

⁸⁶ Disabled children are up to three times more likely to be bullied and up to six times more likely to experience violence or abuse compared to their peers. It is also noted that the Department of Education Action Plan on Bullying and its implementation plan contains no actions directly supporting children with disabilities. Inclusion Ireland, [Opening Statement to the Oireachtas Joint Committee on Education, Further and Higher Education, Research, Innovation & Science](#) (2021) p. 2. Department of Education, [Cineáltas: Action Plan on Bullying 2023 - 2027](#) (2022). IHREC, [Ireland the Rights of the Child](#) (2022) pp. 48-49. The Department of Education undertook research and published the first in a series of five annual reports that identifies bullying behaviour as being linked to 'ability'. The reports for 2022 and 2023 have been published. The report sets out various areas for improvement including identification of children and young people who may need targeted support, provision of relevant activities during recreational periods, genuine involvement of children and young people in addressing the behaviour, changes to the physical environment, leadership. Department of Education, [Perspectives on Bullying Behaviour](#) (2023) pp. 21-23; 35-37.

⁸⁷ IHREC has called on the State to consider introducing a statutory right to independent advocacy. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024).

⁸⁸ Centre for Disability Law and Policy, University of Galway, [Exploring the need for a Representative Advocacy Service for Children with Intellectual Disabilities in Ireland](#) (2024).

The Committee should ask the State about measures to:

Ensure targeted provision for disabled children in national strategies and policies affecting them prepared with due regard to the Public Sector Equality and Human Rights Duty.

Address chronic deficiencies in the AON process to ensure a move away from the litigious approach and to ensure the timely provision of critical services and supports to disabled children.

Address the critical shortcomings in children's mental health services so they are safe, effective and accessible.

Provide rights-based and child-centred independent advocacy services for disabled children.

Article 9: Accessibility

We are concerned about inadequate implementation of the Irish Sign Language Act 2017 ('ISL Act'),⁸⁹ inadequate provision of information in accessible formats by public bodies, including easy-to-read formats, and Braille,⁹⁰ and inconsistencies in the supports available through access officers of public bodies.⁹¹ We note concerns regarding the increasing digitisation of

⁸⁹ Irish Statute Book, [Irish Sign Language Act 2017](#). The *ISL Act* was introduced to address what was described by the Joint Committee on Justice and Equality as the "extreme marginalisation" of Irish Sign Language (ISL) users. Houses of the Oireachtas, Joint Committee on Justice and Equality, [Report on the Formal Recognition of Irish Sign Language](#) (2016). There has not been a comprehensive economic assessment of the investment of financial, technical and human resources required to fully implement the *ISL Act* and recognise ISL as a national language. The NDA undertook a review of the operation of the *ISL Act* and in 2021 and completed a report on its operation which was published in January 2023. It made several recommendations and found significant need for improvement in awareness and understanding of the scope and definitions of the *ISL Act*; the need to improve adequate access to services; and the need to increase the number of working ISL interpreters as a matter of priority. In our engagements with CSOs, we have heard repeated concerns regarding funding for and availability of ISL interpreters. See Article 21 - Freedom of expression and opinion, and access to information. National Disability Authority and the Department of Children, Equality, Disability, Integration and Youth, [Report on the Operation of the Irish Sign Language Act 2017](#) (2021).

⁹⁰ In our engagements with CSOs, we heard concerns regarding gaps in the provision of information in accessible formats and the need to ensure that accessible documents are updated in conjunction with any other forms of information. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs.

⁹¹ Public bodies are obligated under the [Disability Act 2005](#) to have Access Officers to assist with access to buildings and to respond to requests and queries regarding accommodations and accessibility services. Access Officers are responsible for providing and coordinating assistance and guidance to persons with disabilities accessing services provided by public bodies. They can also act as a point of contact for disabled people wishing to access such services. See Government of Ireland, [Access Officers – Disability Act](#) (2020). National Disability Authority, [Disability Act – Part 3 Code of Practice on Accessibility of Public Services and Information provided by Public Bodies](#) (2023) p. 6. Recent research has found that many access officers are part time and the role is often an "add-on" to a pre-existing role. Progress is inconsistent across Local Authorities, with some Access Officers experiencing better support. Disability Federation of Ireland, [Bridging the Gap](#) (2025) p. 10. The NDA recently published updated guidance for public bodies on Access Officers. National Disability Authority, [Access Officer Guidance for Public Bodies](#) (2025).

services that frequently creates barriers for disabled people.⁹² We reiterate that services, websites and applications must be retrofitted to comply with accessibility standards.⁹³

There is limited disaggregated data, consultation processes often exclude those most affected, and design decisions are made without consultation with those facing intersectional disadvantages.⁹⁴ We note concerns regarding the accessibility of changing public spaces and streetscapes,⁹⁵ and note limitations in the provision of public transport.⁹⁶

⁹² In our engagements with CSOs, we heard reports that public bodies are stating that cost factors are preventing them from making their digital services fully accessible. We heard that accommodations are often limited or absent for disabled people with for example, a visual impairment, dyslexia, dyspraxia and the Autistic community. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. Pursuant to section 40 of the [Irish Human Rights and Equality Commission Act 2014](#) IHREC has the power to provide legal assistance to individuals in relation to equality and human rights matters. Recent legal casework in relation to accessibility of financial services is reported in IHREC, [Annual Report 2023](#) p.19.

⁹³ With the implementation of the [EU Web Accessibility Directive — Standards and Harmonisation](#), Directive (EU) 2016/2102, public sector bodies in Ireland must ensure their websites and mobile applications are universally accessible. The NDA have been mandated to monitor the Web Accessibility Directive and have found that the overall error count per site is decreasing, and the accessibility of webpages is slowly increasing. In our engagements with CSOs, we heard concerns regarding the slow uptake of the Directive. Participants noted concern that public bodies are excusing non-compliance with accessibility guidelines due to limited funding and that disabled people frequently face difficulties accessing information on and services provided through websites. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. National Disability Authority, [Summary of Ireland's Monitoring 2022-2024 EU Web Accessibility Directive](#) (2024) p. 12. See also, National Disability Authority, [EU Web Accessibility Directive](#) (2025).

⁹⁴ This issue has been raised with us during consultation with civil society. IHREC staff that support implementation of the PSEHRD report that this is a challenge they consistently observe. See, for example, the assessment of one Local Authority. Dublin City Council, [Public Sector Equality and Human Rights Duty: Assessment of Equality and Human Rights Issue](#) (2025) p. 8. We welcome accessibility and universal design engagements and training opportunities provided by the State. We call for an increase in the availability and breadth of this training. We note that the Centre for Excellence in Universal Design has a statutory obligation to raise awareness and provide an understanding of Universal Design. The guidance created by the centre can be used by all stakeholders in public and private bodies. National Disability Authority, Centre for Excellence in Universal Design, [What We Do](#) (2025).

⁹⁵ In our engagements with CSOs, concern was raised regarding the safety of disabled people when it comes to changing streetscapes. It was noted that public spaces are increasingly being changed without consultation with disabled people. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. A universal design and human rights approach to building and construction work is needed. Voice of Vision Impairment, a DPRO, has raised concerns regarding the increasing inaccessibility of public spaces and has published a Manual for Accessible Public Spaces. Voice of Vision Impairment, [VVI's Manual for Accessible Public Spaces \(VVIMAPS\)](#) (2025).

⁹⁶ Transport for Ireland, who oversees the provision of public transport across Ireland, has a service called Independent Travel Support. This service has severe limitations: it is only available in five counties in Ireland; it is

We welcome supports for students⁹⁷ and people of working age⁹⁸ to access assistive technology but note that absence of schemes or supports for people over the age of 65.⁹⁹ We note what CSOs have called ‘green shoots’ in assistive technology,¹⁰⁰ and note calls for measures to provide improved and coordinated services to provide affordable and tailored supports.¹⁰¹

The Committee should ask the State about measures to:

Ensure the principles of universal design, community living and participation are embedded across functions of all public bodies with due regard to obligations under the Public Sector Equality and Human Rights Duty, and that public bodies comply with CRPD accessibility requirements in the delivery and procurement of public services and infrastructure.

only for disabled people over the age of 18 years; and it is not widespread enough to sufficiently address the transport barriers experienced by disabled people of all ages. The Irish Wheelchair Association has found that disabled people are not being adequately consulted in planning processes and that Ireland needs national legislation that mandates mandatory minimum accessibility standards. We have previously noted discrimination in access to transport for disabled people. IHREC, [Commission Legally Assists Woman in Disability Rights Claim](#) (2023). Irish Wheelchair Association, [Getting Nowhere, Reviewing the Government's Approach to Accessible Public Transport](#) (2024) p. 38. Transport for Ireland, [Independent Travel Support](#).

⁹⁷ The Assistive Technology Grant provides funding to schools towards the cost of computers and specialist equipment for educational purposes. However, this grant has concerning limitations, where it only provides for students with “complex needs” and does not provide financial support for students who have “mild learning disabilities”. Department of Education and Youth, [Assistive Technology Grant](#) (2019).

⁹⁸ The Work and Access Programme is designed to support disabled people of working age to access employment by providing financial supports for workplace needs assessments, communication supports, in-work supports, personal readers, work equipment, workplace adaption and disability equality and inclusion training. Department of Social Protection, [Work and Access](#) (2024).

⁹⁹ In our engagement with CSOs, concerns were raised regarding the lack of funding supports for accessing assistive technology over the age of 65. Concerns were also raised about the processes of securing supports. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs.

¹⁰⁰ For example: the commencement of an assistive technology assessment process by the World Health Organisation in partnership with the Irish Government; the HSE Create Grant for digital and assistive technology users; a memorandum from the Chief Executive in 2023 mandating rapid decisions on aids and appliances grants; as well as the establishment of working groups and invest in research. For more, see FreedomTech (Enable Ireland the Disability Federation of Ireland), [Briefing Paper: Digital Assistive Technology: An Essential Tool to Support People with Disabilities and Older People to Live Independently](#) (2024) pp. 6-7.

¹⁰¹ CSOs have called for national leadership, alignment with international best practice, reflection of commitments in the forthcoming National Disability Strategy and adequate resourcing. FreedomTech (Enable Ireland and the Disability Federation of Ireland), [Briefing Paper: Digital Assistive Technology: An Essential Tool to Support People with Disabilities and Older People to Live Independently](#) (2024) pp. 6-7.

Promote the principles of universal design, community living and participation in the development of new facilities, products, technologies and services by private sector organisations.

Ensure that all public bodies comply with the EU Web Accessibility Directive, including addressing any resource barriers, training requirements and consulting with disabled people regarding the design and updating of digital services.

Address the critical shortfall in provision of Irish Sign Language interpretation services and promote awareness and accessibility of services.

Article 11: Situations of Risk and Humanitarian Emergencies

Climate change and its impacts, including extreme weather events, have disproportionately impacted disabled people and the infrastructure they depend on.¹⁰² Information provision regarding emergency planning has been inaccessible.¹⁰³ Under-representation of disabled people in emergency and climate action planning has resulted in inadequate safeguarding of their rights.¹⁰⁴

We called for an independent inquiry into the State's Covid-19 response that thoroughly examined its human rights and equality impacts.¹⁰⁵ We note that the State has committed to supporting an independent evaluation which lacks human rights or equality framing and does not clearly engage with disabled people.¹⁰⁶ We urge that 'lessons learned' include systematic

¹⁰² In January 2025 Ireland was hit by Storm Éowyn which caused serious damage to the country's infrastructure including power outages which impacted over 768,000 homes and businesses, many of whom did not see their power return for days and weeks afterwards. Disabled people experienced: lengthy intermittent power cuts which affected essential devices like power chairs and breathing devices, reduced access to basic items such as food and cooking facilities and isolation virtually, telephonically and physically from others. Many were unable to access personal assistance or care during this time. See Irish Examiner, ['People with disabilities have been hit by 'double whammy' of snow and storms'](#) (31 January 2025). The Irish Times, ['I feel forgotten about': Galway wheelchair-user nearly two weeks without power after storm'](#) (4 February 2025). Our DAC has raised further concerns about the impact of weather-related staffing shortages on disabled people living in residential and congregated settings. IHREC, [Disability Advisory Committee](#).

¹⁰³ Our DAC has raised concern regarding the inconsistent provision of ISL interpretation across news briefings, which risks not communicating vital information to Deaf people. IHREC, [Disability Advisory Committee](#).

¹⁰⁴ The Joint Oireachtas Committee on Disability Matters has stated that the "Systematic invisibility of disabled people in climate planning reflects the lack of structured engagement with persons with disabilities and DPOs on this issue." We note that the Just Transition Commission established in April 2024 to support the Government in its just transition to a climate neutral economy makes no reference to disabled people in its terms of reference and has no representation in its Membership from DPOs or from a person with lived experience with disability. Department of the Environment, Climate and Communications, [Just Transition Commission – Terms of Reference; Just Transition Commission Members and Chair](#) (2024). Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 49. IHREC, [Letter to the Chair of the National Emergency Coordination Group Regarding Concerns on the Impact that Recent Climate Related Emergencies have had on Disabled People](#) (2025).

¹⁰⁵ IHREC, [Correspondence to the Department of the Taoiseach re: Evaluation of the State's response to the Covid-19 pandemic](#) (28 March 2024).

¹⁰⁶ A public consultation to inform the evaluation was launched in May 2025. Members of structurally vulnerable groups have not yet been invited to meaningfully participate in the process. The programme of work references "managing and mitigating risks of the disease and competing sectoral policy objectives (including the impact of a range of sectoral, business/economic and personal income supports)" but does not reference the human

inclusion of disabled people in decision-making bodies; and that both current and future policy responses to crises (at times of risk and instability) are rights based.¹⁰⁷

The Committee should ask the State about:

The full and effective participation of disabled people in emergency response planning and management.

How climate action measures are designed, developed and implemented with reference to their impact on disabled people.

Measures to ensure that the Covid-19 evaluation provides for meaningful participation of disabled people and adopts a human rights and equality-based framework.

rights protections. Department of the Taoiseach, [Government appoints chair and agrees terms of reference for evaluation of the response to the COVID-19 pandemic](#) (30 October 2024). Covid-19 Evaluation, [Planned Programme of Work](#). Covid-19 Evaluation, [Ireland's Independent COVID-19 Evaluation opens Public Consultation](#). The [Terms of Reference](#) for the Evaluation of the Response to the Covid-19 Pandemic make no reference to human rights.

¹⁰⁷ While the Programme for Government commits to supporting the work of the Covid-19 Evaluation, it is silent on ensuring public services are adequately prepared for current and future crises including climate-related crises. Government of Ireland, [Programme for Government 2025: Securing Ireland's Future](#) (2025) p. 89.

Article 12: Equal Recognition Before the Law

Reliance on a medical model in the State's response to people with psychosocial disabilities has hindered realisation of their rights.¹⁰⁸ Despite new legislation,¹⁰⁹ delays persist with reform of the Mental Health Act 2001. Those involuntary detained under the Mental Health Act 2001 remain the only cohort of people deprived of their rights regarding advanced healthcare directives.¹¹⁰

We are concerned about denial of justice and legal capacity for disabled people in residential disability (including mental health) services, nursing homes, and hospitals, which impacts their ability to advocate for themselves and access justice.¹¹¹ The recognition of legal capacity is a fundamental "gatekeeper" right essential for ensuring access to justice. We are concerned about the challenges that some disabled people encounter when seeking legal advice and representation, including perceptions about their legal capacity, and deficits in communication skills and disability awareness of solicitors.¹¹²

¹⁰⁸ IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 43.

¹⁰⁹ Including the [Assisted Decision Making \(Capacity\) Act 2015](#) as amended by the [Assisted Decision Making \(Capacity\) \(Amendment\) Act 2022](#).

¹¹⁰ See Article 14 - Liberty and Security of the Person. This was extended under new assisted decision-making legislation. We note that the recently published *Mental Health Bill 2024* purports to remedy this denial of rights and we reiterate our calls for urgent reform of the *Mental Health Act, 2001*. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022). IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 42.

¹¹¹ See Article 14 - Liberty and Security of the Person; Article 16 - Freedom from Exploitation, Violence and Abuse. A range of factors, including rights being misunderstood or misinterpreted, inadequately prepared legal professionals and restrictive practices contribute to inaccessibility and even the denial of justice for some rights holders. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 24-25. The Commission has consistently highlighted delays in the commencement and reform of enacted legislation concerning legal capacity and people with psychosocial disabilities, and delays in publication and enactment of the *Inspection of Places of Detention Bill*. See IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill \(2022\)](#) pp. 2-3. We have also highlighted that the delay in ratifying the Optional Protocol to the Convention Against Torture impacts on the effective, independent oversight of places of detention and for certain types of *de facto* detention in voluntary settings, such as mental health establishments (MHEs), and healthcare and residential settings. IHREC, [Submission to the UN Committee against Torture on the List of Issues for the Third Examination of Ireland](#) (2020) pp. 9; 15-16. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 11.

¹¹² IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 25.

Following years of delay, the State fully commenced the ADMC Act in April 2023.¹¹³ This provides for the discharge of over 2,800 people from Wardship within three years of its entry into force.¹¹⁴ The majority of people were admitted to Wardship on the grounds of ‘psychiatric illness and/or learning disability.’¹¹⁵ Data on the progress towards phasing out of Wardship, and barriers faced by existing Wards of Court, including awareness of available legal supports, information on the process for Wards of Court and their families, and provisions on the recovery of costs, is inadequate.¹¹⁶ We note reports that no request for discharge of Wardship has been made for more than 1,400 Wards of Court.¹¹⁷

¹¹³ The *ADMC Act* abolishes the previous Ward of Court system under the *Lunacy Regulation (Ireland) Act 1871* and replaces it with a new process for appointing tiered decision support arrangements. Article 12 of the UNCRPD mandates universal respect for legal capacity including through the provision of decision-making support and other safeguards as appropriate. United Nations, [Report of the Special Rapporteur on the Rights of Persons with Disabilities, Catalina Devandas Aguilar: Thematic Study on Disability-specific Forms of Deprivation of Liberty](#) (2019) UN Doc A/HRC/40/54 para. 39. Maeve O’ Rourke, [Human Rights and the Care of Older People: Dignity, Vulnerability, and the Anti-Torture Norm](#) (2024) p. 201.

¹¹⁴ Applications for Wardship continued until April 2023, with the rate of applications increasing to over 500 in 2022. Furthermore, the *Assisted Decision Making (Capacity) Act 2015* provides that an application for Wardship that was been initiated prior to commencement will not lapse and may continue to conclusion. Oireachtas, [Opening Statement: Wards of Court](#) (2017). Courts Service, [Annual Report 2022](#) (2023) p. 25. Department of Children, Equality, Disability, Integration and Youth, [Minister O’Gorman and Minister Rabbitte Announce the Abolition of Wardship and the Operationalisation of the Assisted Decision-Making Acts and Decision Support Service](#) (2023).

¹¹⁵ Courts Service, [Annual Report 2022](#) (2023) p. 25.

¹¹⁶ For more information, see Law Society of Ireland, [Submission to the Civil Legal Aid Review Group](#) (2023) p. 18. We note the ongoing Wards of Court Research, which seeks to evaluate the impact of the cessation of the Wardship system in Ireland on people who were made Wards of Court, their Committees, and the system. As of November 2023, the Courts Service had received 67 applications for discharge from Wardship, and 17 people were due to be discharged by the end of the year. In 2023, the Office of Wards of Court Office received an additional 82 applications for discharge. In 2023, 239 adults and minors were declared Wards of Court, a 42% decrease on the total in 2022. By the end of 2023, there were 2,143 active Adult Wards of Court and 177 Minor Wards of Court for which the Office of Wards of Court was responsible. Courts Service, [Annual Report 2022](#) (2023). Courts Service, [Annual Report 2023](#) (2024) pp. 4; 20. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 43-44. National Disability Authority, [Wards of Court Research](#).

¹¹⁷ We note concerns expressed to us by civil society regarding the adequacy of communication regarding the transition from Wardship with families of those affected, including with the ‘Committees’ of existing Wards of Court. There is limited data to assess current progress on phasing out ward-ship or any barriers faced by applicants, including awareness of available legal supports and provisions on the recovery of costs. As part of our observations on the *Mental Health (Amendment) Bill 2021* (now the *Mental Health Bill 2024*), we highlighted the need for additional safeguards to ensure the involuntary admissions procedure is compliant with human rights standards. Such safeguards include legislative clarity on a rights-based threshold for admission; the provision for the delivery of community-based mental health services as an alternative to involuntary detention; and further restricting the powers of the police to involuntary detain a person. For further commentary, see

There is limited or highly restricted access to independent advocacy for people in Wardship or subject to the inherent jurisdiction of the High Court. We are particularly concerned about the significant structural vulnerability of disabled people who have survived historical systemic and/or individual instances of abuse in institutional settings¹¹⁸ and about the continued absence of the voice of victims of abuse in institutional settings.¹¹⁹

While the ADMC Act creates a system of supported decision-making it also makes provision for a substitute decision-making regime.¹²⁰ The wider context is the State's Declaration and Reservation to Article 12.¹²¹ The operationalisation of the ADMC Act is complex and

IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill 2021](#) (2022). We have expressed concern regarding the definition of 'voluntary' patient, which does not address whether the individual has consented to admission or whether they have the capacity to consent, heightening the risk for deprivation of liberty in the absence of appropriate safeguards such as an independent review of the detention. There are also significant human rights and equality concerns about the absence of robust procedural safeguards governing the reclassification of patients from voluntary to involuntary status, and the potentially coercive nature of the measures employed. For example, people have been persuaded to remain as a voluntary patient in an approved centre due to fear that statutory powers will be utilised to formally detain them or similar: Dr C. O'Mahony and Dr F. Morrissey, [A Human Rights Analysis of the Draft Heads of a Bill to Amend the Mental Health Act 2001](#) (2021) p. 41. Law Society of Ireland, [Submission to the Civil Legal Aid Review Group](#) (2023) p. 18. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 42-43. Law Society Gazette, [1,469 Wards of Court Remain, Despite Deadline](#) (10 March 2025). National Disability Authority, [Wards of Court Research](#).

¹¹⁸ We are aware that some people in Wardship are survivors of abuse in other institutional settings, including the 'Magdalene Laundries'.

¹¹⁹ IHREC was granted liberty to appear in the matter of AC and Others v Cork University Hospital and Others as *amicus curiae* in accordance with section 10(2)(e) of the [Irish Human Rights and Equality Commission Act 2014](#). In our submission, the principles of dignity, autonomy, equality and participation were emphasised, as was the importance of the right to be heard and a related right to communicate one's views. [AC and Others v Cork University Hospital and Others - Written Submission of IHREC](#) (January 2019), paragraphs 17 and 53. For further discussion on the safeguarding of people in institutional settings and their rights in accessing justice see Article 16 - Freedom from Exploitation, Violence and Abuse. IHREC, [Commission Welcomes Supreme Court Ruling Clarifying Individual's Rights and Protections in Ward of Court Case](#) (2019). The Irish Times, [Submissions of Grace's Legal Team not Referred to 'in any way' in Final Investigation Report, says Wardship Solicitor](#) (April 29, 2025).

¹²⁰ [Assisted Decision Making \(Capacity\) Act 2015](#) Section 37 provides the Court with the power to make a declaration that a person lacks capacity even with the assistance of a co-decision maker; Section 38 provides for the appointment of a decision-making representative to act on behalf of the relevant person in a number of circumstances including where the court has found a person to lack capacity under Section 37. We note that the Committee has frequently considered an approach to legal capacity which permits substituted decision-making a misinterpretation by States. Committee on the Rights of Persons with Disabilities, [General Comment No. 1 – Article 12: Equal Recognition before the law, CRPD/C/GC/1](#) (2014) para 3.

¹²¹ Ireland: Declaration and reservation (Article 12): "Ireland recognises that persons with disabilities enjoy legal capacity on an equal basis with others in all aspects of life. Ireland declares its understanding that the

multifaceted and is in its early stages. Notwithstanding this, the new structures risk promoting substitute decision-making over co-decision making.¹²² Supported decision-making must be fully available and prioritised to ensure disabled people enjoy legal capacity on an equal basis with others in all aspects of life.¹²³

We note CSOs' concerns that the implementation of the ADMC Act has been fraught with difficulties due to insufficient public awareness-raising, inadequate training for members of the legal profession,¹²⁴ and an administratively burdensome process. The Law Society of Ireland has raised serious concerns about an overly complex and restrictive digital system and poor design of the online system which has low take up.¹²⁵ Meaningful accessible consultation with disabled people and DPOs was absent in advance of this legislation being commenced despite its potentially profound impact.¹²⁶ We draw the Committee's attention to indications that disabled people in Ireland may be entered into decision-making

Convention permits supported and substitute decision-making arrangements which provide for decisions to be made on behalf of a person, where such arrangements are necessary, in accordance with the law and subject to appropriate and effective safeguards. To the extent that Article 12 may be interpreted as requiring the elimination of all substitute decision making arrangements Ireland reserves the right to permit such arrangements in appropriate circumstances and subject to appropriate and effective safeguards". UNCRPD Declarations and Reservations, [Ireland: Declaration and reservation \(Article 12\)](#).

¹²² CSOs have indicated that there is a panel in operation for substitute decision-makers but there is no such provision for co-decision makers, who are ordinarily family members. Decision Support Service, [Decision-making Representative Panel](#). Concerns have been raised that there is insufficient oversight and safeguards in place to guard against over reliance on substituted decision-making over co-decision making. It should also be noted that the ADMC Act provides for a functional assessment of mental capacity which may be used to restrict or deny legal capacity. [Assisted Decision Making \(Capacity\) Act 2015](#).

¹²³ Committee on the Rights of Persons with Disabilities, [General Comment No.1 – Article 12: Equal Recognition before the law, CRPD/C/GC/1](#) (2014) para 28. IHRC, [IHRC Observations on the Assisted Decision-Making \(Capacity\) Bill 2013](#) (2014) p. 32.

¹²⁴ We have heard reports of inconsistency in judicial decisions regarding decision-making arrangements, and reports of far-reaching orders in contrast to the intended narrow and focused orders. We have heard concerns regarding the absence of human rights principles in judicial decision-making (linked to a lack of training and education on the same).

¹²⁵ The Law Society have stated that "The poor design of the DSS online system is making it unusable for a significant number of people, and the challenges are aggravated by the fact that solicitors have no access to the system." Law Society of Ireland, [No Cause for Celebration in the Performance of the Decision Support Service, According to Law Society](#) (2025).

¹²⁶ The Joint Oireachtas Committee on Disability Rights has recommended that post-enactment legislative scrutiny must be undertaken on the legislation to address this oversight and to subsequently consider the replacement of the provisions on substituted decision-making. Joint Oireachtas Committee on Children, Equality, Disability, Integration and Youth, [Report on Pre-legislative Scrutiny of the General Scheme of the Assisted Decision-Making \(Capacity\)\(Amendment\) Bill 2021](#) (2022) pp. 26-28; 53-55.

arrangements at the behest of family or interested parties, without a full interrogation of their will and preferences.¹²⁷

The Committee should ask the State:

Whether the State intends to amend or withdraw its Declaration and Reservation to Article 12 and subsequently address aspects of assisted decision-making legislation which provide for substitute decision-making.

To provide an update on the status of the discharge and transition of the Wards of Courts including disaggregated data broken down by status, impairments, equality grounds, geographical location, accommodation type and provision of supports pre, during and post discharge/transition and arrangements for monitoring and review.

To provide update on resourcing, access to and provision of legal supports, advice and representation to Wards of Court, and on awareness raising regarding the new legislative provisions.

Measures to remedy any inaccessibility of the Assisted Decision Making Capacity processes and to ensure adequate safeguards for people in an Decision Making Assistance Agreement.

¹²⁷ Anecdotal evidence was shared with us at structured engagements with CSOs, including DPOs, and through bilateral engagements. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs.

Article 13: Access to Justice

We are concerned about the continued failure to provide adequate and effective access to justice to disabled people in Ireland¹²⁸ despite the legislation and policy introduced to improve such access.¹²⁹ Disabled people who encounter the justice system are met with multifaceted challenges and barriers, despite often having some of the greatest legal needs.

There is a misalignment between Irish law and international human rights standards,¹³⁰ and a complex interplay between different legal frameworks within the Irish justice system such that relevant stakeholders are sometimes not aware of their role and limitations of their powers when supporting or engaging with disabled people.¹³¹

Noting that access to justice is a fundamental right, the realisation of which must be immediate and full and not through progressive realisation, we have called for an urgent policy response in which the State together with judicial and legal bodies¹³² bring its legal and policy frameworks into alignment with UNCRPD and international best practices.¹³³ We have

¹²⁸ In December 2024, IHREC published a comprehensive baseline report regarding access to justice for disabled people in Ireland. Charles O' Mahony, [Access to Justice: A Baseline Study of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024).

¹²⁹ The *Assisted Decision Making (Capacity) Act 2015* and the *Assisted Decision-Making (Capacity) (Amendment) Act 2022*.

¹³⁰ Particularly the UNCRPD.

¹³¹ IHREC's baseline study on Article 13 found that inadequate training and knowledge of key stakeholders in the justice system was one of the most significant findings to emerge. "This concern was unanimously echoed by all participants, who provided numerous instances where access to justice was impeded by key stakeholders lacking a proper understanding of disability and obligations such as reasonable accommodation." One research respondent noted that inadequate training means that disabled people engage with an unprepared justice system. "'Certainly, the lawyers, and I, I'm more acutely aware, say, of the Law Society, have not provided adequate training at all... there isn't comprehensive and in-depth training ongoing. ... Frankly, I'm quite amazed at how reminiscent it is of the era of Wardship. People are entering legal proceedings without the court being sufficiently prepared.'" Charles O' Mahony, [Access to Justice: A Baseline Study of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 115; 100. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 13.

¹³² In cooperation with the public bodies that are part of the States' human rights and equality architecture including IHREC, the Office of the Ombudsman and the Ombudsman for Children.

¹³³ The involvement of disabled people and their representative organisations is central to this process. To ensure continuous improvements in this area, prioritising comprehensive data collection and research efforts is essential. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 15-16; 24-25. Legislative reform must consider the disconnect between civil and

documented the need for reforms of the civil legal aid system,¹³⁴ adequate legal aid,¹³⁵ procedural accommodations¹³⁶ and a fully independent and resourced advocacy service,

criminal mental health law, reforms and better protection under mental health legislation, including the establishment of an independent complaints' mechanism and greater advocate involvement in tribunal hearings, review of the application of the *Assisted Decision Making Capacity Act*, and reform of the *Mental Health Act 2001*, the *Criminal Law (Insanity) Act 2006* and the *Disability Act 2005*.

¹³⁴ In June 2022, the Government initiated a review of the Civil Legal Aid Scheme. See IHREC, [Submission on the Review of the Equality Acts](#) (2023) p. 39. Discrimination complaints under the *Equal Status Acts* and the *Employment Equality Acts* are generally not covered by civil legal aid, leaving disabled people without essential support in navigating complex legal processes. Advocating for oneself in the absence of legal aid and representation presents barriers for some disabled people including those with intellectual or learning impairments and impairments that have an impact on communication. There is disparity between civil and criminal legal proceedings, whereby a person involved in criminal proceedings might be able access the civil legal aid scheme, but a person taking a discrimination case at the WRC would not. Additional factors include delays in legal proceedings, a shortage of solicitors, and disparities between the criminal and civil justice systems, exacerbated in many cases by financial constraints. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 17-18. The review of civil legal aid continues to be delayed and has yet to be published with no clear timeline for its publication and any related legal and policy response.

¹³⁵ We are concerned about procedural challenges including limitation in access to interpreters, assistive technology, intermediaries, and facilitators. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 32. The Commission has previously recommended that "comprehensive, accessible and reliable information is available to all sections of the public on legal rights, as well as on access to civil legal aid and advice, with targeted measures to ensure that information on the Scheme reaches structurally vulnerable groups, and that such information be available in a range of formats and languages including ISL and should be accessible on and offline." We have also recommended that "resources and training on literacy and Plain English standards be rolled out to staff employed by the Legal Aid Board" and that "the main client-facing documents be revised to meet Plain English standards to improve client access" as well as in ISL. IHREC, [Submission to the Civil Legal Aid Review](#) (2023) pp. 51; 55; 56. Legal advice should be accessible and procedural accommodation should be made available to lawyers to ensure effective communication with disabled clients or witnesses. We note the concluding observations of the United Nations Committee on Economic, Social and Cultural Rights, which, recognising the impact that absence of publicly funded legal aid has on 'disadvantaged and marginalised individuals,' and recognising the vital importance of legal aid to access to appropriate redress, notably in the realms of employment, housing, forced evictions, and social welfare benefits, has criticised the inadequacies within the legal aid system, including the absence of accessible publicly funded legal aid services, and called for the provision of publicly funded legal aid services across a wide spectrum of areas, including the expansion of the scope of the Civil Legal Aid Scheme. Committee on Economic, Social and Cultural Rights, [Concluding Observations on the Third Periodic Report of Ireland](#) E/C.12/IRL/CO/3 (2015) para 8. Charles O' Mahony, [Access to Justice: A Baseline Study of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 59.

¹³⁶ Multiple barriers to accessing justice include communication barriers, failure to implement the [Irish Sign Language Act 2017](#), inaccessible information which negatively impacts people with intellectual disabilities understanding and engagement in legal proceedings, deficits in legal professionals' communication skills, and inaccessible physical buildings. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 31-35.

accessible to children, adults and people deprived of their liberty.¹³⁷ Legislative reform must provide for an independent complaints mechanism,¹³⁸ protections for people deprived of their liberty,¹³⁹ and must remove physical and informational barriers within the justice system.¹⁴⁰

These reforms must be accompanied by continued action to tackle underlying attitudes, to increase awareness, knowledge and skills of legal professionals, and to diversify the legal profession.¹⁴¹ We reiterate the importance of continuous and meaningful engagement of

¹³⁷ This should include independent advocacy to access legal advice and representation. Advocates should be independent and distinguished from health and social care professionals, disability service providers or family members that otherwise have a role to support or provide services or care to disabled people. IHREC has in the past commented on the lack of clarity regarding the role of intermediaries where disabled people are seeking to access justice. See IHREC, [Observations on the Criminal Justice \(Victims of Crime\) Bill 2016](#) (2017) p 10. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 19-20. Despite an evident need for independent advocacy services, users encounter long waiting lists and criteria for accepting cases by the [National Advocacy Service](#), which lacks the funding to meet the current demand. The National Advocacy Service has highlighted the continued growth in demand for its services, which has not been matched by an increase in funding for additional personnel since 2011. For example, in its annual report for 2022, the NAS noted “a continued growing demand for the Patient Advocacy Service with 1,859 contacts, which represents a 54% increase compared to 2021. Also in 2022, the Patient Advocacy Service extended its remit to people living in Private Nursing Homes, providing patient advocacy to patients and residents in all Public Acute Hospitals & Nursing Homes.” National Advocacy Service, [National Advocacy Service for People with Disabilities \(NAS\) and Patient Advocacy Service Annual Report Launch](#) (2023). In the absence of legal aid, independent advocates who support disabled people sometimes find themselves ill-equipped to advocate when faced with a legal professional on the opposing side. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 17-18.

¹³⁸ Particularly in relation to mental health legislation, but also in relation to provision of reasonable accommodations.

¹³⁹ Including the provision of legal services, independent advocacy, adequate legal representation, greater advocate involvement in tribunal hearings and elimination of the discriminatory use of mental health history as a credibility factor in legal proceedings. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 26-28.

¹⁴⁰ Key areas to be addressed include the need for funding for initiatives aimed at making the justice system more accessible to people with low literacy, especially those with intellectual disabilities; accessibility to and within historic court buildings, providing consistent and accessible information, including providing information in multiple formats, languages, and through videos; and access to ISL interpreters, as well as enhancing awareness about remote hearings, and providing comprehensive training for legal professionals to effectively serve the needs of the Deaf community. Specific support and accessible resources should be made available for children with intellectual disabilities. IHREC, [Submission on the General Scheme of the Family Court Bill 2020](#) (2020) p. 8. IHREC, [Submission to the Minister for Justice on the General Scheme of the Garda Síochána \(Digital Recording\) Bill](#) (2022) p. 32. IHREC, [Observation on the General Scheme of the Garda Síochána \(Powers\) Bill](#) (2022) p. 67. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 26-28.

¹⁴¹ In recent years, there have been steps to promote knowledge of disability rights within the legal sector. The Law Society of Ireland has pledged to become an Ally of the [disAbility Legal Network](#), established in 2021, in line with its Gender, Equality, Diversity and Inclusion policy. This pledge includes working towards bringing about a

disabled people, incorporating an intersectional lens¹⁴² and addressing perceptions about legal capacity.¹⁴³

The Committee should ask the State about:

Follow up actions pursuant to the review of civil legal aid including measures to ensure civil aid is available to disabled people, providing for accessible and adequate legal representation.

Measures to ensure provision of independent advocacy services and consideration of a statutory right to independent, rights-based, person-led, advocacy.

Measures to ensure that complaints handling mechanisms in the justice, health, education and social care systems are universally accessible and rights-based.

Plans to reform laws on procedural and reasonable accommodation in the justice system, and to develop policies, procedures, and comprehensive training for legal professionals, service providers, and personnel across the justice system.

Legislative reform to protect the rights of persons deprived of their liberty, including the advancement of the Protection of Liberty Safeguards Bill, Mental Health Bill 2024 and the

greater understanding and awareness of disability in the legal sector such as access to courses. [disAbility Legal Network](#), Law Society of Ireland. These steps are a basis for further action. At the inaugural event of the disAbility Legal Network, research findings were shared that indicated that 62% of people working with a disability in the legal sector had not shared their disability status at work. William Fry, [Almost 2/3 of People with Disability Working within the Legal Sector Have not Shared their Disability Status at Work](#), (30 March 2022).

¹⁴² IHREC-commissioned research has documented low levels of awareness and understanding of Article 13 of the UNCRPD, limited information regarding what training is provided, and a lack of diversity among legal professionals. Within the prison system, there is a need for awareness-raising, improved accessibility, and enhanced support for disabled people in prison. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 33: 42-43.

¹⁴³ Denial of justice in Ireland disproportionately affects people with intellectual disabilities, including the non-prosecution of offences, particularly violence and sexual violence, due to perceived vulnerabilities and credibility issues. Patronising attitudes during legal proceedings and restrictions imposed by some disability service providers were also highlighted as significant concerns. We are concerned about the possible chilling effect that non-prosecution and long delays in prosecution can have on the reporting of crimes and seeking of justice of disabled people. We are particularly concerned about the denial of legal capacity of people in residential disability (including mental health) services, nursing homes, or hospitals, which in turn impacts their ability to access justice and advocate for their rights. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 24-25; 29.

Inspection of Places of Detention Bill, and implementation of related standards and guidelines, developed in consultation with disabled people.

Article 14: Liberty and Security of the Person

The State has not ratified the Optional Protocol to the Convention Against Torture ('OPCAT'), which would provide a human-rights based preventive mechanism for places of detention.¹⁴⁴ Draft legislation requires significant amendments to satisfy OPCAT requirements, potentially adding further delays.¹⁴⁵ We are concerned by the limited definition of places of detention¹⁴⁶ in the draft legislation, which omits mental health establishments ('MHEs'), healthcare and residential settings.¹⁴⁷

¹⁴⁴ Ireland is the only Member State of the European Union not to have ratified the Optional Protocol to the Convention Against Torture. Despite repeated assurances and successive legislative programmes, OPCAT remains unratified. The draft [General Scheme of the Inspection of Places of Detention Bill](#) was published in June 2022. The Joint Oireachtas Committee on Justice published a [Report of the Joint Oireachtas Committee](#) on the General Scheme in March 2023 which recommended the immediate ratification of OPCAT prior to the legislation being enacted in full, and also raised concerns about the functional and financial independence of NPMs under the Bill and compliance with OPCAT.

¹⁴⁵ IHREC, [Submission on the General Scheme of the Inspection of Places of Detention Bill](#) (2022). In particular, we are concerned about the resourcing and independence of NPMs, the interactions between NPMs, civil society, and Prison Visiting Committees, and issues with the definition of 'places of detention'. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 6. IHREC, [Submission on the General Scheme of the Inspection of Places of Detention Bill](#) (2022) pp. 30-31; 33-35; 37-44. As the proposed co-ordinating NPM, we note the key pillar of the UN Paris Principles that NHRIs designated with additional responsibilities under human rights instruments must be provided with increased financial resources to discharge the new functions. GANHRI, [General Observations of the Sub-Committee on Accreditation](#) (2018) pp. 27-28.

¹⁴⁶ Such 'deprivation of liberty' is to be understood within the meaning of Article 5 of the European Convention on Human Rights ('ECHR') and its application to standard custodial settings and non-traditional detention. We note that the scope of protection under Article 5 has been expanded through case law and evolving interpretations to include, for example, placements in social care institutions, administrative detention, children detained by a public authority, and facilities for asylum seekers. Council of Europe, [European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment: Text of the Convention and Explanatory Report](#) (2002).

¹⁴⁷ IHREC, [Submission on the General Scheme of the Inspection of Places of Detention Bill](#) (2022) pp. 33-35. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 6. We are concerned about gaps in oversight in MHEs, including regulation of 24-hour supervised high support accommodation. The absence of statutory regulation for 125 supervised, 24-hour residential units is of particular concern. Mental Health Commission, [Annual Report 2018](#) (2019) p. 125. Mental Health Commission, [Annual Report 2022](#) (2023) p. 82. In-patient adult services and CAMHS are registered, regulated and inspected by the Mental Health Commission and the Inspector of Mental Health Services (approximately 1% of services). However, all other mental health services, including community services, fall outside the regulatory remit of the *Mental Health Act 2001*. The Inspector of Mental Health Services has the statutory power to visit, inspect and report on any premises where a mental health service is being provided. However, neither the Inspector nor the Commission have the powers to set standards and ensure services comply with these standards by way of monitoring and enforcement. The proposed *Mental Health Bill 2024* will

Effective and independent oversight of detention in MHEs, healthcare and residential settings, and immigration detention¹⁴⁸ is insufficient.

Legislative reform to improve protections for people deprived of their liberty are long overdue. As noted, despite developments,¹⁴⁹ reform of the Mental Health Act 2001 has been significantly delayed¹⁵⁰ and Ireland continues to separate disability from mental health in matters of policy and legislation.¹⁵¹

Protection of liberty legislation is absent and despite the development of proposals in 2016, there is no timeframe for the publication of a Bill.¹⁵² Ireland must urgently progress measures

extend existing regulation and inspection systems to community services, including residential units. The General Scheme to amend the *Mental Health Act 2001* sets out the intention of the State to expand the regulation of mental health services beyond inpatient services to the community: Mental Health Commission, [Opening Statement from the Mental Health Commission to the Joint Committee on Disability Matters](#) (2023) p. 3. Department of Health, [Minister for Mental Health and Older People Outlines Progress to Date in Mental Health legislative Reform](#) (2024). Such reform must ensure sustained levels of protection for people transitioning from in-patient into community services, in line with Ireland's commitment to de-congregation and independent living under Article 19 UNCRPD.

¹⁴⁸ [General Scheme of the International Protection Bill 2025](#) (April 2025). See Article 18 - Liberty of movement and Nationality.

¹⁴⁹ Including the [Assisted Decision Making \(Capacity\) Act 2015](#).

¹⁵⁰ See Article 12- Equal Recognition before the law, footnote 132.

¹⁵¹ For example, policies and services related to people with psychosocial disabilities remain under the Department of Health while disability services have moved to the Department of Children, Equality, Disability, Integration and Youth: Department of Children, Disability and Equality, [Transfer of the specialist Disability services function to Department of Children, Equality, Disability, Integration and Youth](#) (2023). IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 42. As noted under Article 12, those involuntary detained under the *Mental Health Act 2001* remain the only cohort of people deprived of the rights extended under assisted decision-making legislation in relation to Advance Healthcare Directives.

¹⁵² In 2020, following its visit in 2019, the CPT recommended that the State bring into force legislative on deprivation of liberty safeguards without delay: [Report to the Government of Ireland on the visit to Ireland carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment \(CPT\) from 23 September to 4 October 2019](#) (2020) pp. 7, 63; IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 41. In April 2024, the Law Reform Commission ('LRC') published the *Adult Safeguarding Bill 2024* which aims to introduce a statutory safeguarding framework for at-risk adults in Ireland. As highlighted by the LRC, there is a limited amount of legislation in Ireland that is relevant to adult safeguarding, with significant gaps remaining across a range of services and settings, including hospitals, MHEs, residential centres for older people, residential centres for adults with disabilities, residential centres for international protection, etc. See Law Reform Commission, [Report: a Regulatory Framework for Adult Safeguarding: Executive Summary](#) (2024) para. 84. In April 2025, the Department of Health informed IHREC that draft policy proposals to inform the drafting of Protection of Liberty Safeguards legislation were under consideration and invited IHREC to input. See Department of Health, *The Deprivation of Liberty Safeguard Proposals: Report on the Public Consultation* (2019).

to protect against the use of detention and ensure there are robust and adequate safeguards in place developed in consultation with persons with psychosocial disabilities and are accessible and effective.

Procedural safeguards governing involuntary admission are currently inadequate and not human rights compliant.¹⁵³ We are concerned about the procedure by which involuntary admission arises.¹⁵⁴ We note that the proposed Mental Health Bill aims to reform the involuntary admission procedure, including by enhancing the role of the Authorised Officer. This service must be adequately and appropriately resourced.¹⁵⁵ To minimise interference with rights under UNCRPD, any involuntary admissions¹⁵⁶ must apply a rights-based threshold

¹⁵³ See Article 24 – Health; IHREC [Submission on the General Scheme of the Mental Health Amendment Bill](#) (2022) pp. 19-20. Detention of persons on the grounds of their actual or perceived impairment is discriminatory in nature and amounts to arbitrary deprivation of liberty and is therefore incompatible with Article 14 of the UNCRPD. Involuntary commitment of persons with disabilities on health-care grounds also contradicts the principle of free and informed consent to healthcare under Article 25 of the UNCRPD. Committee on the Rights of Persons with Disabilities, [Guidelines on article 14 of the Convention on the Rights of Persons with Disabilities: The right to liberty and security of persons with disabilities](#), Adopted during the Committee’s 14th session (September 2015) para. 10.

¹⁵⁴ 23% of detentions occurred on foot of applications by family members in 2022 and 22% in 2023 and 36% were on foot of an application by police in 2022 and 32% in 2023 rather than by an Authorised Officer on behalf of the Health Service Executive (‘HSE’) as provided for under the *Mental Health Act 2001*. In 2022, authorised Officers were applicants in 14% of all involuntary admissions, as outlined by the Mental Health Commission, ‘it was very disappointing to see again in 2022 that the majority of applications to involuntary detain from the community was by An Garda Síochána as opposed to a health care authorised officer. When people are unwell, they need to be met by a health care practitioner and not a law enforcement officer. The fact that this is happening so often indicates a systemic issue that needs to be addressed at the highest levels.’ In 2023, the Mental Health Commission reported that ‘the number of applications for involuntary detention by An Garda Síochána is down by 4%, while applications from HSE ‘Authorised Officers’ is up 2%, which is disappointing given the focus on the matter over the last few years.’ In 2023, Authorised Officers were applicants in just 16% of all involuntary admissions. IHREC [Submission on the General Scheme of the Mental Health Amendment Bill](#) (April 2022) p. 19-20; See Mental Health Commission, [Annual Report 2022](#) (2023) pp. 5-6; 67. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 43. Mental Health Commission, [Annual Report 2023](#) (2024) pp. 4 -5; 100.

¹⁵⁵ As noted by the Mental Health Commission, ‘the decrease in applications by the Gardaí is welcome but it is only a very small move in the right direction and a lot more work needs to be done to continue this trend’. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill 2021](#) (2022) p. 30. Mental Health Commission, [Annual Report 2023](#) (2024), p. 67. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 44. Note that the title of this Bill was originally the *Mental Health (Amendment) Bill* and was changed to the *Mental Health Bill* in 2024.

¹⁵⁶ In 2023, 2,516 people were involuntarily detained in mental health institutions, and 1,114 involuntary detention orders were renewed. Reform of mental health legislation must be accompanied by other measures to ensure less restrictive forms of treatment in the community are available, with the ultimate aim of eradicating coercive treatment of persons with psychosocial disabilities, and must be accompanied by a suite of measures –

for admission,¹⁵⁷ provision of community-based mental health services as an alternative to involuntary detention,¹⁵⁸ and a strengthened process around review of detention.¹⁵⁹ Review of the definition of ‘voluntary’ admission is required,¹⁶⁰ and we note the absence of robust procedural safeguards governing the reclassification of patients from voluntary to involuntary status, and the potentially coercive nature of the measures employed.¹⁶¹

including strategies, action plans, rules and codes of practice – aimed at ensuring less restrictive forms of treatment in the community are available and the ultimate eradication of coercion in the treatment of people with psychosocial disabilities.. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022) pp. 19-20. IHREC, [Ireland and the International Covenant on Civil and Political Rights](#) (2022) p. 65. Mental Health Commission, [Annual Report 2023](#) (2024) p. 64. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 54-55.

¹⁵⁷ Including equality before the law, presumption of full legal capacity, the right to the highest attainable standard of health, and a holistic approach to implementing CROD rights. See, for example, UN Committee on the Rights of Persons with Disabilities, [General comment No. 1 \(2014\) Article 12: Equal recognition before the law](#) (2014) CRPD/C/GC/1.

¹⁵⁸ The transition from institutional to community-based mental health services, grounded in the human rights model of disability offers the most effective protection against deprivation of liberty, torture and inhuman or degrading treatment or punishment. The State commitments on deinstitutionalisation and congregated settings did not include people living in mental health services: Health Service Executive, [Time to Move on from Congregated Settings A Strategy for Community Inclusion](#) (2011). While the current Mental Health Policy includes a focus on community services and wider social inclusion supports, it does not contain any express commitments on deinstitutionalisation: Department of Health, [Sharing the Vision: A Mental Health Policy for Everyone](#) (2020). The UNCRPD Committee links the lack of disability-specific, community support services with increased involuntary institutionalisation: [Guidelines on Article 14 CRPD: The right to liberty and security of persons with disabilities](#) (2016) paras 5, 9.

¹⁵⁹ We have called for reform of the *Mental Health Act 2001*, which would provide for: the right to initiate a review of detention by a detailed person at reasonable intervals in compliance with Article 5(4) of the ECHR; an extended time limit to appear to the Circuit Court; and that a recording of the review would include a record of the will and preferences of the person the subject of the review, a summary of the key submissions made, and the evidence given in respect of the availability or suitability of less restrictive forms of treatment – treatment as voluntary patient or treatment in the community. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill 2021](#) (2022) pp. 5; 12; 36-38. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 44-45.

¹⁶⁰ Section 2(1) of the *Mental Health Act 2001* defines a ‘voluntary patient’ as a person who “is not the subject of an admission order or a renewal order.” This definition of a voluntary patient does not address whether the individual has consented to admission or whether they have the capacity to consent, heightening the risk for deprivation of liberty in the absence of appropriate safeguards such as an independent review of the detention.

¹⁶¹ For example, people have been persuaded to remain as a voluntary patient in an approved centre due to fear that statutory powers will be utilised to formally detain them or similar: Dr C. O’Mahony and Dr F. Morrissey, [A Human Rights Analysis of the Draft Heads of a Bill to Amend the Mental Health Act 2001](#) (2021) p. 41. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill 2021](#) (2022) pp. 41-44. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 45. We are concerned about the practice of preventing voluntary patients from leaving MHEs. This issue was addressed in the case of *P.L. v St. Patrick’s Hospital*, where the Commission appeared as an amicus curiae. The Court of Appeal ruled that the patient’s detention was unlawful, stating that while the

Inadequate mental health services and step-down facilities for children and adolescents is resulting in unnecessary deprivation of liberty without medical necessity.¹⁶² There is a chronic deficiency of special care placements for children.¹⁶³ Despite repeated recommendations from human rights bodies,¹⁶⁴ children and adolescents continue to be admitted to adult mental health services.¹⁶⁵ While we welcome the downward trend in this regard,¹⁶⁶ this ongoing practice reflects the overall deficiencies in Child and Adolescent Mental Health Services ('CAMHS').¹⁶⁷

hospital could attempt to persuade a patient stay under their care, there must be no restraint. The judge said he was a voluntary patient and free to leave the hospital whenever he wished. *P.L. v. Clinical Director of St. Patrick's University Hospital*, Court of Appeal, 14th February 2018. PILA (2018) [Irish Court of Appeal finds no legal basis for preventing a voluntary patient from leaving psychiatric unit](#). IHREC, [Submission to the United Nations Human Rights Committee on the List of Issues for the Fifth Periodic Examination of Ireland](#) (2020) pp. 8; 35-36. IHREC, [Policy Statement on Care](#) (2023) pp. 35-38; 66-69. Our DAC has also expressed concern regarding the practice of limited freedom of all residents in a facility to implement care procedures for one.

¹⁶² See Article 24 – Health; For examples, see HIQA, [Monitoring Inspection Report of Ballydowd Special Care Unit](#) (2018) pp. 14-15. HIQA, [Monitoring Inspection Report of Coovagh House Special Care Unit](#), (2018) p. 22. HIQA, [Monitoring Inspection Report of Gleann Alainn Special Care Unit](#) (2017) p. 6. Child Care Law Reporting Project, [Child Care Law Reporting Project](#) (2015) p. 27. There remains a lack of legislation on children's consent to and refusal of medical treatment. We are awaiting publication of the legislation implementing the recommendations of the Expert Review Group on the *Mental Health Act 2001*, which is due to address children's right to consent and refuse treatment. We are also concerned by the practice of admitting children to adult psychiatric facilities, as noted by the Committee on the Rights of the Child. Mental Health Reform, [Mental Health Reform Condemns Continued Admission of Children to Adult Inpatient Units](#) (2023). Committee on the Rights of the Child, [Concluding Observations on the Combined Fifth and Sixth Periodic Reports of Ireland](#) (2023) p. 10.

¹⁶³ We note with concern the chronic shortage of special care placements for children in danger. RTE, [Tusla Unable to Secure Special Care for Three Children in Danger](#) (28 April 2025).

¹⁶⁴ Committee on the Rights of the Child, [Concluding Observations on the Combined Fifth and Sixth Periodic Reports of Ireland](#) (2023), para. 32(i). The Committee expressed its serious concerns about the placement of children with mental health conditions in adult psychiatric wards. Human Rights Committee, [Concluding Observations on the Fifth Periodic Report of Ireland](#) (2022) para 34. The Committee urged the State party to implement the necessary measures with a view to guaranteeing age-appropriate treatment, eliminating the practice of admitting children into adult psychiatric facilities.

¹⁶⁵ There were 14 children admitted to 11 adult units in 2023. This compares with 20 admissions to 11 adult units in 2022. Mental Health Commission, [Annual Report 2023](#) (2024) p. 53. The General Scheme of the *Mental Health (Amendment) Bill 2021* retained a provision allowing for the admission of children to adult MHEs. We have recommended that the final legislation should both remove this provision and explicitly set out that children should not be admitted to an adult approved inpatient facility. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill 2021](#) (2022) pp. 71-72. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 46.

¹⁶⁶ There were 32 admissions to 11 adult units in 2021. See Mental Health Commission, [Annual Report 2022](#) (2023) pp. 5-6.

¹⁶⁷ The Mental Health Commission has noted inadequate child and adolescent 'out of hours' services and limited emergency beds for children. Mental Health Commission, [Independent Review of the Provision of Child and Adolescent Mental Health Services \(CAMHS\) in the State by the Inspector of Mental Health Services](#) (2023)

The number of older people placed in nursing homes despite their clear preference to age at home is of grave concern,¹⁶⁸ with 1,228 individuals under 65 years remaining in nursing homes,¹⁶⁹ the majority of which are private services. Restrictive practices in nursing homes limit the independence and choice of individuals and inhibit a dignified standard of living.¹⁷⁰

pp. 89-91; 106-107. We are concerned that in 2023, a total of nine approved centres were inspected on the Code of Practice relating to the Admission of Children to adult approved centres, and all nine were found to be non-compliant, for reasons including age and ability, inappropriate facilities and programmes of activities. Mental Health Commission, [Annual Report 2023](#) (2024) p. 41. The findings in a 2023 review of CAMHS by the Mental Health Commission which underlined that young people, and their families are frustrated, distressed and are trying to cope with deteriorating mental health difficulties while waiting for lengthy periods on waiting lists for essential services. The report identified several serious issues, including that current establishments lack basic management, information gathering and oversight structures that are needed to operate safe and effective services; that community CAMHS remain beyond the independent regulation of the Mental Health Commission; and that many services have failed to fund and recruit appropriate staff. Mental Health Commission, [Mental Health Commission publishes final report on Child and Adolescent Mental Health Services](#) (2023). National Review Panel, [Review undertaken in respect of a death experienced by a young person who had contact with Tusla: Niamh](#) (2019). IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 46.

¹⁶⁸ IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 53. Valid and voluntary consent to placements is being impacted by: the lack of resources for appropriate care and supports in the community, the absence of a statutory right to homecare, family members making decisions on admission, irrespective of capacity, limited independent advocacy and supports for self-advocacy available and risk adverse attitudes among professionals to older people remaining in their homes, IHREC, [Policy Statement on Care](#) (2023) pp. 35-36. National Nursing Home Experience Survey, [Overview of Findings 2022](#) (2022) p. 16. For example, there are approximately 6,000 people with home care packages in Ireland who are unable to access support due to workforce constraints. As Sage Advocacy has highlighted, ‘nursing home residents tend not to be prioritised for home support which means their liberty continues to be compromised by the fact that they must remain in a nursing home setting against their wishes’: [Developing an Observatory on Long-Term Care in Ireland: A Human Rights Perspective](#) (2023) p. 37. In our engagement with CSOs, concerns regarding the ongoing inappropriate placements of disabled people in nursing homes were expressed.

¹⁶⁹ In 2024 there was an average of 32 individuals under 65 entering a nursing home setting every month. Office of the Ombudsman, [Ombudsman Update on ‘Wasted Lives’](#) (2024) p. 2. As of July 2023. 15% of these individuals are less than 50 years of age: Department of Children, Equality, Disability, Integration and Youth, [Disability Services](#) (20 March 2024). Office of the Ombudsman, [Wasted lives: Time for a Better Future for Younger People in Nursing Homes](#) (2021) p. 7.

¹⁷⁰ We have heard reports of nursing home residents having to seek permission to leave a closed unit; being excluded from decision-making processes; having limited access to recreational grounds due to safety concerns; experiencing family control of personal finances; increasing use of digital door codes; and the use of restraints. Care and support infrastructure in Ireland is ‘fundamentally at odds with people’s right to choose’. Irish Council for Civil Liberties, [ICCL submission on the General Scheme of the Inspection of Places of Detention Bill 2022](#) (2022) p. 32. IHREC, [Ireland and the International Covenant on Civil and Political Rights](#) (2022) p. 54. Sage Advocacy, [Developing an Observatory on Long-Term Care in Ireland: A Human Rights Perspective](#) (2023) pp. 33; 37; 38. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 53 – 54.

In 2024, the State established a Commission on Care for Older People to examine health and social care services and supports for older people.¹⁷¹ Significant practices of concern arise in such settings and risk creating situations where people are de facto detained in nursing homes or hospital settings. Private nursing homes are not within the remit of the national policy, ‘Safeguarding Vulnerable Persons at Risk of Abuse,’ and significant practices of concern arise in such settings.¹⁷² The State-established Commission must consider such issues and report in a manner that can effect systemic change.

We are concerned by reports that the phase out of congregated settings towards more person-centred settings has created a gap in regulation and oversight.¹⁷³ The development of a robust, comprehensive data system in relation to individuals deprived of their liberty in Ireland is urgently required.¹⁷⁴

¹⁷¹ Department of Health, [Ministers for Health Announce Appointment of Members of Commission on Care for Older People](#) (2024).

¹⁷² Data on complaints are not collected, because while HSE operated or funded older people’s services and disability services are required to report adult safeguarding incidents or concerns to the HSE, privately funded services such as private nursing homes can report adult safeguarding incidents or concerns on a voluntary basis. Law Reform Commission, [Report: a regulatory framework for adult safeguarding](#) (2024) para. 5;135; 170. The Law Reform Commission has called for the forthcoming adult safeguarding legislation to provide for the establishment of a statutory Safeguarding Body with the appropriate powers of entry and inspection to assess the health, safety or welfare of at-risk adults in a range of settings, including nursing homes. The Law Reform Commission recommends that the Safeguarding Body should be permitted by adult safeguarding legislation to make safeguarding interventions or take actions including entering and inspecting ‘relevant premises’, which includes nursing homes and residential centres for adults with disabilities among others, for the purposes of assessing the health, safety or welfare of at-risk adults. Adult safeguarding and protection teams do not have a legal right of entry. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 55. IHREC, [Policy Statement on Care](#) (2023), pp. 66-67. The Irish Association of Social Workers has reported that, on occasion, social workers have received letters from nursing homes advising that they will be prosecuted if they attempt to enter the premises. We have expressed our concern that during the pandemic there was an increased use of digital door codes for residents to access and exit residential care institutions. IHREC, [Ireland and the International Covenant on Civil and Political Rights](#) (2022).

¹⁷³ This relates to situations in which step-down settings are not currently regulated as they fall outside the definition of designated centre. HIQA, [The Need for Regulatory Reform - A summary of HIQA reports and publications examining the case for reforming the regulatory framework for social care services](#) (2021).

¹⁷⁴ Article 31 UNCRPD, [Statistics and Data Collection](#).

Prisons currently do not adequately treat people diagnosed with a mental health condition and meet the needs of disabled prisoners.¹⁷⁵ We are concerned by the high prevalence of prisoners with mental health conditions,¹⁷⁶ addiction challenges and psychosocial disabilities,¹⁷⁷ intellectual disability,¹⁷⁸ the lack of services to respond to these needs,¹⁷⁹ and

¹⁷⁵ There is a limited understanding of disability rights within the prison population and issues have been identified in the inaccessibility of the regime operating in Irish prisons with some prisoners reporting being punished for disability-related behaviour. Irish Penal Reform Trust, [Making Rights Real for People with Disabilities in Prison](#) (2020). We note that a diversionary approach would also assist with overcrowding issues, which can themselves be a cause of mental distress. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 34. Irish Penal Reform Trust, [Progress in the Penal System: A framework for penal reform 2022](#) (2023) p. 51. CPT, [Report to the Government of Ireland on the visit to Ireland carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment \(CPT\) from 23 September to 4 October 2019](#) (2020) p. 48. Office of the Inspector of Prisons, [Thematic Inspection: An Evaluation of the Provision of Psychiatric Care in the Irish Prison System February – March 2023](#) (2024) p. 38. We are concerned about inadequate step-down facilities and community services for people in prisons with psycho-social disabilities or mental health difficulties.

¹⁷⁶ Data has suggested that “nearly one in three prisoners have intellectual disabilities, one in two have substance misuse/dependence and that the prevalence of people with severe mental illness is four times that of the general population...Irish prisons are, in effect, emerging as congregated settings for people with psychosocial and intellectual disabilities, particularly since the closure of large psychiatric hospitals.” Health and Human Rights Journal, [Trans-institutionalisation in Ireland: New and Emerging Congregated Settings for People with Disabilities](#) (2021). For additional information, see Irish Penal Reform Trust, [Making Rights Real for People with Disabilities in Prison](#) (2020).

¹⁷⁷ In 2005, a survey of the mental health of prisoners in Irish prisons found that over 60% of prisoners evidenced dependence or harmful use of drugs or alcohol; between 16-27% male prisoners had some form of mental illness and between 4%-60% of women had some form of mental illness. The Office of the Inspector of Prisons noted in 2024 that ‘there is no evidence to suggest that this situation has improved.’ Office of the Inspector of Prisons, [Thematic Inspection: An Evaluation of the Provision of Psychiatric Care in the Irish Prison System February – March 2023](#) (2024) p. 13. In 2022, the UN Human Rights Committee raised concerns about the ‘disproportionately high rate of persons in prison with severe mental health issues compared with that of the general population, and the lack of sufficient mental health services in detention facilities to support them’ [Concluding Observations on the Fifth Periodic Report of Ireland](#) (2022) para 35.

¹⁷⁸ Joint Committee on Disability Matters, [Towards harmonisation of national legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 63.

¹⁷⁹ The Inspector of Prisons has found a lack of psychiatrists, specialist mental health nurses, general nurses, psychologists, occupational therapy staff and other relevant staff. Office of the Inspector of Prisons, [Thematic Inspection: An Evaluation of the Provision of Psychiatric Care in the Irish Prison System February – March 2023](#) (2024) pp. 36-38. We note CSO’s research that reports the significant difficulties faced by persons with disabilities within the prison system, and there is a need to ensure the prison system is accessible and persons with disabilities are not subject to discrimination in the provision of services and support. Irish Penal Report Trust, [Making Rights Real for People with Disabilities in Prison](#) (2020). See also: Inspector of Mental Health Services, [Access to Mental Health Services for People in the Criminal Justice System](#) (2021) pp. 5-6; 10; 16. We note that the High Level Task Force created to consider the mental health and addiction challenge of people in contact with the criminal justice system recommended the introduction of crisis intervention teams to ensure a multi-agency response to prevent people experiencing mental ill-health and addiction from being inappropriately trapped in the criminal justice system. Department of Justice, Home Affairs and Migration, [Final Report of the High Level Task Force to Consider the Mental Health and Addiction Challenges of those who come into Contact with the Criminal Justice Sector](#) (2022) pp. 10-11; 13; 66-68; Such an approach requires comprehensive pre-arrest and court diversion services, which are adequately staffed.

delays in transfer to and availability of suitable settings,¹⁸⁰ resulting in a focus on medication.¹⁸¹

The continued prevalence of institutionalisation of disabled people undermines the right to live independently in the community.¹⁸² Contributory factors include inadequate community services and housing,¹⁸³ potential for risk adverse approaches among medical professionals and a bias in favour of institutional care and supports,¹⁸⁴ and paternalistic tendencies towards decision-making of disabled people.¹⁸⁵

The Committee should ask the State about:

Ratification of the Optional Protocol to the Convention Against Torture and its scope with regard to de facto detention in the health and social care sector.

¹⁸⁰ In recent years, prisoners with psychosocial disabilities have experienced long delays in transferring to external MHEs due to the lack of available beds. For example, the Office of the Inspector of Prisons noted one prisoner on a waiting list for admission to the Central Mental Hospital for 18 months, who was living in conditions that could be considered inhuman and degrading. Office of the Inspector of Prisons, [Thematic Inspection: An Evaluation of the Provision of Psychiatric Care in the Irish Prison System February – March 2023](#) (2024) p. 26.

¹⁸¹ Professionals have commented that although certain units in prisons act as de facto hospitals, they cannot compel medication and they do not offer other therapies, meaning that, the main function of these units is segregation rather than treatment. Office of the Inspector of Prisons, [Thematic Inspection: An Evaluation of the Provision of Psychiatric Care in the Irish Prison System February – March 2023](#) (2024) p. 26.

¹⁸² The State's policy of deinstitutionalisation has failed to date. This is despite clear evidence that community living provides a better quality of life, and HIQA findings that many of the remaining residential centres must close due to non-compliance with standards. These are pre-requisites to independent community living and inclusion. Department of Health, [Disability Capacity Review to 2032 – A Review of Social Care Demand and Capacity Requirements to 2032](#) p. 68. The Commission has previously noted that the PSEHRD offers a pathway to a new model of community living, including through its incorporation into public procurement processes.

¹⁸³ See Article 19 - Living Independently and being included in the community.

¹⁸⁴ We note evidence that professionals can have risk adverse attitudes to older people remaining in their homes, prioritising the perceived risk to themselves over the autonomy of older people. However, as the *Assisted Decision Making (Capacity) Act 2015* sets out, people have the right to make 'unwise' decisions. Older people can feel like they have no choice but to enter nursing homes, with family members making decisions on their admission in many cases irrespective of their capacity. University College Dublin, ["I'd prefer to stay at home but I don't have a choice" Meeting Older People's Preference for Care: Policy, but what about practice?](#) (2016) pp. 17-18; 21. Ombudsman, [Wasted Lives: Time for a Better Future for Younger People in Nursing Homes](#) (2021) p. 14.

¹⁸⁵ In our engagements with CSOs, we have heard of worrying cases in which decisions are made on behalf of a disabled person without adequate regard to their will and preference. Anecdotal evidence suggests that limited understanding of the the *Assisted Decision Making (Capacity) Act 2015* is contributing to inappropriate and incorrect application of the decision-making support mechanism.

The timeline for enactment and commencement of rights-based mental health and protection of liberty legislation.

Measures to ensure that voluntary patients are not unlawfully detained.

Measures to ensure rights-based and child-centred provision of mental health services for children and adolescents, including community-based care and adequate special care placements; and measures to provide age-appropriate facilities and to reduce those admitted to psychiatric wards .

An update on the deinstitutionalisation process, including timelines and indicators to facilitate independent monitoring, and measures to progress systemic de-institutionalisation and to ensure that other forms of social care are subject to robust human rights-based oversight and safeguarding mechanisms.

Measures to ensure the prison system meets the needs of disabled people including through available supports.

Measures to ensure that people with severe psychosocial disabilities are not detained in prisons, and instead are provided with treatment in appropriate settings, including in the community.

Measures taken on foot of recommendations by the Commission on Care for Older People, including any measures to address in a systematic manner concerning practices and inadequate safeguarding mechanisms in private nursing homes.

Article 15: Freedom of Torture, Cruel, Inhuman or Degrading Treatment or Punishment

The State's failure to ratify OPCAT creates a significant gap in preventive mechanisms against torture in places of detention.¹⁸⁶ Ongoing delay impacts on the effective, independent oversight of criminal justice settings, and de facto detention, for example in MHEs, and healthcare and residential settings.¹⁸⁷ Further the State has failed to submit its report (due in August 2021) to the UN Committee Against Torture thus delaying UN scrutiny.

The absence of statutory regulation for supervised residential units is of particular concern, particularly noting the 'risk of abuse and substandard living conditions and treatment' within these services.¹⁸⁸

Despite welcome declines, we remain concerned about the ongoing use of restrictive practices in Ireland such as seclusion and restraint.¹⁸⁹ Chemical restraint is outside the remit

¹⁸⁶ For discussion, see Article 14.

¹⁸⁷ IHREC, [Submission to the UN Committee against Torture on the List of Issues for the Third Examination of Ireland](#) (2020) pp. 9; 15-16. In-patient adult services and CAMHS are registered, regulated and inspected by the Mental Health Commission and the Inspector of Mental Health Services (approximately 1% of services). However, all other mental health services, including community services, fall outside the regulatory remit of the *Mental Health Act 2001*. Mental Health Commission, [Opening Statement from the Mental Health Commission to the Joint Committee on Disability Matters](#) (2023). The Inspector of Mental Health Services does have the statutory power to visit, inspect and report on any premises where a mental health service is being provided. However, neither the Inspector nor the Commission have the powers to set standards and ensure services comply with these standards by way of monitoring and enforcement. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 7.

¹⁸⁸ See for example, Mental Health Commission, [2018 Inspection of 24-hour supervised residence for people with mental illness](#) (2018) p. 1. Mental Health Commission, [Annual Report 2018](#) (2019) pp. 84; 125. Mental Health Commission, [Annual Report 2022](#) (2023) p. 82. The proposed *Mental Health Bill* will extend existing regulation and inspection systems to community services, including residential units. The General Scheme to amend the *Mental Health Act 2001* sets out the intention of the State to expand the regulation of mental health services beyond inpatient services to the community: Mental Health Commission, [Opening Statement from the Mental Health Commission to the Joint Committee on Disability Matters](#) (2023) p. 3. See also, Department of Health, [Minister for Mental Health and Older People outlines progress to date in Mental Health legislative reform](#) (2024).

¹⁸⁹ Non-consensual use of psychiatric medication, electroshock, and other restrictive and coercive practices should be generally prohibited and only used in exceptional circumstances as a measure of last resort. A restrictive practice should only be used where it is the only means available to prevent immediate or imminent harm to a person or others, and its use should not be prolonged beyond what is necessary for this purpose. Human Rights Committee, [Concluding Observations on the Fourth Periodic Report](#) (2014) para. 12. In 2023, 988

of codes of practice in place.¹⁹⁰ Reports indicate a disturbing increase in the use of physical restraint in CAMHS units.¹⁹¹ There is an absence of monitoring treatment when using certain medications in the CAMHS services.¹⁹²

residents were subject to restrictive practices; 36.8% of residents were subject to both physical restraint and seclusion in 2023, 11.03% experienced only seclusion and 52.13% experienced only physical restraint. In 2023, approved centres reported a total of 3,467 episodes of seclusion and physical restraint, compared to 4,309 episodes in 2022, a 20% reduction in restrictive practice interventions in 2023 on 2022. This is a decrease of 7% (327 episodes) from 2021. However, the Mental Health Commission have noted that comparing the use of restrictive practices across services over time should be done with caution, due to data limitations. Data from the Mental Health Commission has shown that episodes of physical restraint are 36% more frequent in centres where seclusion is practiced. In 2023, two approved centres, reported the use of mechanical restraint (10 incidents). Mental Health Commission, [The Administration of Electro-convulsive Therapy in Approved Centres: Activity Report](#) (2023). Mental Health Commission, [The Use of Restrictive Practices in Approved Centres. Activities Report 2022](#) (2023). Mental Health Commission, [Annual Report 2022](#) (2023) p. 34. Mental Health Commission, [The Use of Restrictive Practices in Approved Centres Seclusion, Mechanical Restraint and Physical Restraint](#), Activities Report 2023 (2024) pp. 24; 38 – 39. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 50 – 51.

¹⁹⁰ Under the current Codes of Practice, mental health establishments have a duty to ensure systems are in place to identify, reduce and, where possible, eliminate other forms of restrictive practice, such as the use of involuntary medication, time-out, environmental restraint, close observations, locked doors, night-time clothing, and psychological restraint. These categories are not reported on in the Mental Health Commission reports on the use of restrictive practices. Codes of Practice for Mental Health Establishments are available here: Mental Health Commission, [Codes of Practice](#).

¹⁹¹ Five CAMHS services reported using physical restraint (508 total episodes) in 2023 compared to three CAMHS services (365 total episodes) in 2022. This increase in physical restraint in CAMHS services was also seen from 2021 to 2022. From 248 instances of physical restraint in 2021 to 365 in 2022 (a 47% increase). Mental Health Commission, [The Use of Restrictive Practices in Approved Centres](#) (2023) p. 52. Mental Health Commission, [The Use of Restrictive Practices in Approved Centres Seclusion, Mechanical Restraint and Physical Restraint](#), Activities Report 2023 (2024) p. 27. There are reports of use of pharmacological restraint on children to manage behavioural issues. This has been attributed to a lack of early intervention and access to services to support these individuals and families. It has also been reported that 50% of people with intellectual disability in Ireland who are on antipsychotic medication may not have psychotic symptoms. Joint Oireachtas Committee on Disability Matters, [Towards harmonisation of national legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 63.

¹⁹² Mental Health Commission, [Independent Review of the provision of Child and Adolescent Mental Health Services \(CAMHS\) in the State by the Inspector of Mental Health Services](#) (2023).

Reform of the Mental Health Act 2001 must provide proactive measures to reduce the use of restrictive practices, to develop strategies which promote less restrictive alternatives¹⁹³ consistent with CPT and UNCRPD standards,¹⁹⁴ and to provide for access to justice.¹⁹⁵

Despite limited data, we are concerned by high rates of seclusion and restraint experienced by disabled students.¹⁹⁶ We note evidence of the damaging effects of such seclusion and restraint practices, with specific concerns raised over the number of schools threatening suspension, expulsion and the withdrawal of services from structurally vulnerable families if parental / guardian consent is not provided.¹⁹⁷ We welcome recent guidelines regarding the use of seclusion and restraint in schools, including an outright ban on the use of seclusion (from September 2025).¹⁹⁸ However, we note the concerns of CSOs regarding the CRPD

¹⁹³ The State should strengthen safeguards – including that restraint and seclusion should be a measure of last resort, the right of a person to access an advocate in discussions on the use of seclusion or restraint, and the reason for the use of restraint and seclusion, and its nature and extent should be included in the register and the person’s clinical file, and embed human rights standards within the rules and codes of practice on the use of these practices. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022). IHREC, [Ireland and the International Covenant on Civil and Political Rights – Submission to the Human Rights Committee on Ireland’s 5th Periodic Report](#) (2022) pp. 64-65.

¹⁹⁴ Including on concurrent use, debriefs, independent reviews and chemical restraint. European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT), [Means of Restraint in Psychiatric Establishments for Adults](#), CPT/Inf (2017)6 (2017) p. 4. See also Council of Europe, [Ending Coercion in Mental Health: the Need for a Human Rights- Based Approach](#) Strasbourg: Council of Europe, Parliamentary Assembly Resolution 2291 (2019).

¹⁹⁵ IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022) p. 56. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 50 – 51. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024). We also note the concerns presented by our DAC, regarding unconscious bias of staff in institutional settings, who may be unaware that their actions amount to a deprivation of liberty of another person. IHREC, [Disability Advisory Committee](#).

¹⁹⁶ Inclusion Ireland, [New Survey says 35% of Disabled Children Ensure Seclusion and 27% Suffer Restraint at School](#) (2024).

¹⁹⁷ We note that international research highlights that even in instances where children are not found to have incurred physical injuries from the use of seclusion and restraint, there exists a risk of traumatising and re-traumatising during and after these practices. Council of Parent Attorneys and Advocates, [Trauma-Informed Care: Child Safety Without Seclusion and Restraint](#) (2015). IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \(‘EPSEN’\) Act 2004 \(2023\)](#) p. 81. The Irish Times, [‘An animal wouldn’t be treated this way’: 35% of children with disabilities secluded or restrained at school, poll shows](#) (21 February 2024). Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. In our engagement with CSOs, we heard concerns that there is a significant lack of understanding of the diversity of disability that impacts on the provision of inclusive education and that failure to educate a child locally is an act of exclusion, and heard calls for training and education for teachers to make them aware of how important it is to include disabled children.

¹⁹⁸ Department of Education, [Understanding Behaviours of Concern and Responding to Crisis Situations](#) (2024).

compliance of the guidelines,¹⁹⁹ including regarding training,²⁰⁰ independent oversight,²⁰¹ and monitoring.²⁰²

A comprehensive data system to monitor seclusion and restraint is required to monitor implementation of the commitment to reduce its use.²⁰³

The Committee should ask the State about:

Reform of mental health law, and the development of measures – including legislation and codes of practice – aimed at ensuring less restrictive forms of treatment in the community are

¹⁹⁹ AslAm, [Statement on Department of Education's Updated Guidelines on Seclusion and Restraint](#) (2024). We note that the use of restraint and seclusion can amount to indirect discrimination as they impede a child's right to inclusive education, particularly where they are used as a result of an unreasonable requirement or condition that disadvantages the child because of his or her disability. Inclusion Ireland, [Shining a Light on Seclusion and Restraint in Schools in Ireland: The Experience of Children with Disabilities and their Families](#) (2018). IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004 \(2023\)](#) p. 82. In our engagement with CSOs we have heard concerns regarding limited evidence base to underpin these guidelines; incompatibility of the complaints mechanisms with Ireland's Child Rights Legislation, [Children First Act 2015](#); failure to apply a child-centred approach; the absence of accountability; the lack of adequate independence or oversight.

²⁰⁰ Our DAC has recommended that addressing seclusion and restraint in education must be embedded into a framework that provides support to schools and school staff more generally. Inclusion Ireland & AslAm, [Inclusion Ireland and AslAm Call for Urgent Review of Reporting Mechanism for the Use of Restraint in Schools](#) (2025). The guidelines do not require schools to mandate teacher training, secure parental consent prior to the use of restraint nor is there a requirement for the Department to examine school-level policies or conduct compliance inspections.

²⁰¹ Under the guidelines, schools are responsible for investigating themselves which raises clear concerns about transparency, impartiality and fair procedures. We also heard concerns that the Guidelines, with limited safeguarding and reporting mechanisms, could amount to state sanctioning of violence against children. IHREC, [Disability Advisory Committee](#).

²⁰² We note that the Guidelines on Understanding Behaviours of Concern and Responding to Crisis Situations provide for quarterly reports from the NCSE collating data on reports of the use of physical restraint in schools, but it is unclear whether this data will be made publicly available. The guidelines also provide for annual reports from the Department of Education on the extent of the use of physical restraint in schools. These reports will be publicly available, but it is unclear whether data will be disaggregated. Department of Education and Youth, [Understanding Behaviours of Concern and Responding to Crisis Situations](#) (2024).

²⁰³ See Article 31 – Statistics and Data Collection. Such a data system must be designed to collect, process and publish data that is disaggregated by groups covered in the Equality Acts. European Commission, [EU Equality Data Guidelines](#), (2018) p. 6. Article 31 UNCRPD, [Statistics and Data Collection](#). Data on seclusion and restraint should be disaggregated by equality grounds and impairment groups and that such statistical information should be routinely published and made publicly and research accessible. IHREC, [Submission to the Mental Health Commission's Public Consultation on the Rules and Code of Practice Governing the use of Seclusion and Restraint](#) (2021) pp. 19-20.

available with the aim of eliminating coercive treatment of people with psychosocial disabilities.

Measures to reduce the incidence of, and reliance on, involuntary treatment, seclusion and restraint in institutional and educational settings, including specialised training to teachers and other members of the educational community working with students with educational needs regarding implementation of guidelines on seclusion and restraint.

Measures to provide independent oversight and complaint mechanisms for children and adults subjected to seclusion and restraint in educational settings.

Measures to ensure availability of robust disaggregated data to enable effective monitoring of the reduction of seclusion and restraint over time.

Article 16: Freedom from Exploitation, Violence and Abuse

Institutional safeguards, complaints mechanisms and accountability

Legislation to safeguard adults and children from abuse, harm and neglect in a broad range of institutional or quasi-institutional settings is inadequate;²⁰⁴ robust protection mechanisms are absent;²⁰⁵ effective and independent oversight of de facto detention in MHEs, and healthcare and residential settings is lacking;²⁰⁶ and limited data and access makes oversight even more challenging, particularly given that a very high proportion of settings are private.²⁰⁷

²⁰⁴ In April 2025, the Department of Health launched a consultation to close on 30 May 2025 to inform the development of Protection of Liberty Safeguards Legislation. Previously, in 2017, the Department of Health carried out a public consultation on a general scheme of the *Deprivation of Liberty Safeguards Bill*. IHREC, [Submission to the public consultation on Deprivation of Liberty: Safeguard Proposals](#) (2018). In April 2024, the Law Reform Commission ('LRC') published the *Adult Safeguarding Bill 2024* which aims to introduce a statutory safeguarding framework for at-risk adults in Ireland. There is limited legislation in Ireland relevant to adult safeguarding, with significant gaps remaining across a range of services and settings, including hospitals, residential centres for older people, residential centres for adults with disabilities, residential centres for international protection, etc. Law Reform Commission, [Report: a Regulatory Framework for Adult Safeguarding: Executive Summary](#) (2024) para. 258. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 55-56.

²⁰⁵ The *Mental Health Act* does not provide for a mechanism to handle individual complaints. There have been calls to establish an effective complaints mechanism to safeguard persons receiving mental health services. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 26.

²⁰⁶ The Commission is aware, from the work of its legal team, that some residential care facilities lack basic safeguarding rights, such as access to a phone to contact legal representation. IHREC, [Submission to the UN Committee against Torture on the List of Issues for the Third Examination of Ireland \(2020\)](#), p. 23. The State has not ratified the Optional Protocol to the Convention Against Torture ('OPCAT'), which would provide a human-rights based preventive mechanism for places of detention, including places of *de facto* detention.

²⁰⁷ Adult safeguarding social workers do not have a legal right of entry to private nursing homes, which make up almost 80% of all nursing homes, and the HSE does not collect data on any refusals of entry. Private nursing homes are not within the remit of the national policy, 'Safeguarding Vulnerable Persons at Risk of Abuse'. IHREC, [Ireland and the Convention on the Elimination of All Forms of Discrimination against Women](#) (CEDAW) (2023) pp. 92-93. Recent research undertaken for the EUFRA found that "Participants from all groups acknowledged the prevalence of various forms of abuse (financial, physical, emotional, sexual) within institutions. However, there is a notable lack of data on abuse. Also, the lack of complaints to bodies outside HIQA or the HSE has contributed to a presumption that there are no significant issues to be addressed." EU Agency for Fundamental Rights, [Fundamental Rights Protection of Persons with Disabilities in Institutions](#), (forthcoming 2025) Irish case study p. 4.

The absence of safeguarding legislation has resulted in very substantial gaps in protection and accountability.²⁰⁸

Complaints mechanisms for people in residential settings are inadequate.²⁰⁹ While disabled people and their families are often aware of available complaints mechanisms, these are undermined by institutional practice and expose residents to further controls by service providers. Safeguarding practices by regulatory bodies are hampered by resource limitations – including adequate staffing, pay and conditions and a culture in which abuse may become normalised,²¹⁰ and long-standing detrimental staff practices and attitudes.²¹¹ We are very concerned by continued reports that individuals in institutions feel vulnerable and hesitant to

²⁰⁸ EU Agency for Fundamental Rights, [Fundamental Rights Protection of Persons with Disabilities in Institutions - Irish case study](#) (forthcoming 2025) pp. 3; 13. “The HSE's National Safeguarding Vulnerable Persons Policy has been under development since 2016 and remains unfinished. The safeguarding policy does provide a framework, but is not backed by legislation, weakening its enforceability. It is also applied inconsistently and does not cover all relevant settings. There is a need for legislative support to back the safeguarding policy to enforce compliance and secure funding for safeguarding measures, especially in non-HSE funded organisations.” Health Service Executive, [Safeguarding Vulnerable Persons at Risk of Abuse - National Policy & Procedures](#) (2014).

²⁰⁹ The *Mental Health Act* does not provide for a mechanism to handle individual complaints, and there have been calls to establish an effective complaints mechanism to safeguard persons receiving mental health services. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 26. There are currently no independent complaint mechanisms which offer a viable alternative for people in residential care. The Office of the Confidential Recipient has provided support to complainants but is largely seen as an arm of the HSE safeguarding system. The Ombudsman cannot receive complaints about privately operated residential centres for older persons and persons with disabilities. While it can receive complaints about HSE and HSE-funded services, it appears that complaints communicated to HIQA have not reliably been passed onto the Ombudsman. HIQA does not have the remit to investigate individual complaints, but these may be used to inform its monitoring of individual centres. The National Advocacy Service can support people making complaints to the HSE and other bodies, but is significantly under resourced, with waiting lists of 9- 12 months in some regions for advocate support. EU Agency for Fundamental Rights, [Fundamental Rights Protection of Persons with Disabilities in Institutions - Irish case study](#) (forthcoming 2025) p. 5. IHREC, [Submission to the UN Committee against Torture on the List of Issues for the Third Examination of Ireland \(2020\)](#) pp. 22-24

²¹⁰ EU Agency for Fundamental Rights, [Fundamental Rights Protection of Persons with Disabilities in Institutions - Irish case study](#) (forthcoming 2025) pp. 4; 10. Institutional policies can inadvertently expose residents to risk, for example the “trust in care” policy potentially enabled abuse to persist, by protecting staff over the service user, creating a conflict of interest.

²¹¹ EU Agency for Fundamental Rights, [Fundamental Rights Protection of Persons with Disabilities in Institutions - Irish case study](#) (forthcoming 2025) p. 16. Institutional staff often lack resources, including time, to properly complete necessary safeguarding paperwork and support residents, and “long-standing staff practices and attitudes can hinder the implementation of new policies and proper safeguarding measures.”

report abuse due to fear of reprisals, lack of external connections and communication difficulties.²¹²

State-commissioned reports have highlighted the abuse and neglect experienced by disabled children in residential institutions.²¹³ Investigations have failed to adequately and comprehensively address issues relating to ableism in institutional settings.²¹⁴ The State has not addressed the ‘historic’ abuse of children with physical, sensory, intellectual or mental health conditions in institutional settings.²¹⁵ We consider that ‘historical’ is a misnomer and caution against its use as for many survivors, the abuse is an ongoing violation which impacts on their enjoyment of rights.²¹⁶ Against the backdrop of a dark history of abuse, recent

²¹² “Deaf adults from dedicated centres have been reallocated to general nursing homes, where they cannot access Deaf services or advocacy, and experience significant exclusion on a daily basis because of the lack of access to communication through Irish Sign Language.”; “Institutionalisation often begins early with segregated education, leading to continued segregation and susceptibility to abuse in adulthood. Long-term residents may not recognise institutional abuse due to normalisation of such environments over time.” This concern has been raised through our DAC, which as noted that the gatekeeper factors, whereby external actors can only access residents *through* service providers narrows the scope for critical information to be shared for a range of reasons including fear of reprisals and selection bias by the gatekeeper/service provider. EU Agency for Fundamental Rights, [Fundamental Rights Protection of Persons with Disabilities in Institutions - Irish case study](#) (forthcoming 2025) pp. 16; 18.

²¹³ Department of Children, Equality and Disability, [The Report of the Commission to Inquire into Child Abuse \(The Ryan Report\)](#) (2019). See Industrial Memories, [Chapter 13 – Special needs schools and residential services](#) (2009), which documented physical, emotional and sexual abuse and neglect of disabled children. The experience of disabled children has also been highlighted in other inquiries into the abuse and exploitation of children. Amnesty International, [In plain sight: Responding to the Ferns, Ryan, Murphy and Cloyne reports](#) (2016) pp.193–195.

²¹⁴ IHREC, [Ireland and the International Covenant on Civil and Political Rights – Submission to the Human Rights Committee on Ireland’s 5th Periodic Report](#) (2022) p. 43. Research has displayed that pressure on residential places, due to limited supply, and the concentration of individuals categorised as having ‘challenging behaviour’ in the same residences increases the likelihood that victims continue to live with abusers who are also residents. EU Agency for Fundamental Rights, [Fundamental Rights Protection of Persons with Disabilities in Institutions - Irish case study](#) (forthcoming 2025) p. 3.

²¹⁵ IHREC, [Ireland and the Rights of the Child](#), (2022) p. 43. IHREC, [Ireland and the International Covenant on Civil and Political Rights – Submission to the Human Rights Committee on Ireland’s 5th Periodic Report](#) (2022) p. 15. Disability & Society, [No Safety Net for Disabled Children in Residential Institutions in Ireland](#) (2012) 27:6, pp. 809-822.

²¹⁶ See for example, The Irish Times, [The Dublin scout leader who died a day before his trial and the men who accuse him of abuse](#) (7 June 2025).

incidents of violence and neglect (including in Aras Attracta,²¹⁷ the Grace case,²¹⁸ the Brandon case²¹⁹ and Mary's case)²²⁰ are of grave concern, as is the failure to hold perpetrators of abuse to account and to meaningfully identify and address systemic issues arising.²²¹ We call for a systemic change in the State's attitude and responsibility to victims or survivors of State wrongdoing.²²²

²¹⁷ In 2014, the national broadcaster aired an investigative documentary on abuse at a residential care facility for people with intellectual disabilities in Mayo. Undercover footage showed a number of staff members physically and psychologically abusing and neglecting residents in the facility. A subsequent investigation by An Garda Síochána resulted in criminal charges against 6 people, 5 of whom were found guilty. National Disability Authority, [Overview of UNCRPD Article 16 in Ireland: Freedom from exploitation violence and abuse](#) (2022) p. 54.

²¹⁸ The [Farrelly Commission of Investigation](#) was established in 2017 to examine the culture and treatment of individuals with intellectual disabilities in a foster care setting in the South East. 'Grace' is the pseudonym of a woman now in her 40s who has been in the care of the State all her. The Commission's interim reports describe 'systemic failings and shortcomings' in the care of individuals with intellectual disabilities. Department of Health, The Farrelly Commission of Investigation ([Certain matters relative to a disability service in the South East and related matters](#)); IHREC, [Ireland and the Rights of the Child](#) (2022) p. 42. In April 2025, the [Farrelly Commission](#) published its final report, which found evidence of "serious neglect" and "financial mismanagement," but not of physical, sexual or emotional abuse. (RTE, [Key findings from €13m Farrelly Commission report](#), 16 April 2025). The report was criticised by the Minister with responsibility for disability, disability stakeholders and the legal representatives of 'Grace', who have publicly stated that submissions made on behalf of 'Grace' were not "referred to in any way". The Irish Times, [Submissions of Grace's Legal Team not Referred to 'in any way' in Final Investigation Report, says Wardship Solicitor](#), 29 April 2025.

²¹⁹ An investigation by the HSE's National Independent Review Panel (NIRP) found that at least 18 people with intellectual disabilities in care settings in Donegal were sexually abused by Brandon, another resident, on multiple occasions by between 2003 and 2016. In a case in which 'Brandon' 'engaged in a vast number of highly abusive and sexually intrusive behaviours' against other residents and in which staff and management were fully aware of this abuse occurring, NIRP and previous HIQA inspections identified failings regarding the governance and management of this particular service. The review team believed a key contributing factor enabling this abuse to continue was the clinical-like environment of the setting which treated residents as patients and promoted a situation where they were completely reliant on staff to protect them. Brandon spent 20 years in this service and there was never a holistic assessment of his needs, or a more specialised placement considered for him. National Disability Authority, [Overview of UNCRPD Article 16 in Ireland: Freedom from exploitation violence and abuse](#) (2022) p. 55. National Independent Review Panel, [Independent Review of the Management of Brandon](#) (2021).

²²⁰ In 2017 a report on the case review of Mary's case was published, in response to delays in removing Mary from a foster care placement between 2014 and 2016, despite concerns about abuse by her foster carers. The report highlighted the lack of reliable safeguarding measures and misunderstandings regarding the role and function of post holders from different agencies. HSE and Tusla, [Case Review Mary](#) (2017).

²²¹ IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 29.

²²² In line with the recommendations of the Human Rights Committee, [Concluding observations on the fifth periodic report of Ireland](#), CCPR/C/IRL/CO/5 (26 January 2023) paras. 11-14. See, for example, IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women 2025](#) (2025) p. 77. The Commission recommends that the State overhauls its approach to investigations and reparations of so-called 'historical' abuse to ensure independent, survivor-centred, timely investigations and effective remedies for victims and survivors, including through schemes based on the right to truth, justice, reparation, non-recurrence and memory processes.

We reiterate the need to tackle the non-prosecution of offences committed against people with intellectual disabilities.²²³ The failure to hold perpetrators of abuse, both public and publicly funded services and professionals²²⁴ to account indicates an absence of accountability.²²⁵

We are concerned about the effectiveness and appropriateness of the State's Commissions of Investigation ('COI') mechanism to investigate cases of serious abuse against disabled people. There has been an inconsistency in approaches and impact, inadequate analysis and reporting of addressing systemic failures,²²⁶ inadequate engagement with the voice of the survivor/victim, and non-rights based framing and inaccessible communication of COI

²²³ The Commission recommends that the Government adopts measures to tackle the non-prosecution of offences involving victims who have intellectual disabilities, supported by enhanced training for relevant professionals/agencies on effective communication. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 29. IHREC research has identified concerning evidence that some serious offences perpetrated against disabled women, for example, are not being referred for prosecution due to 'credibility issues. Charles O' Mahony, [Access to Justice: A Baseline Study of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 29. A report prepared by HIQA shows that of the 298 pieces of unsolicited information received in 2017, none were passed on to the Ombudsman and only one was passed to An Garda Síochána. Irish Times, [Hiqa Received 4,600 Allegations of Abuse of Disabled Residents in 2017](#) (2018). For further information see IHREC, [Ireland and the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence](#) (2022) pp. 89-90. A report into the sexual assault of a resident of a HSE run nursing home found that previous serious allegations against the healthcare worker by other residents were not believed. Dáil Debate, [Topical Issue Debate: Care of the Elderly](#) (2023).

²²⁴ Observation from IHREC's DAC that the current State 'learning lessons' approach means that service providers and professionals are not appropriately held to account.

²²⁵ IHREC, [Ireland and the International Covenant on Civil and Political Rights](#) (2022) pp. 15-16. IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women](#) (2025) p. 167.

²²⁶ We have observed that COIs have instead focused on isolated incidents without interrogating the context in which the incidents occur.

findings.²²⁷ There is an urgent need to reconsider and reform the State's method of investigating cases of institutional abuse.²²⁸

Domestic, Sexual and Gender-based Violence

Despite policy development in recent years,²²⁹ safeguards for disabled people from exploitation, abuse and violence, including gender-based violence, remain inadequate.²³⁰ There are notable deficits in specialist support services for victims and

²²⁷ Consideration was given to the recently published [Farrelly Commission](#) final report by our [Disability Advisory Committee \('DAC'\)](#). The Committee are particularly concerned about the way the report was published without forewarning for many of those affected and in an inaccessible format; the characterisation of disabled people in media commentary relating to the publication; the manner and duration over which the investigation was conducted; and the findings of the report. The State has committed to undertake a non-statutory safeguarding exercise to extract learnings from the Commission's findings to continue to inform and support developments in safeguarding policies and practices. Department of Children, Equality, Disability, Integration and Youth, [Speech by Minister for Children, Disability and Equality Norma Foley on the Publication of the Final Substantive Report of the Farrelly Commission](#) (15 April 2025). However, the Special Rapporteur on Child Protection has called for 'an inquiry into the inquiry' and to ensure that 'Grace' and her advocates are involved in the next steps: RTÉ, ['Grace' Solicitor Comments on Report an 'Alarm Call'](#) (30 April 2025). IHREC's [Disability Advisory Committee \('DAC'\)](#) has the view that the investigation did not appear to address systemic failures that enabled abuse to occur within the public system, including within the criminal justice systems, oversight of social work, inspection bodies, and the care system. The general solicitor for minors and Wards of Court issued a statement in relation to the Commission of Investigation Report (Farrelly Commission final report) stating that in representing Grace, the legal team made considered and extensive submissions on her behalf, and it appeared that the submissions had not been included or referenced in any way in the report. Law Society Gazette, [Solicitor for Wards Issues 'Public Interest' Statement](#) (30 April 2025).

²²⁸ We note the obligations on the State with regard to the PSEHRD and protecting the rule of law; *Irish Human Rights and Equality Commission Act 2014*, [S.42 Public bodies](#).

²²⁹ For example, the [Criminal Justice \(Withholding of Information on Offences against Children and Vulnerable Persons\) Act 2012](#); The offence of Coercive Control under the [Domestic Violence Act, 2018](#); Ratification of the [Council of Europe Convention on preventing and combating violence against women and domestic violence \('Istanbul Convention'\)](#), the [C190 - Violence and Harassment Convention, 2019 \(No. 190\)](#) publication of the Third National Strategy on Domestic, Sexual and Gender-Based Violence. Department of Justice, Home Affairs and Migration, Third National Strategy on Domestic, Sexual and Gender-Based Violence (2022).

²³⁰ Safeguarding Ireland, [Submission on Draft Initial State Report Under the United Nations Convention on the Rights of People with Disabilities](#) (2021) as cited in Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 71. Research demonstrates that 40% of disabled female higher education students report experiences of rape (compared with 27% of non-disabled students) [Dáil Éireann debate - Wednesday, 3 Oct 2018](#). See also CSO, [Sexual Violence Survey 2022 – Main Results](#) (2023) and Department of Justice, [A Study on Familicide & Domestic and Family Violence Death Reviews](#) (2023) p. 69. We have raised concerns about the mandate designated to Cuan, the statutory DSGBV agency, established in 2024, and have concerns about its lack of a policy function and related ability to independently monitor implementation and critically evaluate the State's performance. Other key concerns raised include a lack of regard to the PSEHRD in its functions. See, IHREC, [Submission on the General Scheme of the Domestic, Sexual and Gender-Based Violence Agency Bill](#) (2023). IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women](#) (2025) p.84. See [Department of Justice – Cuan](#).

survivors of DSGBV, including in relation to accessibility.²³¹ There is a lack of accessible refuge accommodation available in the state.²³² Particular attention should be paid to responding to the specific needs of disabled people.²³³ We note the multiple challenges experienced by disabled women and girls engaging with the justice system.²³⁴

Exploitation

Disabled people face a heightened risk of human trafficking.²³⁵ In our role as National Rapporteur on the Trafficking of Human Beings, we are aware of cases of disabled victims of human trafficking.²³⁶ We note that the Amended EU Anti-Trafficking Directive 2024²³⁷ includes strengthened obligations on Ireland regarding disabled people and trafficking.²³⁸

²³¹ IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women](#) (2025) p. 84. Issues with specialist supports were also raised in consultation with CSOs including the particular experiences of disabled women, including Deaf women and the availability of ISL interpreters.

²³² We note that DSGBV is a leading cause of homelessness and the proposed increases in provision of refuge spaces will not meet need. The Programme for Governments commits to deliver 280 refuge spaces by 2026. Government of Ireland, [Programme for Government 2025: Securing Ireland's Future](#) (2025) p. 120. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) pp. 70 -71.

²³³ Disabled women have expressed concerns with the definition of coercive control in the *Domestic Violence Act 2018*, which does not cover coercive and controlling behaviour that disabled women experience from carers, relatives and friends exploiting the vulnerability of the disabled person; Disabled Women's Group, [Submission to the Third National Strategy on Domestic, Sexual and Gender Based Violence](#) (2022) p. 14.

²³⁴ Charles O' Mahony, [Access to Justice: A Baseline Study of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 58; 183; 185; 191.

²³⁵ CEDAW General Recommendation No. 38 (2020) on trafficking in women and girls in the context of global migration makes specific references to trafficking of women and girls with disabilities. Organisation for Security and Co-operation in Europe, [Invisible Victims: The Nexus Between Disabilities and Trafficking in Human Beings](#) (2024) p.22.

²³⁶ We are aware of cases involving people with visual impairment, physical impairment, cognitive and learning impairments. We note information provided to us by service providers indicating prevalence of cases involving cognitive and learning impairments. We note that recent reporting on the nexus of homelessness and victims of trafficking included reports of interlocutors who have worked with victims of trafficking with a learning disability and with an acquired brain injury, The Passage and Depaul, [An Overview of Homelessness and Human Trafficking in Dublin](#) (2024). IHREC, [Trafficking in Human Beings in Ireland – Third Evaluation of the Implementation of the EU Anti-Trafficking Directive \(2024\)](#).

²³⁷ The Directive must be transposed into national law by July 2026.

²³⁸ Recital 17 notes that 'Persons with disabilities, in particular women and children, are at an increased risk of becoming victims of trafficking. Member States should consider the specific needs of victims of trafficking with disabilities when providing them with support measures.' [Directive \(EU\) 2024/1712 of the European Parliament and of the Council of 13 June 2024 amending Directive 2011/36/EU on preventing and combating trafficking in human beings and protecting its victims](#).

Hate crimes

We are concerned that the prevalence of hate crimes²³⁹ perpetrated against disabled people remains widely hidden and misunderstood,²⁴⁰ and its impacts compounded by inaccessible judicial remedies. Disabled people face particular barriers to reporting hate crime.²⁴¹ Measures are required to ensure that there are no obstacles to investigating or prosecuting disability hate crime.²⁴²

The Committee should ask the State about:

The status of delivery of adequate and effective protection of safeguards legislation and whether policy is accompanied with continuous education and training for staff and residents about rights and abuse recognition to ensure delivery of a rights-based, service-user led approach to adult safeguarding.

Measures to ensure that reports of abuse of disabled children and adults in the health, social and care systems are adequately and effectively investigated, and that children and adults are supported in making complaints, are provided with independent advocacy, legal

²³⁹ ODIHR, [Factsheet: Disability Hate Crime](https://www.osce.org/odihr/hate_crime_factsheets) (2016) p. 3. In identifying indicators of disability hate crime, the Commission takes note of factsheets prepared by ODIHR on specific forms of hate crime. See https://www.osce.org/odihr/hate_crime_factsheets.

²⁴⁰ See FRA, [Crime, Safety and Victims' Rights](#) (2021) pp. 40; 56–57. See also European Disability Forum, [EDF Recommendations on EU initiatives on hate speech and hate crime](#) (April 2021) p. 3. ODIHR, [Factsheet: Disability Hate Crime](#) (2016) p. 2. European Network on Independent Living, [Disability Hate Crime: A Guide for Disabled People's Organisations, Law Enforcement Agencies, National Human Rights Institutions, Media and Other Stakeholders](#) (2014) p. 13. 'Mate Crime' is a particular feature of hate crime, as offenders befriend persons with disabilities so as to exploit and take advantage of them.

²⁴¹ ODIHR, [Factsheet: Disability Hate Crime](#) (2016) p. 3.

²⁴² Failing to recognise within the criminal justice system that there are offences perpetrated against persons with disabilities which are motivated by prejudice can create a culture of impunity for perpetrators and may lead to repeat victimisation EUFRA, [Equal protection for all victims of hate crime: The case of people with disabilities](#) (2015) p. 3. We emphasise the importance of training, raising awareness amongst the public, affected groups, the Garda Síochána, prosecutors and the judiciary of the forms of hate crime and how to recognise hate crime, suitable collection of data and the need for legislation that addresses disability hate crime. IHREC, [Submission on the General Scheme of the Criminal Justice \(Hate Crime\) Bill \(2022\)](#) pp. 21; 49-53. IHREC, [Ireland and the International Covenant on Civil and Political Rights Submission to the Human Rights Committee on Ireland's Fifth Periodic Report \(2022\)](#) p. 29. We urge implementation of the new [Criminal Justice \(Hate Offences\) Act 2024](#). We note the Government's commitment to reform the *Incitement to Hatred Act* and call for meaningful consultation and participation of disabled people in that process, in line with UNCRPD standards. Government of Ireland, [Programme for Government 2025: Securing Ireland's Future](#) (2025) p. 122.

representation, and any investigation conducted is in compliance with the human rights standards.

Measures to address the systemic factors enabling violence and neglect in institutional and community settings, including steps taken to ensure professional and organisational accountability, oversight and inter-agency coordination, and to address failures in the criminal justice system, inspection bodies and the care system.

Measures to ensure that disabled survivors of DSGBV have access to high-quality, accessible and survivor-centred services, supports and refuge spaces.

Measures to address the non-prosecution of offences involving victims who have intellectual disabilities.

Measures to prevent and prosecute hate crime and hate speech perpetrated against disabled people.

Article 17: Protecting the Integrity of the Person

There are reports of non-consensual use of psychiatric medication in MHEs, and significant delays legislative reform to improve safeguards.²⁴³ Non-consensual use of psychiatric medication in mental health services should be generally prohibited and only used in exceptional circumstances as a measure of last resort.²⁴⁴ We are concerned about practices regarding informing people on admission of their right to refuse treatment.²⁴⁵

We note the concerns expressed to us by CSOs that the ADMC Act²⁴⁶ limits the autonomy and decision making of pregnant women.²⁴⁷ The lack of a criminal offence of forced sterilisation impacts the human rights protection of disabled people.²⁴⁸

²⁴³ See Article 14 – Liberty and Security of the Person and Article 25 – Health. Urgent action is required to reform legislation in line with international standards, including the *Mental Health Bill 2024*. We have previously recommended that reform of mental health legislation is accompanied by other measures to ensure less restrictive forms of treatment in the community are available, with the aim of eradicating coercive treatment of persons with psychosocial disabilities. We have also recommended that reform of mental health law must be accompanied by a suite of measures – including strategies, action plans, rules and codes of practice – aimed at ensuring less restrictive forms of treatment in the community are available and the ultimate eradication of coercion in the treatment of people with psychosocial disabilities. IHREC, [Ireland and the International Covenant on Civil and Political Rights](#) (2022) pp. 63-64. Following review of the *Mental Health Act 2001* in 2015, the Draft Heads of Bill for the *Mental Health (Amendment) Bill* were published in 2021, while the Pre-Legislative Scrutiny Report was published in October 2022. In September 2024, the Government published the Mental Health Bill, which is currently before the Houses of the Oireachtas. [Mental Health Bill 2024](#).

²⁴⁴ And electroshock, and other restrictive and coercive practices. Human Rights Committee, [Concluding Observations on the Fourth Periodic Report](#) (2014) para. 12. See Article 15 - Freedom of Torture, Cruel, Inhuman or Degrading Treatment or Punishment.

²⁴⁵ The European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) noted that several persons stated that they: ‘consented to treatment, even though they did not want it, either because they did not think they could refuse, or because they did not wish to be forcibly medicated.’ CPT, [Report to the Government of Ireland on the visit to Ireland from 23 September to 4 October 2019](#) (2020) p. 63.

²⁴⁶ See Article 12 for discussion about the enactment, application and concerns regarding the *Assisted Decision-Making (Capacity) (Amendment) Act (2022)*.

²⁴⁷ IHREC held a hybrid consultation with DPOs on Friday 09 May 2025, specifically for this submission, with representation from 12 Irish DPOs. In our engagements with CSOs, concerns were raised regarding the treatment of pregnant people and new parents with psychosocial disabilities including in relation to decision-making on the care received. There is a concern that inpatient mental health care operates in such a way as to unreasonably separate new mothers from their children. Disabled Women Ireland, [Submission to the Public Consultation on the Review of the Mental Health Act 2001](#) (2021) p. 5. [Assisted Decision-Making \(Capacity\) \(Amendment\) Act 2022](#): ‘Validity and applicability of advance healthcare directive’ 85(6)(a) and 85(6)(b).

²⁴⁸ The Commission previously addressed the grave and complex issues raised by the sterilisation of people with intellectual disabilities in submissions made to the European Court of Human Rights on behalf of the European

We note disturbing reports regarding non-compliance of nursing homes in relation to residents' rights, including residents not being involved in decisions about their care and support.²⁴⁹ There is a clear need for robust protection mechanisms²⁵⁰ and effective and independent oversight of MHEs, and healthcare and residential settings.²⁵¹

The Commission invites the Committee to ask the State about:

Measures, including standards, guidelines and tools, to ensure that people admitted to mental health establishments are informed of their right to decline treatment.

Measures to ensure that people subject to restrictive practices have access to independent advocacy, legal advice and representation and accessible information about their rights.

A timeline for when they will enact legislation to criminalise forced sterilisation.

Group of National Human Rights Institutions in *Gauer & Ors v France*: The European Group of National Human Rights Institutions, [Written comments by the European group of National Human Rights Institutions pursuant to Article 36 § 2 of the European Convention on Human Rights and Rule 44 § 3 of the Rules of the European Court of Human Rights \(2011\)](#). The Group of Experts on Action against Violence against Women and Domestic Violence has reported cases in which decisions are made on reproductive rights, including forced sterilisation, under the Wardship system without due consideration of the woman's free and informed consent and without an oversight system. Group of Experts on Action against Violence against Women and Domestic Violence (GREVIO), (Baseline) [Evaluation Report on legislative and other measures giving effect to the provisions of the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence](#) (Istanbul Convention) Ireland (2023) paras. 7; 222. Our DAC has raised concerns of the coercion of disabled women to sterilisation and forced contraception. IHREC, [Disability Advisory Committee](#). CSOs have also expressed concern that there are higher rates of sterilisation, and forced abortion among disabled women and girls, as reported by Re(al) Productive Justice Project findings. University of Galway, [Re\(al\) Productive Justice: Gender and Disability Perspectives](#) (2019-2023).

²⁴⁹ 17% of centres were non-compliant with the regulations on residents' rights; 33% were non-compliant with the regulations on governance and management; and 33% were non-compliant with fire precautions. HIQA, [Overview Report: Monitoring and Regulation of Older Persons Services in 2022](#) (2023) pp. 4-5; 23. IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 55

²⁵⁰ See article 14, footnote 176 for discussion regarding the development of Protection of Liberty Safeguards Legislation in 2025. Such has been the appalling delay in this legislation that IHREC made a submission to a previous consultation in 2018: IHREC, [Submission to the Public Consultation on Deprivation of Liberty: Safeguard Proposals](#) (2018). The proposed *Adult Safeguarding Bill 2024* should align with forthcoming legislation on the protection of liberty and mental health reform.

²⁵¹ See Article 16.

Article 18: Liberty of movement and Nationality

The ongoing failure of the State to ratify the OPCAT²⁵² is of particular concern in the context of the EU Pact on Migration and Asylum which provides for an expansion of immigration detention.²⁵³ We are concerned about the impact of new procedures on structurally vulnerable groups, including disabled people,²⁵⁴ compounding concerns regarding ableism and adjudication of international protection decisions.²⁵⁵

The Direct Provision system is in crisis and accommodation standards continue to deteriorate.²⁵⁶ We are concerned about the detrimental impact of the State's accommodation provision and approach to vulnerability assessments on disabled applicants.²⁵⁷

²⁵² See Article 14 – Liberty and Security of the Person and Article 15 – Freedom of Torture, Cruel, Inhuman or Degrading Treatment.

²⁵³ [General Scheme of the International Protection Bill 2025](#) (April 2025).

²⁵⁴ We are concerned about the proposed reduction in safeguards for people seeking protection, and the significant expansion of immigration detention through the new 'accelerated border procedure'. These new procedures are likely to have a significant impact on children and families, victims of human trafficking, as well as the right to access legal advice and representation. The permissibility in Irish law to place women immigration detainees within the general population in prisons and Garda stations remains a concern. See IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) pp. 21 -22.

²⁵⁵ We note CSOs concerns regarding the double impacts of ableism when combined with other stereotypes on the adjudication of applications for international protection, whereby disabled people, may encounter disbelief regarding their impairment. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs.

²⁵⁶ The Irish State provides accommodation to applicants for international protection through a Direct Provision accommodation system. An Advisory Group established in 2019, chaired by Dr Catherine Day, reported with recommendations on a long-term approach to provision of such accommodation, which has not yet been actioned. In relation to the current context, as noted by the Ombudsman for Children, 'An overreliance on the private, commercial sector accommodation has led to system failures on practical, economic and legal grounds:' Ombudsman for Children's Office, [Safety & Welfare of Children in Direct Provision](#) (2023) p. 6.

²⁵⁷ The State has a legal obligation under the Reception Conditions Directive to undertake a vulnerability assessment of applicants for international protection who have a special reception need. This includes applicants with a disability. Vulnerability assessments consider the suitability of accommodation provision to applicants and provision of appropriate supports and makes relevant recommendations. Vulnerability assessments were suspended by the relevant Irish State department in March 2024. They recommenced in November 2024 only for families applying for international protection and still do not remain in place for other categories of applicants. International Protection Accommodation Service, [Support Services](#) (December 2024). The Commission brought legal proceedings in its own name in December 2023 to challenge the State's failure to provide accommodation to single male applicants for international protection from December 2023, and in that case the judge cited evidence before the Court from applicants who could not access medical treatment for

We note that independent inspections and national standards only apply to some centres, resulting in an oversight gap for emergency and transit accommodation.²⁵⁸ Safeguarding concerns have been documented where inspections have taken place.²⁵⁹ We reiterate that accommodation centres for international protection and temporary protection applicants be considered places of potential de facto detention and appropriate monitoring mechanisms applied.²⁶⁰

The Committee should ask the State about:

How the State will ensure that legislative measures transposing the EU Pact on Migration and Asylum embed adequate safeguards for disabled people seeking international protection and do not expand the use of immigration detention.

Measures to ensure that adequate accommodation is available to disabled applicants for international protection and temporary protection and that they are able to access appropriate supports from the date of their application.

Measures to reinstate vulnerability assessments for all applicants for international protection with special reception needs, including applicants with a disability, and measures to ensure recommendations arising from such assessments can be actioned.

health conditions and who were street homeless and destitute. IHREC, [Commission Welcomes Significant Judgment on the Human Rights of International Protection Applicants in Landmark Case](#) (1 August 2024). [Irish Human Rights and Equality Commission v Minister for Children, Equality, Disability, Integration and Youth and Others](#) [2024] IEHC 493. The State appealed the judgment, and the decision of the Court of Appeal remains pending at time of writing.

²⁵⁸ Children's Rights Alliance, [Report Card 2024](#) (2024) p. 207.

²⁵⁹ HIQA, [HIQA publishes First Inspection Reports on International Protection Accommodation Service Centres](#) (2014). The full reports are available here: [HIQA Inspection Reports](#).

²⁶⁰ This recommendation was supported by a Parliamentary Committee on Justice. Joint Committee on Justice, [Report on Pre-Legislative Scrutiny of the General Scheme of the Inspection of Places of Detention Bill 2022](#) (2023) p. 8. See also a recent report by the Civil Liberties Union for Europe, which recommended that the State 'amend the *Inspection of Places of Detention Bill*...to ensure that direct provision centres and other congregated settings are subject to independent human rights focused inspections: Civil Liberties Union for Europe, [Liberties Rule of Law Report 2024](#) (2024) p. 378. Also see IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024) p. 57.

Article 19: Living Independently and being Included in the Community

Disabled people encounter challenges in realising their right to independent living and participation in their communities, due to a profoundly deficient system of personal assistance ('PA'), underpinned by an absence of a legislative framework for the grant of PA services,²⁶¹ insufficient budgetary allocations,²⁶² insufficient coordination resulting in anomalies across the life cycle,²⁶³ and a chronic lack of housing.²⁶⁴ Causal factors include

²⁶¹ In 2023, the HSE reported the delivery of 1.69 million PA hours to adults with a physical and/or sensory disability. This fell slightly short of the expected national service plan delivery of 1.77 million hours. Department of Health, [Disability Capacity Review to 2032- A Review of Social Care Demand and Capacity Requirements to 2032](#), (2021) p. 120. Disability Federation of Ireland, [Personal Assistance Services: Position Paper](#) (2024) p. 6. See also: IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024) p. 120. Compounding the absence of a statutory right to PA, PA is often conflated with long-term care, which contributes to the conceptualisation of disabled women as passive recipients of care rather than as autonomous individuals exercising their right to make independent choices. IHREC, [Policy Statement on Care](#) (2023) pp. 14-15. Due to the absence of adequate PA services, many disabled people must accept this ableist framing and access care support instead.

²⁶² IHREC's [Disability Advisory Committee \('DAC'\)](#) has expressed concerns regarding the 'charity model' associated with personal assistance, and the need for an attitudinal shift towards a rights-based approach, and this has been echoed by CSOs. Independent Living Movement Ireland, [A Manifesto for Change: Disabled People Taking Control of State Funded Disability Services](#) (2024). Budgetary allocations should include ring-fenced funding for assistive technology. National Women's Council, [What Disabled Women Want for 2022](#) (2021) p. 2. We note the commitment in the Government's Action Plan for Disability Services 2024-2026 to deliver 800,000 extra PA hours to address the shortfall in services and to support people with disabilities to live a fuller, more independent life and participate in normal activities in the community, in line with Article 19 of the UNCRPD and to undertake a review of policy, eligibility criteria and regulation of PA services (p. 8). It is important to note that this increase followed a decade with no increases in funding, there is high unmet need for PA services, and therefore a baseline of unmet needs. Department of Children, [Disability and Equality, Action Plan for Disability Services 2024 – 2026](#) (2023). Disability Federation of Ireland, [Personal Assistance Services: Position Paper](#) (2024) p. 13. The Irish Wheelchair Association estimates over 60% of individuals currently receiving PA services require significantly more hours than they are receiving. Irish Wheelchair Association, [Personal Assistance Services](#) (2023).

²⁶³ Stakeholders have advised us of significant difficulties in accessing services at transition points in their lives. For example, there is no right to a PA within older people's services, meaning that disabled people struggle to access services once they reach 65. Eamonn Carroll and Selina McCoy, [Personal Assistance Services in Ireland: A Capability Approach to Understanding the Lived Experience of Disabled People](#) (2022) *Disabilities* Vol 2, pp. 694–714. The State committed to publishing the next National Disability Strategy in 2024, promising "supports for disabled people in Ireland to live independent, autonomous lives of their own choosing." Committee on the Elimination of Discrimination against Women, [Eighth Periodic Report Submitted by Ireland under Article 18 of the Convention](#) (November 2024) para. 213.

²⁶⁴ Ireland's accommodation system is in crisis, starkly exemplified by ever-increasing homeless figures. There has been slow progress in improving accessibility, affordability and quality of housing. This results in serious deprivation for many, including structurally vulnerable groups. At the core of the housing shortage is a crisis of

inadequate funding/hours,²⁶⁵ eligibility criteria,²⁶⁶ data limitations, including to identify unmet need, retention and recruitment of staff,²⁶⁷ geographic variation in provision,²⁶⁸ compounding barriers related to intersecting impairments.²⁶⁹ We note concerns of CSOs regarding access to PA services in line with a person's own needs and preferences.²⁷⁰ We note that the quality and standardisation of PA services is not subject to a regulatory framework.²⁷¹

chronic undersupply linked to decades of inadequate futureproofing and planning and an over-reliance on the private market. For disabled people, there is a need for universally designed social, public and private housing. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights: Submission to the Committee on Economic, Social and Cultural Rights on Ireland's fourth periodic report](#) (2024) pp. 112-121. The National Housing Strategy for Disabled People 2022-2027 sets out the State's approach to meeting the housing and support needs of disabled people. The related implementation plan is stated to contain 107 actions with the Strategy and Implementation Plan operating under the framework of the national housing plan, Housing for All. Dáil written answers, [Housing Schemes](#) (20 March 2025). Department of Housing, Local Government and Heritage, [Housing for People with a Disability](#) (2020). Several actions related to improving housing supports and options for disabled people with date for completion of Q4 2021. Department of Housing, Local Government and Heritage, [Housing for All: A New Housing Plan for Ireland – Table for Actions \(2021\)](#). There does not appear to be a transparent and accessible reporting mechanism in respect of delivery of these actions and issues persist with availability of adequate housing for disabled people.

²⁶⁵ As reported to us in our engagements with CSOs; limited or no funding means that some disabled people must pay for their own personal assistant hours. PA services in Ireland are largely service led, and instead should be person-led.

²⁶⁶ PA services should follow a person through their life course. However, in Ireland, people lose their PA when they complete or leave education, for example, making access to employment particularly challenging. The siloes between PA services and other services compounds the challenges at these transitional points. Similarly, upon reaching 65 disabled people are transitioned to older persons services, and we have heard reports of the loss of appropriate services which are to be replaced with unsuitable homecare packages. Economic and Social Review, [Personal Assistance Services for Disabled People in Ireland: "They Meet the Criteria for Supports but we don't have the Resources to Provide the Services"](#) (2023) Vol. 54, No. 3 Autumn 2023, pp. 193-216, in Disability Federation of Ireland, [Personal Assistance Services: Position Paper](#) (2024) p. 20. In the absence of a national policy governing eligibility for, or allocation of supports such as personal services, in 2022 the Health Service Executive committed to developing a protocol for the eligibility and allocation of these services. HSE, [Correspondence from the HSE re the Personal Assistant Service \(24 February 2022\)](#).

²⁶⁷ In addition to noting the lack of resource packages for hiring PAs, the DAC also noted that PAs are widely underappreciated and remunerated, impacting supply of PAs. In our engagement with CSOs we heard calls for embedding employment security and improved conditions for PA, including appropriate remuneration.

²⁶⁸ As reported to us in our engagements with CSOs.

²⁶⁹ We have heard from CSOs that PA services that can communicate using sign language are virtually non-existent.

²⁷⁰ As reported to us in our engagements with CSOs "The element of choice is often removed, and that is what independent living is all about." Support to participate in life outside of the home is often limited. "Choice, autonomy, control and independence are the four key aspects of a personal assistance service,"

²⁷¹ "PA services lack the embedded structures, frameworks and policies that have developed in HSE residential, day and children's services, which have received greater policy focus over the past decades. In contrast to other areas of service provision, there is also a lack of dedicated, national staff in the HSE with a focus on PA to drive policy and oversee quality and standards for PA." Disability Federation of Ireland, [Personal Assistance Services:](#)

Any developments in this area must proactively involve service users and their representative organisations. A rights-based, person-centred approach to personal assistance is required, defined by choice, control, access and adequacy of provision.²⁷² Our DAC has emphasised the need to address the attitudinal barriers that limit support for the entitlement to personal assistance services²⁷³ and hamper the full resourcing of these services.

The ongoing housing crisis in Ireland has had severe consequences for the living standards of disabled people.²⁷⁴ Access to suitable social housing is severely limited²⁷⁵ and maintenance of existing stock is inadequate.²⁷⁶ Urgent action is required to improve accessibility, affordability and quality of housing for disabled people.²⁷⁷

[Position Paper](#) (2024) p. 21. We note the commitment of the Department of Health to introduce a regulatory framework for home support services through the *Health (Amendment) (Licensing of Professional Home Support Providers) Bill* in 2025. Houses of the Oireachtas, [Home Care Packages: Dáil Éireann Debate](#) (20 May 2025) following a public consultation process. Department of Health, [Draft Regulations for Providers of Home Support Services: An Overview of the Findings of the Department of Health's Public Consultation](#) (2023). While PA services are currently excluded from the draft regulations many providers operate both home care and PA services and therefore may be impacted by the regulations. Disability Federation of Ireland, [Personal Assistance Services: Position Paper](#) (2024) p. 19.

²⁷² PA services in Ireland are largely service led, and instead should be person-led.

²⁷³ It was noted by both the DAC and by CSOs, that independent living is “more than simply getting up and dressed, it is about living a meaningful, enriched and fulfilling life.” It was strongly emphasised that current personal assistance provision does not recognise this.

²⁷⁴ 93.3% (1,035,415) of all people with disabilities live in a private household and almost one in four adults aged over 25 living with their parents are disabled. For those with a psychosocial disability, the following barriers to adequate housing have been identified: insufficient supply of housing, lack of training and understanding for staff involved in provision of social housing supports, inflexibility of the social housing assessment process, and a lack of recognition of mental health needs in respect of emergency accommodation. Central Statistics Office, [Census 2022 – Profile 4 – Disability, Health and Carers \(2023\)](#). Mercy Law Resource Centre, [Mental Health and Social Housing Supports](#) (2024) pp. 22-24.

²⁷⁵ CSOs expressed concern regarding the long waiting lists for social housing. This coupled with waiting lists for supports such as PA is a serious barrier to people’s autonomy and choice to choose their place of residence. In addition to this, the statutory obligation for the provision of housing sits with each Local Authority, and inconsistency across authorities has been documented due to approach, population changes and assessment of need. The report also noted that the number of disabled applications has been rising year on year. Disability Federation of Ireland, [The Right Home: the Housing Needs of People with Disabilities](#) (2022) p. 40.

²⁷⁶ The European Committee of Social Rights has repeatedly issued findings of non-compliance with Article 16 of the Revised Charter due to State failures in the provision of social housing.” IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024) pp. 114-116.

²⁷⁷ We note the publication of the Government’s housing strategy in 2022, and the implementation plan, published in 2023. Government of Ireland, [National Housing Strategy for Disabled People 2022 – 2027](#) (2022). Government of Ireland, [National Housing Strategy for Disabled People 2022-2027 Implementation Plan](#) (2023). Our DAC has expressed concern regarding availability of suitable accommodation for disabled Travellers, including children.

Financial supports for disabled people are insufficient and efforts at social protection reform have not adequately involved disabled people.²⁷⁸ A Personalised Budget Pilot was established by the Minister of State with responsibility for Disability in 2021²⁷⁹ but issues with access arose.²⁸⁰ We urge immediate publication of the review of the pilot and for plans to be developed and implemented to provide for personalised budgeting.²⁸¹

CSOs raised concerns that means-tested disability payments can lead to people losing their access to an independent income if partnered, and a loss of independence.²⁸² We noted reports of the invasive impact of repeated assessments to qualify for disability supports that may be unnecessary in the context of a long-term condition.²⁸³

²⁷⁸ See article 28. In September 2023, the Government published a consultation paper on disability reform, which was heavily criticised by CSOs. Department of Social Protection, [Green Paper on Disability Reform: A Public Consultation to Reform Disability Payments in Ireland](#) (2023). Independent Living Movement Ireland, [ILMI Summary of the Green Paper on DA Consultations](#) (2023). IHREC, [Letter to the Minister for Social Protection regarding the Green Paper on Disability Reform – A Public Consultation to Reform Disability Payments in Ireland](#) (2024).

²⁷⁹ Department of Health, [Minister Rabbitte Announces Extension to Personalised Budget Pilot until 2023 \(2022\)](#). There were efforts by parliamentarians to progress matters through legislation: as of February 2025, the [Disability \(personalised budgets\) Bill 2024](#), a private members Bill, was before Seanad Éireann, Second Stage. A private members Bill is a new law, or amendment to existing law, introduced by a member of the Dáil or Seanad. Houses of the Oireachtas, [How Laws are Made](#) (2023)

²⁸⁰ In our engagement with CSOs, we heard reports regarding limiting entitlement criteria for personalised budgets (for example, an individual needs to already have been funded under a HSE funding stream to be entitled to these Personal Budgets, and for those that did have a HSE Funding stream, a disability service provider must agree to unbundle those hours/funds). We note reported delays with the processing of budgets, including for people at transitional points such as school leavers, challenges encountered with unwilling disability service providers, the requirement to hold an insurance to be eligible (and its cost implications), and accessibility of the application process. Independent Living Movement Ireland, [ILMI Position Paper on the HSE Personalised Budgets Demonstration Models](#) (2021). Notwithstanding the challenges, CSO engagements suggest the approach has merit, if properly implemented.

²⁸¹ We note that in February 2025, the Minister for State with responsibility for disability confirmed that an evaluation of this pilot would commence ‘shortly’. Houses of the Oireachtas, [Dáil Éireann Debate - Departmental Programmes](#) (25 February 2025).

²⁸² In our engagement with CSOs, the gendered aspects of this were raised. Evidence shows that for disabled women experiencing gender-based violence in domestic settings, dependence on the perpetrator for movement, personal assistance and economic support often prevents them seeking safety or redress. Women’s Aid, [Disabled Women’s Experiences of Intimate Partner Abuse in Ireland: Research Project Report](#) (2024).

²⁸³ In our engagement with CSOs, this was characterised as creating fear regarding potential loss of supports, including payments, medical card or otherwise. The experience of people with multiple impairments in navigating the system was described as particularly complex, with people “falling deeper in the cracks because the organisation only allows for one impairment or another”.

Related to this, disabled people face systematic barriers in accessing their own finances, due to inaccessible systems and attitudinal barriers.²⁸⁴ A shift in narrative towards making financial services accessible is urgently required, supported by awareness raising initiatives that empower disabled people²⁸⁵ and that inform financial institutions.

There continue to be significant levels of institutionalisation²⁸⁶ and systemic failings of institutions providing educational, health and social care services to disabled people in their communities.²⁸⁷ In July 2024, 1,200 people under the age of 65 remained inappropriately housed in nursing homes, showing a complete failure to meaningfully address this persisting issue.²⁸⁸ Provision of support packages in the community and adequate and sustained

²⁸⁴ The findings detailed throughout reveal that discrimination on the grounds of disability is a concern in current banking practice and that people with disabilities face multiple obstacles with basic banking tasks that often prevent them from exercising their autonomy to manage their own finances. National Advocacy Service, [Shortchanged: Barriers to Financial Autonomy for People with Disabilities in Ireland](#) (2024). In our engagements with CSOs, we have heard reports of denial of bank accounts to disabled people, by institutions (somethings due to misjudged concerns regarding vulnerability and safeguarding) or by their family members. CSOs noted that banking institutes have supports for “vulnerable customers” instead of disabled customers. There needs to be disability awareness and practical skills training for both disabled people and service providers. Furthermore, our DAC has expressed concern regarding the relationship between financial dependence and violence and coercion, and the denial of disabled people access to their social protection payments by a family member/partner. We note also the importance of financial literacy and the increasing digitisation of services. National Adult Literacy Agency, [Financial Literacy in Ireland](#) (2022).

²⁸⁵ For example, regarding financial literacy and financial autonomy.

²⁸⁶ IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024) pp. 120-121.

Further to the groups discussed below, we note that children in care may be subject to institutionalisation in private care centres due to a lack of Tusla-operated group homes and foster care settings. These institutions are not subject to independent oversight. Empowering People in Care, [Pre-Budget Submission 2024](#) (2023) p. 7.

²⁸⁷ Our engagements with key stakeholder groups have highlighted significant difficulties in accessing services at transition points in the lives of disabled people, including transitioning from child to adult disability services; from college into employment; from one Community Health Organisation to another; and disability services to older people’s services at the age of 65. IHREC, [Policy Statement on Care](#) (2023) p. 64; Irish Wheelchair Association, [Social Housing](#). Our DAC has raised significant concerns regarding insufficient provisions of ISL interpretation, limiting the ability of deaf people to access public services, and have linked inability to access services with increased risks of domestic and gender-based violence.

²⁸⁸ In 2021, 1,300 people under 65 were accommodated in nursing homes. Ombudsman, [Wasted Lives: Time for a Better Future for Younger People in Nursing Homes](#) (2021) p. 4. In 2024, 1,200 were affected. Ombudsman, [Ombudsman Update on ‘Wasted Lives’ Ombudsman’s update following receipt of the HSE’s ‘Recommendations Implementation Progress Update’](#) (2024). While the Ombudsman acknowledged positive pilot efforts by authorities, including for example a case management approach, he found that overall progress was slow, and called for adequate funding to be made available for people under 65 in nursing homes “to allow them to live as actively and independently as possible, and to enable those who wish to move to a more appropriate setting, be that home or elsewhere, to do so as quickly as possible.”

funding and coordination, including through appropriate case management, is required to unlock this issue.²⁸⁹

While acknowledging that communal settings can be appropriate in some specific cases, we are concerned that inadequate housing provision and financial supports combined with critically poor service provision restricts any real choice for disabled people.²⁹⁰ In turn, the ongoing lack of housing options and limitations on supports risks tacitly endorsing a de facto policy of institutionalisation.²⁹¹

The closure of institutional settings alone is insufficient in supporting independent living. Communities and public services must also be accessible.²⁹² Further to this, we note the importance of the embedding the principles of universal design including through procurement processes.²⁹³ We are concerned by reports about lack of engagement of Local

²⁸⁹ The HSE sets annual targets for the number of people to be transitioned into the community. In our engagement with CSOs, we have heard frustration regarding the lack of social care workers and PAs to support people in the community; without these services, people who need support are being left without any autonomy or choice to decide where to live. The lack of the essential services is stripping people of their right to live independently in the community. Failure to proactively engage with projects aimed at developing inclusive community living Local Authorities is not in keeping with the statutory obligation to have regard to the need to promote equality of opportunity under [Section 42\(1\) of the IHREC Act](#).

²⁹⁰ In our engagements with CSOs, concerns were raised regarding provision of information about entitlements and available services, with disabled people reporting a complex and often confusing system or system. There was a call for a simplified overview information sheet for every individual entering the Disability Allowance of Invalidity Allowance scheme settings out what they are entitled to and how they can access it.

²⁹¹ In our engagement with CSOs, we heard frequent concerns regarding the lack of choice and housing options for disabled people, which resulted in institutionalisation in, for example, nursing homes, being the only available option. It is important to note that through our DAC, the view has been expressed that an unintended consequence or misinterpretation of independent living is the presumption that all disabled people's preference is to live in individualised households and never communally. Independent living should adhere to the principle of self-determination including an individual's preference to live in individual and family households and / or communally at different stages of their lives. However, we are concerned that inadequate housing provision and financial supports combined with critically poor service provision can remove choice and perpetuate the culture of housing disabled people in institutionalised settings.

²⁹² We also note that in the case of providing accessible services, that the PSEHRD offers a pathway to a new model of community living, including through its incorporation into public procurement processes see IHREC, [Policy Statement on Care](#) (2023).

²⁹³ We note that the principles of universal design, community living, and participation are embedded, including through procurement processes, in the development of new facilities, products, technologies and services and in the removal of existing barriers to independent living. [IHREC, Policy Statement on Care](#) (2023) p.38.

Authorities with the former National Disability Inclusion Strategy with regard to planned pilot projects to support inclusive community living.²⁹⁴

The Committee should ask the State about:

Measures to actively support and resource disabled people to live independently, including its plans to provide adequate financial supports, a legal right to personal assistance, and flexible services across the life cycle.

Measures to provide a rights-based, person-centred, approach to personal assistance, defined by choice, control, access and adequacy of provision.

Measures to address accessibility, affordability and quality of housing for disabled people and report on progress under existing strategies to ensure that a range of suitable public and private housing options are available.

Plans to publish a review of the Personalised Budget Pilot, and implement further rollout of an accessible, rights-based, person-centred scheme.

Measures to transition disabled people from inappropriate institutional settings, including nursing homes, by providing adequate funding and coordination, including through a case management system.

²⁹⁴ We note the Committee's observation that the European Social Fund has the potential to be used to develop social infrastructure that could support community-based services but has been completely underutilised. We note that previously planned pilot projects for Local Area Coordination which are to support inclusive living in communities did not go ahead. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) pp. 90; 92.

Article 20: Personal Mobility

Particularly within rural and disadvantaged areas, a disabled persons' ability to travel to access education, employment, services or to participate in community life is severely impacted by insufficient and inaccessible public transport.²⁹⁵ We support calls by CSOs for a national set of standards to ensure that proposed changes to improve the environments of cities and towns reflect minimum accessibility standards.²⁹⁶

Provision of public transport varies regionally, and we note extensions to free travel schemes for all disabled people.²⁹⁷ Personal mobility is hampered by inadequate provision of correct mobility aids and accessible vehicles.²⁹⁸

The Commission recommends that the Committee asks the State about measures in place to ensure that plans regarding public transport infrastructure, including streetscapes and

²⁹⁵ See also Articles 9 – Accessibility and Article 19 – Independent Living. Independent Living Movement Ireland has highlighted the impact of local initiatives which negatively impacted disabled people and their ability to live independently within the community, referencing for example: erosion of disabled parking spaces, use of pavements for public dining making them impassable for some disabled people, and the promotion of “floating” bus stops which impede disabled people and people with limited mobility in safely accessing public transport. We note the interrelationship between personal mobility and independent living, with accessible and reliable transport an essential aspect of independent living and participation in community life. We note the guidance from DPO/DPROs in this regard, for example, Voice of Vision Impairment guidance. Independent Living Movement, [ILMI Open Letter Sustainable Inclusive Towns and Cities](#) (2022). RTE, [Visually-impaired Man Wins Discrimination Case Against Bus Éireann](#) (June 2024). Voice of Vision Impairment, [Access All Areas: no Disability Exclusion Zones](#) (2025); Voice of Vision Impairment, [Public Transport](#) (2025).

²⁹⁶ Independent Living Movement Ireland, [Sustainable Inclusive Towns and Cities](#) (2022). IHREC, [Public Sector Equality and Human Rights Duty](#).

²⁹⁷ In our engagements with CSOs, we have heard reports of regional variations in transport services. CSOs also raised concerns about access to free travel being revoked when a disabled person gains employment. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. We welcomed the announcement that from 2025, the free travel scheme was being extended to persons who have never been medically fit to drive due to disability and persons who are certified medically unfit to drive for a period exceeding one year. Government of Ireland, [Free Travel Scheme](#) (2019)

²⁹⁸ In our engagements with CSOs, we have heard that providers of mobility aids are often limited by the parameters of the available funding and often do not take the individuals needs and preferences into account. CSOs noted that most Personal Assistance Services (‘PAS’) providers often do not have access to accessible vehicles. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs.

accessible transport in rural areas, decarbonisation of cities and towns and promoting of shared spaces are informed by and developed in consultation with disabled people.

Article 21: Freedom of Expression and Opinion, and Access to Information

In our engagements with CSOs and our DAC, we have heard concerns regarding the inability of disabled people to express their views in social, political and economic settings and to access information.²⁹⁹

As discussed, issues persist with accessible information provision.³⁰⁰ We welcome progress in web accessibility of public bodies but highlight considerable work outstanding.³⁰¹ In our engagements, concerns have been raised by DPO/DPROs regarding the inaccessibility of important consultation processes of public and private bodies and the lack of accessible information promoting and enabling engagement.³⁰²

As noted, there has not been full implementation of the ISL Act. Inadequate provision remains an issue³⁰³ with low awareness of the ISL Act among public bodies,³⁰⁴ subsequent

²⁹⁹ For example, we have heard reports of disabled people who use PAS being unable to participate in meetings or events of a political nature, due to a prohibition on personal assistants in attending such events during working hours. We note that the Joint Oireachtas Committee on Disability Matters concluded that no progress has been made in the State's implementation of Article 21. Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. IHREC, [Disability Advisory Committee](#). Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 86.

³⁰⁰ See Article 9 – Accessibility. Sage Advocacy, [Submission on Ireland Initial Report under the Convention on the Rights of Persons with Disabilities](#) (2011) p. 11.

³⁰¹ We note the guidance of the NDA (Ireland's National Monitoring Body for Ireland under EU Directive 2016/2102 on the accessibility of the websites and mobile applications of public sector bodies) in this regard, including considering accessibility at the earliest stage possible in design and development of websites, online content such as PDFs and mobile apps and provision of support, training and guidance. The National Disability Authority, [Summary of Ireland's Monitoring 2022-2024: EU Web Accessibility Directive](#) (2024).

³⁰² Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs.

³⁰³ We are aware of piloted actions taken during the Covid 19 pandemic which provided digital ISL services, reported to us as hugely successful, but discontinued. CSOs have noted to us their view that the State could make better use of available technology in the provision of ISL. Concerns were also raised with us regarding the absence of a complaint's mechanism in relation to ISL services. [Irish Sign Language Act 2017](#). See Article 9 - Accessibility.

³⁰⁴ While all public bodies are required under the *Disability Act 2005* to have designated access officers to provide, arrange and coordinate the provision of assistance and guidance to people with disabilities accessing their bodies services, research has found only two-thirds of access officers are aware of the *ISL Act* and little over one in five have completed Deaf Awareness Training. University College Cork, School of Applied Social Studies, [ISL HEALTH Research Report](#) (2023).

inadequate consideration of ISL users,³⁰⁵ geographical variation in ISL availability, and insufficient provision of interpreters³⁰⁶ funding and training.³⁰⁷ We note the concerns raised by CSOs regarding the long-term impact of inadequate ISL interpretation and ISL proficient teachers in school settings.³⁰⁸

We note the risks to disabled people in the use of AI such as discrimination, surveillance, and abuse if not properly regulated.³⁰⁹

The Committee should ask the State about measures to:

Identify and implement actions required to fully implement the Irish Sign Language Act 2017, to realise Irish Sign Language as a native language of the State, and to fulfil the rights of Deaf adults, children and children with Deaf parents or guardians.

Fund and enable regulatory bodies to promote and support disabled people to express their views in social, political and economic settings.

³⁰⁵ Research undertaken by University College Cork found that the HSE website is not optimal for ISL users. 31.6% of respondents indicated the HSE service they work for does not have an established policy for sign language interpreter provision, while 26.3% did not know. University College Cork, School of Applied Social Studies, [ISL HEALTH Research Report](#) (2023).

³⁰⁶ National Disability Authority, [Report on the Operation of the Irish Sign Language Act 2017](#) (2021) pp. 66-72. There are only 118 interpreters on the Register of ISL Interpreters, only 62 of which do it full-time. Register of Irish Sign Language Interpreters, [Survey of Registered Interpreters Actively Working](#) (2025). Recent evidence has indicated the ISL interpreter profession is not currently sustainable for reasons associated with financial insecurity and precarious working conditions. Isabell Heyerick, [The Sustainability of the Irish Sign Language Interpreting Profession: Research Report](#) (2025) pp. 21-27.

³⁰⁷ DPOs noted funding limitations and the prohibitive cost of courses to learn ISL as a major access barrier. The State must take action to enable Deaf persons to learn life and social development skills, to facilitate their full and equal participation in education, and to assist in promoting their linguistic identity as members of the Deaf community. The State must take action to deliver a clear strategy to educate and train Deaf people to become teachers, and to deliver education to children through ISL, as this is an essential step in providing strong linguistic environments for Deaf students and for enhancing their development. Irish Deaf Society, [Irish Deaf Society Education Policy Paper](#) (2022) p. 6.

³⁰⁸ Specifically for this submission, IHREC held an online consultation with CSOs on Tuesday 15 April 2025 and a hybrid consultation with DPOs on Friday 09 May 2025, with representation from 12 Irish DPOs. Concerns were raised regarding the impacts on Deaf children's ability to socialise, play and learning, and therefore to develop intellectually, socially and emotionally.

³⁰⁹ We welcome the recognition in the EU Artificial Intelligence Act of the need to ensure respect for privacy for disabled people and the important of the application of universal design principles to all new technologies ensuring full and equal access for everyone, including disabled people as set out in Recital 80. [EU Artificial Intelligence \(AI\) Act](#).

Ensure that in service provision agreements entered into by the State, disability services are obliged to support activities related to freedom of expression.

Resource EU Artificial Intelligence Act Article 77 bodies such as the Commission to effectively fulfil their roles to protect fundamental rights in the use of high-risk AI.

Article 22: Respect for Privacy

The rights of people in congregated and community settings are not respected. Disabled people are routinely required to provide large amounts of personal data to secure the services they require.³¹⁰ We note reports from residential and congregated settings that indicate a lack of privacy.³¹¹

Our DAC has expressed concern regarding routine lack of privacy and anonymity for disabled people in public settings and note that this can lead to feelings of vulnerability.³¹²

Disabled people and their families in some incidences take up public roles to address the failure by the State to meet their needs.³¹³ In our engagements with CSOs, disabled people have described feeling obliged to disregard their own privacy in service of their advocacy work, and to not only disclose their disability but to recount and publicise the hardships and indignities they face.³¹⁴

³¹⁰ The Joint Oireachtas Committee on Disability Matters concluded that no progress has been made in the implementation of Article 22 of the UNCRPD. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 88-89.

³¹¹ This includes inappropriate inclusion and interference in decision-making by relatives, private correspondence being read aloud, a lack of private space, and staff frequently failing to knock before entering a room. Sage Advocacy, [Submission on Ireland initial Report under the Convention on the Rights of Persons with Disabilities](#) (2021) p. 22-23; Health information and Quality Authority, [Resident Forums in Centres for People with Disabilities in 2022 and 2023](#) (2024) p. 11-12.

³¹² IHREC, [Disability Advisory Committee](#).

³¹³ See recent example of Cara Darmody, a 14-year-old child, who protested outside the Dáil for 50 hours in May 2025 to highlight the delays in access to assessments of need for disabled children, acting as a vocal advocate for her own family and families affected by delays. Dáil Debate, [Assessment of Need: Statements](#) (20 May 2025). See contribution of Ms Catherine Gallagher, on behalf of Independent Living Movement Ireland, before the Joint Oireachtas Committee on Autism. Dáil Éireann, Joint Committee on Autism, [Accessibility in the Built Environment, Information and Communication: Discussion](#) (2022) pp. 7-8; 19-20.

³¹⁴ The Joint Oireachtas Committee on Disability Matters called for “radical and systematic action is needed from the Government so that individuals, parents, and families do not have to fulfil the role of raising awareness and impact their dignity by sharing personal stories of a service that does not support their rights.” Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 89.

The Committee should ask the State what measures it is taking to ensure the privacy of disabled people is respected in congregated settings, community settings and public spaces, including accessible complaints mechanisms for privacy breaches in congregated settings.

Article 23: Respect for Home and the Family

State policies on care do not provide for intersecting identities, including as parents.³¹⁵

Concerns have been raised by CSOs about the limited access to education on consent, sex and healthy relationships for disabled people, particularly in ‘special schools’.³¹⁶ We note concerns regarding forced contraception and administration of contraception without consent.³¹⁷ Accessible family planning services and community-based supports ensure that disabled people and their families can enjoy a full home and family life within their communities.³¹⁸

The Committee should ask the State about:

The provision of accessible and comprehensive sex, relationship and consent education to all disabled youth.

The provision of accessible family planning services and community-based supports including geographical availability.

³¹⁵ Over 64% of mothers in Ireland are disabled women. In our engagement with DPOs, the following issues have been raised in respect of ableism and parenting: questioning of suitability, lack of tailored supports, intrusive assessments / monitoring regarding ability to parent. “The legal capacity of disabled women should be recognised on an equal basis with others, as well as their right to found a family and be provided with assistance to care for their children.” IHREC, [Policy Statement on Care](#) (2023) p. 27.

³¹⁶ ‘Special schools’ provide education to children and young people from age 4 to 18, employ both primary and post-primary teachers and support students through the delivery of primary and post-primary programmes. Most special schools have both primary and post-primary students enrolled. See Government of Ireland, [Webpage on Special Schools](#) (2023). Concern regarding the provision of sex education has been raised by CSOs, as an issue related to equal access to education, and a child safety concern. We note the State’s commitment to ensure ‘efficient delivery of the Social, Personal and Health Education and Relationship and Sexuality Education (SPHE/RSE) curricula’ and the consultation on the draft Wellbeing curriculum, including SPHE. See Government of Ireland, [Programme for Government 2025: Securing Ireland’s Future](#) (2025) p. 66. IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women](#) (2025) pp. 108-110.

³¹⁷ A discussion took place in a DAC meeting where members noted the practice of prescribing contraceptives to young disabled women without their knowledge or full consent. IHREC, [Disability Advisory Committee](#).

³¹⁸ The lack of accessible community-based services and supports is a direct barrier for ensuring that disabled people can be cared for within the community and with their families. For more on accessible services see Article 19 – Independent Living.

Article 24: Education

The provision of education for disabled people in Ireland is not UNCRPD compliant.³¹⁹

Educational outcomes for disabled people at all stages of education are substantially lower than for the rest of the population.³²⁰

Continued failure to commence the EPSEN Act has created significant barriers to an inclusive education for disabled children and adults³²¹ and provides authorities with an exemption to inclusive education.³²²

We note with concern the number of disabled children without school places and/or accessible transport³²³ and the extreme burden this placed on parents, guardians and disabled children.³²⁴ Notwithstanding welcome policy steps to address the provision of

³¹⁹ The Children's Rights Alliance releases an annual report card on the State's performance with regards the rights of children. The past year saw the State's grade under 'Constitutional Rights to Education for Children with Special Educational Needs' downgraded from a B to a C. Children's Rights Alliance, [Report Card 2025](#) (2025) pp. 84-120.

³²⁰ National Disability Authority, [NDA Factsheet – Disability Statistics](#) (2024). Table 4, based on 2022 Census data.

³²¹ It has been two decades since the Sections 3-13 of the [EPSEN Act 2004](#) provide a statutory entitlement to an education assessment, the creation of an Individual Education Plan ('IEP'), the provision of education supports set out in the IEP, a review of the IEP and an independent appeals process for the assessment and the IEP. These provisions have not been commenced causing disabled people to engage with the AON process provided by the *Disability Act 2005*. For more on the challenges of the AON process see Article 7 above and IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) pp. 46-47; 66-70.

³²² Section 2 of the *EPSEN Act 2004*. These provisions would appear to constitute exceptions not provided for in Article 24 and contradictory to the principles of non-discrimination and equal opportunity. IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#), (2023) pp. 34-38. A review of the *EPSEN Act* was commenced in 2021 and has yet to be published. Department of Education, [EPSEN Review Consultation](#) (2022). Children's Rights Alliance, [Report Card 2025](#) (2025) pp. 92-93.

³²³ Children's Rights Alliance, [Report Card 2025](#) (2025) p. 94. As of September 2024, there were 126 children with special educational needs ('SEN') reported as being unable to access a school place for the coming academic year. There are 163 children with SEN receiving home tuition as there was no place available and/or they were transitioning to an appropriate placement. We note the Government's recent announcement regarding "measures to support forward planning for special education provision for the 2026/2027 school year and beyond". Department of Education and Youth, [Minister McEntee and Minister of State Moynihan Announce New Measures to Support Forward Planning for Special Education Provision for the 2026/2027 School Year and Beyond](#) (2025).

³²⁴ Irish Independent, [Worry for Parents of Children with Special Needs Left Without School Places](#) (23 August 2024). "The sleepless nights, the constant worry, ever since Sean was diagnosed it's battle after battle. You

educational places for disabled children,³²⁵ we reiterate that increasing reliance on ‘special education’ is contrary to the principles of inclusive education.³²⁶

Provision of inclusive education is underpinned by lack of, and poor quality, data with regard to planning and monitoring of school places; quality of engagement with children and families;³²⁷ recruitment of allied health professionals;³²⁸ a flawed AON process;³²⁹ insufficient

battle for assessments of need, you battle for school places, you battle for domiciliary, everything is a fight, and it shouldn't be.” In our engagement with CSOs, we have heard reports of children being offered school places far from their home, taking them out of their communities and impacting on time available to play, participate in extra-curricular activities and participate in their communities outside of school hours. The failure to educate children locally is described by DPOs as an act of exclusion. We are concerned by reports provided to us through our CSO engagements that parents of disabled children face barriers to accessing information and support regarding accessing a school place, appeals process and rules regarding school governance.

³²⁵ In July 2022 the Government enacted the [Education \(Provision in respect of Children with Special Educational Needs\) Act 2022](#), which streamlined the process under which the Minister can direct a school to make additional provision for children with SEN and empowers the National Council for Special Education (NCSE) and Tusla to designate a school place for a child. In 2022, the National Council for Special Education (NCSE) Policy Advice on Special Schools and Classes was published, and commitments were reflected in Young Ireland, National Policy Framework for Children and Young People. A Cabinet Committee on Children, Education and Disability was established in 2024; in 2025, a Cabinet Committee on Children and Education remained in place and a new Cabinet Committee on Disability was established. Houses of the Oireachtas, [Dáil Parliamentary Questions - Cabinet Committees](#) (February 2025). We echo the Ombudsman for Children's welcoming of the prioritisation in Government of SENs, but note that despite such efforts, each successive September there remains a ‘scramble’ to find special school/class places for children with SEN, particularly at post-primary level. National Council for Special Education, [An Inclusive Education for an Inclusive Society](#) (2022). Department of Children, Disability and Equality, [National Policy Framework for Children and Young People 2023-2028](#) (2023). Ombudsman for Children, [Two Years On: Plan for Places Progress Update on Forward Planning for the Provision of Schools Places for Children with Special Educational Needs](#) (2024) p. 4.

³²⁶ UN Committee on the Rights of Persons with Disabilities, [General Comment No. 4 on the Right to Inclusive Education](#) (2016) CRPD/C/GC/4, paras. 13, 18-19, 40. UN Committee on the Rights of the Child and Committee on the Rights of Persons with Disabilities, [Joint Statement – the Rights of Children with Disabilities](#) (2022) para 9.

³²⁷ The Ombudsman for Children has noted that while engagement has improved, it “is still not as good as it could be and children with SEN continue to be excluded from decisions that concern them.” Ombudsman for Children, [Two Years On: Plan for Places Progress Update on Forward Planning for the Provision of Schools Places for Children with Special Educational Needs](#) (2024) pp. 4-5.

³²⁸ Including psychologists, occupational therapists, and speech and language therapists. Ombudsman for Children, [Two Years On: Plan for Places Progress Update on Forward Planning for the Provision of Schools Places for Children with Special Educational Needs](#) (2024) pp. 4-5. We welcome the pilot project to enhance in-school therapy schools for 16 schools, rolled out in 2024, and the real-time impact analysis being carried out by the National Disability Authority. Evidence generated though this pilot must be used to inform sustained and comprehensive services to disabled children. Department of Children, Disability and Equality, [Government Approves Pilot for Enhanced In-school Therapy Supports in 16 Special Schools Commencing in Dublin and Cork](#) (2024). NDA, [Review of the Children's Disability Network Team Service Model](#).

³²⁹ On 4 June 2025, the Supreme Court determined that pursuant to the *Disability Act 2005*, the HSE must comply with its obligations under the Act and recognise the legislature's intent to give enforceable rights to individuals. Those obligations involve setting out and implementing measurable actions in relation to delivery of services. [RY and ZR \(a minor suing by her mother and next friend RY\) and Disability Appeals Officer and the Health Service Executive \[2025\] IESC 26](#) (paragraph 99).

resourcing;³³⁰ inadequate supports for Deaf students;³³¹ inappropriate use of suspension, expulsion and reduced school days;³³² the failure to provide adequate reasonable accommodations in schools and in State examinations including assistive technology.³³³ We are concerned by the number of exclusionary admission policies identified in a recent Departmental review.³³⁴

³³⁰ IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) pp. 70-73. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 97. In engagement with CSOs, we have heard reports of provision of Special Needs Assistants (SNAs) in school settings without requisite training or skills. This includes SNAs with insufficient sign language skills to support Deaf children, or the creation of dependence on SNAs where children are not enabled to act independently in school. Insufficient provision of sign language interpretation is negatively impacting on educational outcomes for Deaf students, which in turn negatively impacts employment outcomes later in life.

³³¹ Our DAC has raised concerns around a lack of disabled teachers and the absence of spaces in school settings for disabled students to interact. In March 2022, a scheme was announced to provide in-school support for students who are Deaf and whose primary form of communication is ISL. We note the need for the State to provide sufficient training, resources and supply of sign language interpreters. We have recommended that an in-depth modelling study is essential to identify the training, resources and supports required to fully implement the *ISL Act* for Deaf students, and parents/ caregivers, which should then be published in a timely manner and in accessible formats. See IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) pp. 76-78. CSOs have highlighted access to the scheme relies on a medical model of disability and there are concerns about the extent to which the Deaf community were consulted during the development of the scheme. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 99. See also discussion in Article 7 (Children) and Article 21 (Freedom of Expression).

³³² Through the work of our DAC, we are concerned by reports of increased suspensions and expulsions in special schools and of withdrawal decisions being made in schools without knowledge of the student's disability. IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) pp. 78-80.

³³³ On 6 January 2025, the Commission using its legal powers under Section 32(1)(a) of the *IHREC Act 2014* invited the State Examinations Commission to carry out an equality review of its services and this has been accepted. This will involve auditing the level of equality of opportunity that exists for candidates with visual impairments, identifying current practices and procedures which negatively impact accessibility and outlining any recommendations or findings from the review. IHREC, [IHREC invites State Examinations Commission to undertake an Equality Review](#) (6 January 2025). IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) pp. 73-75.

³³⁴ A recent Department of Education review found that many schools with special classes have enrolment policies that exclude children with the greatest levels of need from accessing a place, by applying a distinction between 'mild' and 'moderate' learning difficulty, to the exclusion of some disabled children, particularly those with a severe condition. Department of Education, [Supporting all children and young people to access an appropriate education: A review of the admission policies of primary and post-primary special classes for autistic children and young people](#) (2025), p. 9-16. We note that the Government has asked school patron bodies to review admission policies for schools with special classes. Department of Education, [Minister McEntee requests patron bodies to review admission policies for schools with special classes for autistic children and young people](#) (8 May 2025). See also Down Syndrome Ireland, Research Report: Parent's

We note the considerable increase in the provision of ‘special classes’³³⁵ and are concerned at the express Government commitment to increasing the number of ‘special schools’ and classes across the country.³³⁶ The lack of a national plan for inclusive education is stated to have played a role in sustaining this increase.³³⁷ Access to education for disabled children is inconsistent across the State.³³⁸

Progress to date must be accelerated and include structural solutions and a coordinated approach, underpinned by forward planning and robust data, access to psychological assessments and therapeutic supports, investment in existing schools and teachers, and engagement with children, their parents and schools.³³⁹

Perceptions of their Children’s Education Journey (2024), p. 6. The review also found evidence of schools placing additional resource demands on parents and making enrolment contingent on such as well as indications that schools are misinterpreting their legal responsibilities and subsequently discriminating against children with the greatest level of need. We note that the solution to this is to amend school admissions policy, and not to source a school placement outside of a student’s local area. We note that inadequate resourcing can impact on decision-making by schools regarding admissions procedures. In our engagement with CSOs, we have heard of cases in which children scored lower than reflected their actual learning ability due to physical impairments affecting their motor skills.

³³⁵ The number of ‘special classes’ in Ireland has trended upwards. Last year saw a significant increase in new ‘special class’ places from 2,921 in 23/24 to 3,336 in 24/25. Children’s Rights Alliance, [Report Card 2025](#) (2025) p. 96. Committee on the Rights of the Child, [Concluding Observations on the combined 5th and 6th periodic reports of Ireland](#), (2023) CRC/C/IRL/CO/5-6, para 36(d), 37(c). We echo the CRC’s recommendation that the state ensure “inclusive education in early childhood education and mainstream schools for all children with disabilities by adapting curricula and training and assigning specialised teachers and professionals in integrated classes, so that children with disabilities and learning difficulties receive individual support and due attention and ensuring reasonable accommodation within the school infrastructure and for transportation”.

³³⁶ Government of Ireland, [Programme for Government 2025](#) (2025) p. 69. “This Government will: continue to increase the number of special schools and special classes across the country to ensure that children can go to school within their community.” Houses of the Oireachtas, [Special Educational Needs, Dáil Éireann Debate, Tuesday - 29 April 2025](#).

³³⁷ Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 96.

³³⁸ Ombudsman for Children, [Plan for Places: Forward Planning for the Provision of Schools Places for Children with Special Educational Needs: A Children’s Rights Issue](#) (2022) p. 6.

³³⁹ Ombudsman for Children, [Two Years On: Plan for Places Progress Update on Forward Planning for the Provision of Schools Places for Children with Special Educational Needs](#) (2024).

As discussed, concerns arise regarding use of seclusion and restraint in schools³⁴⁰ and note concerns regarding application of codes of behaviour for children in schools.³⁴¹

We are concerned about the use of ‘reduced timetable arrangements’ for disabled children³⁴² and reiterate that the root causes underpinning such use must be addressed, including through engagement with children and their families. Schools should be mandated to include disaggregated equality data when discharging their reporting duties.³⁴³

Effective transitions through education to training and to the labour market remain an issue for students with special educational needs (‘SEN’).³⁴⁴ Particular barriers arise for children with intellectual disabilities attending mainstream schools.³⁴⁵

³⁴⁰ See Article 15 Freedom from torture or cruel, inhuman, or degrading treatment or punishment.

³⁴¹ AslAm, [A Rights-based Analysis of School Codes of Behaviour in Ireland](#) (2024). The review found that where rights were mentioned in codes of behaviour, if at all, they focused on safety and access to the detriment of full rights entitlements, schools have a limited awareness of autism and often apply ableist assumptions. The perspective of Autistic students are not considered in the development or review of these codes and they often fail to provide reasonable accommodations resulting in exclusionary practices such as reduced timetables, suspensions and restraint.

³⁴² In September 2021, the Department of Education issued Reduced School Day Guidelines to all schools on the procedures to be followed when reduced school days (RSD) are put in place for students. These guidelines came into effect on 1 January 2022. The guidelines set out the process to be followed where the use of reduced school days is under consideration for a student. Department of Education, [Reduced School Days 2023/24 School Year](#) (2025). The application of these measures has been heavily criticised for effectively using punitive measures against children to respond to scenarios in which disabled children’s needs are not being met

³⁴³ IHREC, [Ireland and the Rights of the Child](#) (2022) p. 86.

³⁴⁴ Many students with SEN express dissatisfaction with how well their school prepared them for adult life, independent living and career decisions. Students with SEN are less likely to report being encouraged to pursue education or training and feeling supported in their decision. Selina McCoy, Keyu Ye and Eamonn Carroll, [Paths, Tracks, Gaps and Cliffs: The Post-School Transitions of Students with Special Education Needs](#) (2025) pp. 74-80. Having to reapply for supports at each stage of education is an additional burden. Trinity College Dublin, Vivian Rath and Patricia McCarthy, [Ableism in Academia in Ireland: Experiences of Disabled Academics and Recommendations for the Future](#) (2021) p. 12. IHREC has called for measures to address the administrative burdens faced by disabled students and their parents/caregivers having to apply for support at each stage of their education. IHREC, [Submission on the Review of the Education for Persons with Special Educational Needs \(‘EPSEN’\) Act 2004](#) (2023).

³⁴⁵ Des Aston, Joanne Banks and Michael Shevlin, [Post-School Transitions for Students with Intellectual Disabilities in the Republic of Ireland](#) (2021) p. 9. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 98.

The education gap between disabled people and those without a disability is persistently high, particular at post-graduate level.³⁴⁶ We note the differential experience of disabled students in higher education.³⁴⁷

We note challenges identified with delivery of early childhood education programmes to disabled children.³⁴⁸

The Committee should ask the State about:

Actions taken to address State failure to provide for an inclusive education for disabled children and adults through legislative reform, and the delay in publishing the review of and commencing the Education for Persons with Special Educational Needs Act 2004.

³⁴⁶ IHREC [Submission on the Review of the Education for Persons with Special Educational Needs \('EPSEN'\) Act 2004](#) (2023) p. 61. Eamonn Carroll, Selina McCoy and Georgiana Mihut, [Exploring Cumulative Disadvantage in Early School Leaving and Planned Post-school Pathways Among Those Identified with Special Educational Needs in Irish Primary Schools](#) (2022) p. 12. The Commission's legal work has highlighted failures by a third level educational institute to provide equal access to a course through the provision of sign language interpretation. IHREC, [Commission Welcomes Important WRC Decision on failure of College to Provide Equal Access to Course](#) (2023).

³⁴⁷ Wider social engagement involves engaging in social networks both inside and outside of class, allowing students to develop social and cultural capital, as well as fostering a sense of belonging, all of which are important to the pursuit of employment. V. Rath, [The Social Engagement Experiences of Disabled Students in Higher Education in Ireland](#) (2021) p. ii. Irish Educational Studies, E. Carroll, K. Ye and S. McCoy, [Educationally Maintained Inequality? The Role of Risk Factors and Resilience at 9, 13 and 17 in Disabled Young People's Post-school Pathways at 20](#) (2022) p. 5. IHREC has called for a clear, time bound implementation plan for the legislative and policy changes required to transition to an inclusive education environment and to support increased participation of disabled students in further and higher education. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024). We note evidence of students linking their additional education needs to negative social experiences. School leavers also highlighted shortcomings in their socio-emotional skills development. Selina McCoy, Keyu Ye and Eamonn Carroll, [Paths, Tracks, Gaps and Cliffs: The Post-School Transitions of Students with Special Education Needs](#) (2025) pp. 74; 87-88.

³⁴⁸ We have called for an expansion of the Access and Inclusion Model so that early childhood education for disabled children is publicly funded outside of the parameters of the Early Childhood Care and Education programme, including to children under the age of three and for extended periods of time. The AIM model was introduced in 2016, to ensure that children with a disability can access and meaningfully participate in the Early Childhood Care and Education (ECCE) programme. AIM, [The Access and Inclusion Model](#). Department of Children, Disability and Equality, [End of Year Three Evaluation of the Access and Inclusion Model \(AIM\)](#) (2024). ESRI, [Measuring Childhood Disability and AIM Programme Provision in Ireland](#) (2021). However, it has been found that receiving the approved levels of support from AIM can be a difficult and lengthy process and may delay early intervention for disabled children with specific educational needs. Problems such as infrequent visits from AIM Early Years Specialists, refusal of supports, insufficient resources and a lack of training for practitioners have been identified. European Early Childhood Education Research Journal, J. Roberts & P. Callaghan, [Inclusion is the ideal, but what is the reality? Early years practitioner's perceptions of the access and inclusion model in preschools in Ireland](#) (2021). IHREC, [Ireland and the Rights of the Child](#) (2022) p. 64.

The persistence of serious deficiencies in educational provision including: the number of disabled children without an appropriate school place, application of discriminatory admissions policies and actions taken to address such policies; and measures taken to ensure availability of accessible school places to disabled children, and to ensure that that schools do not apply discriminatory admissions policies that exclude children with moderate or severe learning disabilities or autism.

The increasing reliance being placed on special classes and segregated schooling and measures to develop and implement a national plan for inclusive education to bring education provision into alignment with the UNCRPD and the UNCRC.

Policy interventions and investments being made to ensure disabled learners succeed throughout the life course and progress positively at specific transition points in education and learning (including transition to an inclusive post-primary education environment and to support increased participation of disabled students in further and higher education and into employment.

Measures to address the administrative burdens and barriers faced by disabled students and their parents/caregivers having to apply for support at each stage of their education.

The provision of reasonable accommodations including assistive devices and technology at all levels of education including State examinations.

Measures to ensure that all members of the educational community receive training on ableism, inclusive education and disabled student's educational needs.

Measures to increase the number of disabled teachers currently working in the education system, with ambitious and measurable targets that reflect the diversity of Irish society.

Review of the impacts of restrictive measures, including reduced timetables and seclusion and restraint on disabled students and the right to inclusive education, and the development of a data collection system regarding the use of seclusion and restraint.

Article 25: Health

The State's efforts to ensure accessible, available, affordable and quality health services to disabled people are falling significantly short.³⁴⁹ The healthcare system has severe capacity issues at every level. Plans to move towards a universal system (Sláintecare) have been lacking in momentum.³⁵⁰ Ireland's two-tier healthcare system results in inequalities for disabled people, many of whom must routinely engage with the healthcare system.

Our DAC has reported a lack of awareness of and respect for disabled people in the healthcare system, and an over-medicalised approach to disabled people.³⁵¹

The mental healthcare sector is characterised by long waiting lists,³⁵² lack of community-based supports,³⁵³ inappropriate treatments,³⁵⁴ gaps between public and private services,³⁵⁵

³⁴⁹ IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the Committee on Economic, Social and Cultural Rights on Ireland's fourth periodic report](#) (2024) pp. 123-130. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 105.

³⁵⁰ For example, HSE data in 2024 documented a decrease in the number of Health Care Support Assistants employed by the HSE nationally. SIPTU, [Sláintecare Progress Report – Record Investment but for who?](#) (2024). We note the publication in May 2025 of *The Path to Universal Healthcare – Sláintecare & Programme for Government 2025+ (Sláintecare 2025+)* and welcome the Government's commitment to improving service quality and reducing waiting times for care. Department of Health, [Minister for Health publishes The Path to Universal Healthcare – Sláintecare & Programme for Government 2025+ \(Sláintecare 2025+\)](#) (2025).

³⁵¹ Section 42(1) of the *IHREC Act 2014*, the PSEHRD, obliges public bodies to consult with service users to better understand their requirements in policy and service design.

³⁵² In 2023, waiting lists for the CAMHS surpassed 4,500 for the first time. 735 of these children have been waiting for more than a year for an initial appointment. Dáil debates, [Investment in Healthcare: Statements](#) (2023).

³⁵³ The lack of local primary care and community support for common mental health conditions means that mental health services are largely provided in hospitals which is often the inappropriate level of care. Foundation for Progressive European Studies, [Is an EU-wide Approach to the Mental Health Crisis Necessary?](#) (2023) p. 35. 6,400 children have been admitted to Emergency Departments for mental health conditions since June 2020, and over 2,500 of these children were hospitalised. It is likely that many of these hospitalisations occurred due to the lack of community-based care options and the failure to intervene at an early stage. Dáil debates, [Investment in Healthcare: Statements](#) (2023).

³⁵⁴ The Maskey review into South Kerry CAMHS reported that the care received by 240 young people did not meet the acceptable standards, finding 'unreliable diagnoses, inappropriate prescriptions, poor monitoring of treatment and potential adverse effects.' S. Maskey, [Report on the Look-back Review into Child and Adolescent Mental Health Services County MHS Area A](#) (2022) p. 12.

³⁵⁵ In 2021 and 2022 private service providers achieved higher levels of compliance with mental health legislation and regulations than HSE facilities. Mental Health Commission, [Annual Report 2022](#) (2023) p. 23.

and regional inequalities in accessibility and quality of care.³⁵⁶ Inadequate resource allocation³⁵⁷ puts severe pressure on healthcare workers³⁵⁸ and the sector's ability to recruit and retain staff, which has considerable knock-on effects on the accessibility and quality of services.³⁵⁹ This results in a reliance on the community and voluntary sector to step in where the State is failing.³⁶⁰

We are concerned that the continued use of the medical model approach to mental health prevents people with psychosocial disabilities from accessing appropriate supports.³⁶¹

³⁵⁶ For example, in 2019 less than 5% of all adult cases were on a waiting list for mental health care for more than 12 weeks. However, this figure was over 10% in parts of Dublin, Wicklow and Kildare. HSE Mental Health Service, [Delivering Specialist Mental Health Services](#) (2019) p. 75. Conversely, emergency or out-of-hours mental health service provision is less likely to be available in rural areas. Mental Health Commission, [Independent Review of the provision of Child and Adolescent Mental Health Services \(CAMHS\) in the State by the Inspector of Mental Health Services](#) (2023) p. 77.

³⁵⁷ Mental health funding comprised 5.7% of the overall health budget for 2024. Between 2022 and 2023 the proportion of the overall health budget spent on mental health decreased from 5.4% to 5.1%. Department of Health, [Ministers for Health Announce Budget for the Delivery of Health Services in 2024](#) (2023). Department of Health, [Statement by Minister Donnelly at the Department of Health Budget 2023 Press Briefing](#) (2022). Department of Health, [Budget 2022: Minister Donnelly Announces €21 Billion, the Biggest Ever Investment in Ireland's Health and Social Care Services](#) (2021). In 2015 Ireland spent 3.17% of GDP on mental healthcare, which is considerably below Denmark (5.38%), Finland (5.32%), the Netherlands (5.12%) and the EU average (4.1%). OECD, [Health at a glance: Europe 2018](#) (2018) p. 28.

³⁵⁸ Research undertaken before and during the pandemic has noted high numbers of healthcare staff experiencing burnout. Irish Journal of Medical Science, Sheehan et al, [Burnout on the Frontline: the Impact of COVID-19 on Emergency Department Staff Wellbeing](#) (2022). Irish Journal of Medical Science, P. Chernoff et al, [Burnout in the Emergency Department hospital staff at Cork University Hospital](#) (2019). For example, 30% of disabled people have had experiences where they felt their health concerns were not heard or respected by healthcare professionals. This is relevant to the discussions on the prevalence of ableism in Irish society across this report. Data from the Commission's public poll on ESC rights.

³⁵⁹ Ireland has 40% less consultants than the EU average. In a survey issued to members of the Irish Hospital Consultants Association, 73% of respondents were not confident that new public-only consultant contracts introduced as part of *Sláintecare* reforms will address the recruitment crisis. Irish Hospital Consultants Association, [IHCA Statement on new Consultant Contract](#) (2023). We note the Workforce Plan developed for the Early Childhood Care and Education sector, which sets out plans to raise qualification levels, create professional development pathways, and promote careers in the sector. We are not aware of a corresponding plan for the healthcare workforce in the public domain. Department of Children, Equality, Disability, Integration and Youth, [Nurturing Skills: The Workforce Plan for Early-Learning and Care and School-Age Childcare 2022-2028](#) (2021).

³⁶⁰ Mental health policy in Ireland has been called 'a crisis of underinvestment,' leading to high staff turnover and less holistic and thorough engagement with patients. Historically, CSOs have played an important role in filling the gaps, however these groups also have insufficient funding to meet acute demand for services. Foundation for Progressive European Studies, [Is an EU-wide approach to the mental health crisis necessary?](#) (2023) p. 34.

³⁶¹ This is exemplified by the fact that although responsibility for specialist disability services was transferred from the Department of Health to the Department of Children, Equality, Disability, Integration and Youth in 2023, psychosocial disability services were not included in this transfer. Department of Children, Equality, Disability, Integration and Youth, [Transfer of the specialist Disability services function to Department of Children, Equality, Disability, Integration and Youth](#) (2023).

Considerable delays in legislative reform³⁶² mean people with psychosocial disabilities continue to be subjected to seclusion and restraint,³⁶³ family separation,³⁶⁴ reduced decision-making capacity³⁶⁵ and deprivation of liberty due to restricted movement in inpatient psychiatric facilities.³⁶⁶ The continued absence of robust protection mechanisms is of extreme concern.³⁶⁷ We note the intersection between mental health and homelessness, and the need for person-centred, trauma-informed, and flexible mental health supports.³⁶⁸

³⁶² Following review of the *Mental Health Act 2001* in 2015, the Draft Heads of Bill for the *Mental Health (Amendment) Bill* were published in 2021. In September 2024, the Government published the *Mental Health Bill*, which is currently before the Houses of the Oireachtas. [Mental Health Bill 2024](#). See also IHREC, [Ireland and the International Covenant on Civil and Political Rights](#) (2022) pp. 63-64. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022). Urgent action is required to reform legislation in line with international standards, including the *Mental Health Bill 2024*, the *Criminal Law (Insanity) Act 2006* and the *Disability Act 2005*.

³⁶³ At present, certain practices of seclusion and restraints are within the scope of the *Mental Health Act 2001*, which demonstrate the need for timely reform. Disabled Women Ireland, [Submission to the Public Consultation on the Review of the Mental Health Act 2001](#) (2021) p. 6.

³⁶⁴ Concerns have been raised that inpatient mental health care operates to unreasonably separate mothers from children shortly after birth. Disabled Women Ireland, [Submission to the Public Consultation on the Review of the Mental Health Act 2001](#) (2021) pp. 6-7.

³⁶⁵ Advanced Healthcare Directives set out instructions in relation to preferred healthcare treatments. They are applied if a person loses capacity to make healthcare decisions but have limited applicability in mental health contexts. Despite the opportunity for amendment in the *Assisted Decision Making (Capacity) (Amendment) Act 2022*, this form of discrimination against women with psycho-social disabilities remains in operation. Disabled Women Ireland, [Submission to the Public Consultation on the Review of the Mental Health Act 2001](#) (2021) p. 5.

³⁶⁶ The Committee on the UNCRPD has repeatedly called on States to repeal provisions that permit involuntary detention of disabled persons in MHEs. In 2023, 2,516 people were involuntarily detained in MHEs, and 1,114 involuntary detention orders were renewed. Mental Health Commission, [Annual Report 2023](#) (2024) p. 64. We have previously recommended that reform of mental health legislation is accompanied by other measures to ensure less restrictive forms of treatment in the community are available, with the ultimate aim of eradicating coercive treatment of persons with psychosocial disabilities. IHREC, [Submission on the General Scheme of the Mental Health \(Amendment\) Bill](#) (2022) pp. 19-20. Reform of mental health law must be accompanied by a suite of measures – including strategies, action plans, rules and codes of practice – aimed at ensuring less restrictive forms of treatment in the community are available and the ultimate eradication of coercion in the treatment of people with psychosocial disabilities.

³⁶⁷ The *Mental Health Act* does not provide for a mechanism to handle individual complaint, and there have been calls to establish an effective complaints mechanism to safeguard persons receiving mental health services. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) p. 26.

³⁶⁸ Using Depaul administrative data and first-hand stakeholder accounts, research by TASC shows the urgent need for joined-up support services to help people in Ireland who are homeless and dealing with mental health and substance misuse difficulties. The report highlights good practices, such as teams with experts from different areas and services located in the same place. TASC, [Breaking the Cycle: Addressing Mental Health and Homelessness through Integrated Care](#) (2025). Mercy Law Resource Centre, [Mental Health and Social Housing Supports](#) (2024), p.23.

The Disability Act 2005 must be reviewed and subsequently aligned with the UNCRPD to ensure access to services and supports.³⁶⁹ Services provided are often inadequate, inaccessible or their provision is so delayed they do not address the range of issues arising.³⁷⁰ This puts severe pressure on families to place their disabled relatives outside the home, risking institutionalisation and impacting their Article 23 rights.³⁷¹

There are specific issues that arise for disabled women and transgender people in their access to healthcare, including deficiencies in the quality of care and the availability of

³⁶⁹ The Committee recommended that the *Disability Act* be reviewed and that a legal entitlement to intervention and provisions of services across the lifecycle of individuals with disabilities based on need be considered. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 106.

³⁷⁰ Inclusion Ireland have reported that 83% of respondents surveyed, report lack of services as one of the biggest issues they face. Regional variance has resulted in a 'postcode lottery' for services. 95% of respondents have waited more than 6 months to avail of services. 85% reported waiting longer than a year. 50% of families surveyed are not in receipt of any service. 27 respondents reported receiving correspondence indicating the scheduled date for intervention would be two years from the time of assessment. 19% of respondents pointed out specific issues with the quality of service received with staffing issues often being a primary contributing factor. The failures of the AON system reinforce social disadvantage also as those with the means to engage with private healthcare can secure expedited access to services. Inclusion Ireland, [Progressing Disability Service for Children and young People: Parent Experience Survey Report](#) (2022). Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 97.

³⁷¹ Inclusion Ireland, [Progressing Disability Service for Children and young People: Parent Experience Survey Report](#) (2022). pp. 8-15. The Ombudsman for Children has documented cases of children staying in hospital care beyond medically required, due to absence of step-down services, and cases of children who required residential care but were unable to access it. Office of the Ombudsman for Children, [Nowhere to Turn – Children with Disabilities Left with no Support](#) (2023) pp. 2-4; 9-14.

information.³⁷² Specific issues arise with access to reproductive healthcare³⁷³ with disabled women encountering logistical and economic barriers to access.³⁷⁴

Barriers and discrimination arise in access to the health service including inaccessible notice of medical appointments, insufficient communication skills of health professionals, limited provision of ISL, and physical inaccessibility of many health care settings.³⁷⁵

The Committee should ask the State about:

A timeline for the development and implementation of a system of universal healthcare.

Measures to reform the Assessment of Need process and ensure the timely provision of adequate accessible services and supports to disabled people.

³⁷² For example, in our engagement with CSOs we have heard reports that many disabled women are not offered Hormonal Replacement Therapy (HRT) due to a lack of knowledge of contraindications amongst GPs. Qualitative interviews with mental health experts indicate that there is a lack of information and practitioner knowledge about how menopause affects mental health. National Women's Council, [Gender-Sensitive Mental Health: Developing Policy and Services Which Meet the Particular Needs of Women and Girls](#) (2023) pp. 61-62. Women also report feelings of stigma and embarrassment. Women's Health Task Force, [Radical Listening Project on Women's Health](#) (2021) p. 52. We have also heard concerns raised by our DAC and by wider CSOs regarding the absence of a mother and baby unit for mothers requiring treatment for mental health conditions during the perinatal period, resulting in mother and baby separation. Deficits in perinatal healthcare for disabled women are evidenced by research undertaken by Trinity College in 2024 found that deaf women experienced difficulties with both the method and quality of communication within the Irish maternity services. While interpreter services are used by all of Ireland's maternity hospitals, research found that the provision is limited and does not extend to provisional of educational resources. Our DAC has also raised concerns regarding dismissal of physical health symptoms mistakenly attributed to mental health conditions, autonomy regarding treatment, instability of treatment options in mental health services with an overreliance on medication and lack of structured and stable support systems within the systems. We have heard concerns regarding access to gender-affirming healthcare for disabled transgender people, and transgender Autistic people in particular. Trinity College Dublin, [REACH Deaf Conference 2024](#) (2024).

³⁷³ We are concerned about uneven geographical distribution of services (particularly in rural areas), mandatory wait periods, fatal foetal abnormality criteria, and that non-providing GPs and conscientious objectors result in the denial of care requiring women to travel abroad to access a termination. IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women 2025](#) (2025) p. 122.

³⁷⁴ For example, accessible transport and supports including ISL interpretation. For more on the particular problems facing disabled women and others see National Women's Council of Ireland (NWC), [Accessing Abortion in Ireland: Meeting the Needs of Every Woman](#) (2021) pp. 44-45.

³⁷⁵ IHREC, [Service user with Serious Visual Impairment Settles Discrimination Claim](#) (21 January 2025); IHREC, [Commission Provides Legal Assistance in Complaint Relating to Inaccessible Communications by a Healthcare Service](#) (10 June 2024).

Measures to address the critical shortcomings in children and adult mental health services, including funding to match need, ring-fenced to protect resourcing in successive budgets and re-orientated towards human rights-based provisions and accessible to all impairments groups.

Measures to ensure public healthcare services are provided in an accessible manner and reasonable accommodations provided to ensure equitable access.

Article 27: Work and Employment

Disabled people in Ireland have the fifth highest rate of unemployment in Europe. The State has sought to address this issue through a series of policies focusing on labour activation rather than decent work.³⁷⁶ Unemployment in Ireland is low. However, unemployment of disabled people remains high³⁷⁷ and employment gaps persist between disabled and non-disabled people,³⁷⁸ between disabled men and women,³⁷⁹ as well as between impairment types.³⁸⁰ These stark outcomes reflect the poor progress and outcomes achieved by the State despite relatively significant policy attention.³⁸¹

³⁷⁶ IHREC, [Monitoring Decent Work in Ireland](#) (2021) pp. 1; 4-5. Department of Social Protection, [Pathways to Work Strategy 2021-2025 \(2021\)](#). Department of Social Protection, [Roadmap for Social Inclusion 2020-2025 \(2023\)](#). Department of Children, Disability and Equality, [Comprehensive Employment Strategy for People with Disabilities 2015-2024 \(2019\)](#). Policy measures focus on labour activation and not decent work.

³⁷⁷ Having a disability or illness is the most commonly given reason for respondents who wish to work but are not currently seeking work. Central Statistics Office, [Census of Population 2022 Profile 4: Disability, Health and Carers](#) (2023). Central Statistics Office, [Labour Force Survey Quarter 4 2024 \(2025\)](#). 56% of the total population were at work and the overall unemployment rate was 8%. For people with a long-lasting condition or difficulty experienced to any extent, 34% were at work and the unemployment rate was 13%. For people with a long-lasting condition or difficulty experienced to a great extent 17% were at work and the unemployment rate was 22%. For people with a long-lasting condition or difficulty experienced to some extent 44% were at work and the unemployment rate was 11%. In all categories the unemployment rate was higher for men. Of working age population, 9.3% of working-age persons with disabilities in Ireland were employed in 2022, compared to 70.8% of those without disabilities. Employers for Change, [Inclusive Workplaces: Progress and Challenges in Ireland for Persons with Disabilities](#).

³⁷⁸ The general participation rate in the labour force was 61%, the participation rate for people experiencing a long-lasting condition or difficulty to any extent was 40%, for people experiencing a long-lasting condition or difficulty to a great extent the participation rate was 22%. For people with an intellectual disability to a great extent the labour force participation rate was 14%. Central Statistics Office, [Census of Population 2022 Profile 4: Disability, Health and Carers](#) (2023).

³⁷⁹ For each category of long-lasting condition or difficulty to any extent men had higher labour force participation than women. Central Statistics Office, [Census of Population 2022 Profile 4: Disability, Health and Carers \(2023\)](#).

³⁸⁰ For example, the highest recorded labour force participation rate for people experiencing a long-lasting condition or difficulty to any extent is among those experiencing blindness or a vision impairment (44%) or a psychological or mental health issue (43%). The lowest recorded participation rates for those experiencing a long-lasting condition or difficulty to a great extent were among those experiencing difficulty with basic physical activities (8% and intellectual disabilities (13%). Central Statistics Office, [Census of Population 2022 Profile 4: Disability, Health and Carers \(2023\)](#).

³⁸¹ We note the Joint Oireachtas Committee on Disability Matters graded Ireland's progress on Article 27 as 'limited'. Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 110.

Disabled people in Ireland encounter several obstacles when attempting to secure employment, including attitudinal barriers, discrimination and fear of discrimination,³⁸² structural barriers,³⁸³ inflexibility of working hours, inaccessible and irregular public transport and workspaces, and unaffordable private transport.³⁸⁴ Intersectional barriers exist for disabled women with family caring responsibilities.³⁸⁵

We are concerned that a withdrawal of social supports in response to increased hours of employment has a negative impact and can cause disabled people to cluster at an income threshold rather than seek more hours, higher pay, or promotions.³⁸⁶ Disabled people should not experience a net loss of income when accessing and progressing in the labour market.

Challenges arise in accessing decent work. Disabled workers have significantly poorer outcomes on many indicators of decent work including poorer salary outcomes for disabled graduates,³⁸⁷ discrimination in the workplace and higher rates of work-related illnesses³⁸⁸ with disabled women disproportionately impacted.³⁸⁹

³⁸² IHREC, [Commission Welcomes Equality Rulings from the Workplace Relations Commission in Important Disability Discrimination Case](#) (22 January 2025). IHREC's Legal casework in relation to disability discrimination is reported in IHREC, [Annual Report 2023](#) p.22.

³⁸³ Including limited access to personal assistance services (see Article 19) and limited access to ISL Interpretation (see Article 21).

³⁸⁴ Independent Living Movement Ireland, [Statement to the Joint Committee on Disability Matters](#) (2022) p. 2.

³⁸⁵ Disabled Women Ireland, [Coalition Submission to the UN Committee on the Elimination of all forms of Discrimination against Women: List of Issues Prior to Reporting on Ireland's Report under CEDAW](#) (2023).

³⁸⁶ There are income thresholds in place for the Working Family Payment and Disability Allowance as well as for non-cash supports such as the medical card. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2023) pp. 86-87. In our engagements with CSOs, we heard calls for the removal of means testing for disability payment, as it is a barrier to taking up employment. "You are just a normal human being; why do you have work limits?" We heard concerns that progressing in paid employment might cost a disabled person their medical card and free public transport card. The fear of losing the 'safety net' of social payments was noted.

³⁸⁷ Higher Education Authority found that graduates with disabilities were more represented in each of the lower salary bands of €20k-€24.9k. 9% of graduates with a disability earned up to €14k, compared to 5% of those with no disability. 22% of graduates with a disability earned between €30k-€34.9k compared to 24% for graduates with no disability. 19% of postgraduate graduates earned between €30k-€34.9k compared to 24% of graduates with no disability. Higher Education Authority, [Graduate Outcomes and Disability Report](#) (2023).

³⁸⁸ IHREC & ESRI, Joanne Banks, Raffaele Grotti, Éamonn Fahey and Dorothy Watson, [Disability and Discrimination in Ireland](#) (2018) pp. 61-62. IHREC & ESRI, Frances McGinnity, Helen Russell, Ivan Privalko & Shannen Enright [Monitoring Decent Work in Ireland](#) (2021) p. 57.

³⁸⁹ Disabled Women Ireland, [Opening Statement to the Joint Oireachtas Committee on Disability Matters and the Committee on Finance, Public Expenditure and Reform, and Taoiseach – "Enabling Financial Independence for Disabled Women](#) (2022) pp. 3-4.

Significant challenges arise in accessing reasonable accommodation in employment and securing decent work.³⁹⁰ There is a recognised need for training across all sectors on disability inclusion and reasonable accommodation.³⁹¹ In 2023, IHREC submitted a final draft Code of Practice on Reasonable Accommodation in the Workplace to the relevant Minister following a statutory public consultation process.³⁹² Guidance to accompany the draft Code has also been prepared. Two years later, the Code of Practice remains with the Minister with no substantive engagement with IHREC on progressing it to a statutory instrument in its current or amended form. This is despite a Government commitment to ensure employers make reasonable accommodation for people with disabilities in the workplace.³⁹³

There is currently no statutory obligation on an employer to consult with an employee when responding to a request for reasonable accommodation³⁹⁴ and the Irish Courts have held that an employer cannot be under a duty to entirely re-designate or create a different job to facilitate the employee.³⁹⁵ Such findings do not advance a broad understanding of reasonable accommodation in the workplace.

³⁹⁰ Factors that contribute to this include low levels of awareness and understanding of the duty to provide reasonable accommodation, lack of knowledge of limited financial supports, failure to have in place policies and procedures to manage requests, reluctance among workers to disclose their disability and the lack of provision for the monitoring and review of accommodations that have been provided. NDA, [Submission on the Reasonable Accommodation Fund](#) (2022) pp. 6-7.

³⁹¹ Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) p. 113.

³⁹² IHREC, [Annual Report](#) (2023) p. 44.

³⁹³ Dáil, [Written Answers 'Employment Schemes'](#) (20 February 2025). Department of the Taoiseach, [Programme for Government 2025 – Securing Ireland's Future](#) (January 2025) p. 17.

³⁹⁴ The Supreme Court stated that an employer has no binding legal obligation to consult with an employee or to allow them to participate in the process of assessing what or what is not reasonable accommodation. Nonetheless, the Supreme Court stated that a “wise employer” will provide for “meaningful participation in vindication of his or her duty under the Employment Equality Acts. The Supreme Court also held that reasonable accommodation can involve a redistribution of any task or duty in a job, so long as not disproportionate in the context of the employment in question. *Nano Nagle School v Daly* [2019] IESC 63. IHREC, [Submission on the Review of the Equality Acts](#) (2023) pp. 82-83. IHREC, [Comments on Ireland's 19th National Report on the implementation of the European Social Charter](#) (2022) pp. 33- 34

³⁹⁵ *Nano Nagle School v Daly* [2019] IESC 63, at [89]. We note that a more recent Court of Justice of the European Union decision - Case C-485/20 *HR Rail CLI:EU:C: 2022:85* has shifted the position in this regard. Here, the CJEU accepted that it could be an appropriate measure to reassign an employee to a different role in the organisation. The Court emphasised however, that this was subject to not creating a disproportionate burden for the employer and that there needed to be a vacancy which the employee could be transferred.

The Committee should ask the State about:

The failure of successive policies and strategies to improve employment outcomes for people with disabilities and learnings in respect of these policies and to outline the processes that will be put in place to ensure that successor policies and strategies are designed and implemented in consultation with disabled people.

Targeted policies and strategies and how it will ensure all subsequent policy measures are compliant with UNCRPD Committee General Comment 8 on the right to work and employment.

Measures to address the wide range of well-documented attitudinal and structural barriers to employment experienced by disabled people, including consultation with disabled people.

Measures to ensure that disabled people who are in employment experience decent work.

Plans to align the Employment Equality Acts, including the provision of reasonable accommodation with the UNCRPD.

The status of the draft Code of Practice on Reasonable Accommodation in the workplace submitted to the Minister in 2023.

Article 28: Adequate Standard of Living

Policy inaction has left disabled people with a chronically inadequate standard of living. Disabled people have a lower average income combined with higher average costs. They are at a profoundly higher risk of poverty and households with a disabled member have a lower standard of living than those without.³⁹⁶ Unequal outcomes in education³⁹⁷ and employment³⁹⁸ among other societal factors generally prevent disabled people from earning an income that provides an adequate standard of living.

The cost of disability in Ireland is calculated to be over half a disabled household's disposable income and is strongly related to severity of disability.³⁹⁹ When the cost of disability is deducted from disposable income the at-risk-of-poverty rate of disabled households almost triples.⁴⁰⁰

The State's ongoing failure to address the housing crisis has had a disproportionate impact on both the living standards and the independence and autonomy of disabled people.⁴⁰¹

³⁹⁶ IHREC and ESRI, Karina Doorley, Theano Kakoulidou and Agathe Simon, [Adjusting Estimates for the Cost of Disability](#) (2024) p 15, 21. The AROP (at risk of poverty) rate for disabled people is 24%, the AROP rate for non-disabled people is 10%. There is a clear gradient in the indicators, with severely disabled adults experiencing the lower [standard of living] and people with disabilities experiencing the highest.

³⁹⁷ See Article 24 - Education.

³⁹⁸ See Article 27 – Work and Employment.

³⁹⁹ The Cost of Disability is between 52-57% of a household's disposable income. Examples provided by CSOs to us include transport costs, health care costs and the cost of mobility equipment. The estimated lower standard of living for households with disabilities is strongly related to the severity of disability, with the cost for those with severe limitation reaching 93 per cent of disposable income. IHREC and ESRI, Karina Doorley, Theano Kakoulidou and Agathe Simon, [Adjusting Estimates for the Cost of Disability](#) (2024) pp. 16, 18. In our engagement with CSOs, calls have been made to distinguish between universal basic incomes and the additional cost of disability and to consider this in social protection policy and budgeting. The importance of recognising the different levels of impact that impairments have on a person's financial situation was also highlighted.

⁴⁰⁰ IHREC and ESRI, Karina Doorley, Theano Kakoulidou and Agathe Simon, [Adjusting Estimates for the Cost of Disability](#) (2024) p. 22. When researchers adjusted the disposable income of people living in households with a disabled member using estimates of the cost of living the AROP rate was estimated to be 66-75%, an increase from 24%. This is a cause for concern, noting its impact on ability to access household essentials.

⁴⁰¹ See Article 19 - Living independently and being included in the community.

These socio-economic factors often combine to render disabled people financially dependent on others⁴⁰² creating a risk of abuse.⁴⁰³ We note barriers to financial independence, including accessibility of financial services and services assuming capacity issues;⁴⁰⁴ even among those with bank accounts, disabled people experience a lack of access to credit, including mortgages and loans.⁴⁰⁵

Full-time employment is not an available pathway for all disabled people; the social protection system must ensure people do not experience substandard living conditions because of their employment outcomes. At present, the income provided by disability payments still falls well short of meeting the needs of disabled people.⁴⁰⁶

Furthermore, barriers arise in accessing Disability Allowance.⁴⁰⁷ There are high rates of initial refusals, which are often overturned on appeal, inconsistencies in decision making and

⁴⁰² We note reports of people being denied access to Disability Allowance because of the income of their partner, which has clear and obvious implications for financial independence. Irish Examiner, [Man Paralysed in Accident Denied Disability Allowance due to Partner's Income](#) (13 May 2025).

⁴⁰³ Disabled Women Ireland, [Opening Statement to the Joint Oireachtas Committee on Disability Matters and the Committee on Finance, Public, Expenditure and Reform and Taoiseach – “Enabling Financial Independence for Disabled Women”](#) (2022) pp. 6-8.

⁴⁰⁴ These issues were raised during our engagement with CSOs.

⁴⁰⁵ Our DAC has advised us of these concerns regarding accessing financial services.

⁴⁰⁶ The maximum weekly payment made under Disability Allowance is €244 and the maximum a person can earn and retain this rate of payment is €165 a week. For contrast the Cost of Disability is estimated at between €488-€555 per week. ESRI & IHREC, [Adjusting Estimates for the Cost of Disability](#) (2024) p. 16. We note that during the Pandemic it was determined by the Government that €350 was the minimum weekly amount required for non-disabled people to achieve an adequate standard of living, when it introduced the Pandemic Unemployment Benefit and regret that the same consideration cannot be extended to disabled people. In our engagements with CSOs, the ‘ageing out’ of disability payments was highlighted, and responses stressed that while entitlements to payments may cease, the costs of disability continue.

⁴⁰⁷ The Commission provided legal advice and representation pursuant to Section 40 of the [Irish Human Rights and Equality Act 2014](#) to a client in relation to a decision made by the Social Welfare Appeals Office to disallow an appeal of a decision of the Social Welfare Services Office (“SWSO”). The client had been granted ‘leave to remain’ in Ireland by the State. She applied for disability allowance and was refused at first instance. She appealed that decision and was unsuccessful. The Commission on behalf of the client submitted a request to the Chief Appeals Officer to review this decision of the Social Welfare Appeals Office under section 318 of the *Social Welfare Consolidation Act 2005*. This review found that the Social Welfare Appeals Office had erred in law and fact and revised their decision. The client’s application for disability allowance was referred back to the Department of Social Protection and she has subsequently been granted disability allowance, backdated to the date of her initial refused application.

failure to offer people adequate reasonable accommodation when applying to social welfare schemes.⁴⁰⁸

A Green Paper on Disability Reform, including reform of disability payments, was published in September 2023. Disabled people and DPOs were not consulted on its initial development.⁴⁰⁹ In response to well-founded criticism by disabled people and DPO the State withdrew the proposal⁴¹⁰ and deficient policymaking processes were highlighted.

The Committee should ask the State about measures to:

Address the cost of disability, including ensuring that income provided by disability payments is sufficient to provide an adequate standard of living.

Ensure that disabled people are not incentivised against accessing and/or progressing in employment by cliff-edges and income thresholds in the social welfare system.

⁴⁰⁸ Between 2014 and the end of March 2024, 241,109 disability allowance claims were received by the Department. 24% or 58,845 of those claims resulted in appeals to the Social Welfare Appeals Office. 69% of appeals were subsequently upheld. Dáil Éireann, [Social Welfare Appeals](#) (25 April 2024). We note with concern that the average processing time for appeals is 22 weeks. Dáil Éireann, [Written Answers – Social Welfare Benefits](#) (8 April 2025). CSOs have also raised concerns regarding procedural access to the social welfare appeals system and concerns about transparency. Age Action, Community Law and Mediation, Crosscare and Disability Federation of Ireland, [Submission to the Public Consultation on Changes to the Social Welfare Appeals Regulations](#) (2023).

⁴⁰⁹ The Green Paper was stated to be a consultation document. Independent Living Movement Ireland, [ILMI Summary of the Green Paper on DA Consultations](#) (2023).

⁴¹⁰ The Green paper utilised medicalised language, framed the low employment rate of disabled people as their lack of desire to work, rooted entitlement to social protection in capacity to work and appeared to closely mirror similar reforms in other states which had well-documented devastating consequences for disabled people. “Creating a link between welfare reform and employment suggests that disabled people are ‘not trying hard enough to get work’ and plays into fears that these proposals are based on UK welfare reforms which had a hugely negative impact on disabled people’s lives.” Independent Living Movement Ireland, [ILMI Summary of the Green Paper on DA Consultations](#) (2023). Department of Social Protection, [Green Paper on Disability Reform: A Public Consultation to Reform Disability Payments in Ireland](#) (2023). IHREC, [Letter to the Minister for Social Protection regarding the Green Paper on Disability Reform – A Public Consultation to Reform Disability Payments in Ireland](#) (2024) pp. 5-10. On 12 April 2024, the Minister for Social Protection announced the Green Paper proposals would not go ahead. The Government has indicated disability payments will now be considered as part of a broader review of disability matters on a whole-of-government basis and will take account of the feedback during the Green Paper process. Dáil, written answers [Social Welfare Rates](#) (14 May 2025).

Address deficiencies in the accessibility of and administration of the social protection system, informed by use of human rights and equality impact assessments and by adequately resourced consultation with disabled people.

Article 29: Participation in Public and Political Life

Disabled people face significant barriers in participating in political and public life, with underrepresentation of disabled people in the Irish Parliament and local Government.⁴¹¹

Significant barriers are also faced by disabled people when exercising their democratic right to participate in elections.⁴¹² We have called upon the Government to ensure that all voters have access to independent voting, including by addressing information, physical and assistance barriers.⁴¹³

The participation of disabled people is made possible through the active support and involvement of DPOs.⁴¹⁴ We are concerned about the lack of participation of disabled people

⁴¹¹ We note the low representation of women and minority groups holding positions on public boards. Our DAC have noted the lack of emphasis placed on the representation of disabled people in public life and have called for research and understanding regarding public representation of disabled people which would identify the supports and reasonable accommodations required for equitable participation and representation, and to address the barriers posed by ableism. IHREC has noted the low levels of representation of women in public life and recommended that gender quotas be applied. IHREC's DAC has recommended that a similar practice may be helpful for improved representation of disabled people. IHREC, [Disability Advisory Committee](#). IHREC, [Ireland and the International Covenant on Civil and Political Rights – Submission to the Human Rights Committee on Ireland's 5th Periodic Report](#) (2022) pp. 36- 37. [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the Committee on Economic, Social and Cultural Rights on Ireland's fourth periodic report](#) (2024) p. 47.

⁴¹² We note measures that the Irish Government could take to address barriers such as: provision of accessible election material, providing clarity regarding the electoral process, funding for disabled electoral candidates for ISL interpreters and other supports, a commitment to universal design in electoral processes and design of polling stations. We note the urgent need to address barriers faced by people living in hospitals, nursing homes and other residential and institutional settings to cast their vote. We note the 2024 OSCE report "Ireland, Early Parliamentary Elections, 29 November 2024: ODIHR Needs Assessment Mission Report", which noted reports regarding polling station accessibility and insufficient accommodations to enable independent voting, largely due to attitudinal and systemic barriers. OSCE, [Ireland, Early Parliamentary Elections, 29 November 2024: ODIHR Needs Assessment Mission Report](#) (2024). IHREC, [Submission to CRPD General Comment on Article 29](#) (2025) p. 2.

⁴¹³ DPOs have highlighted the varied barriers faced by disabled people and have provided recommendations for redress. IHREC, [Correspondence from Director Re: Accessible Voting](#) (2024). Voice of Vision Impairment, [Accessibility Report on Referendums of March 8th, 2024](#) (2024).

⁴¹⁴ For example, by providing sustainable core funding, capacity-building and training. Committee on the Rights of Persons with Disabilities, [General comment No. 7 \(2018\) on the Participation of Persons with Disabilities, Including Children with Disabilities, Through their Representative Organizations, in the Implementation and Monitoring of the Convention](#), (2018) paras. 60-64.

and DPOs in decision-making processes.⁴¹⁵ Disabled people and their representative organisations must be involved in all stages of policy and legislative changes that will affect them.⁴¹⁶ Due regard to the needs of service users by means of consultation and participation in the decision making process is a requirement of the PSD.⁴¹⁷

The Committee should ask the State about measures to:

Address and remove information, physical, assistance and attitudinal barriers that prevent disabled people from participating in the democratic process.

Support research concerning disability and political representation and act on recommendations in order to facilitate increased representation of disabled people in local, national and European politics and in public decision-making roles including positions on public boards.

Create an enabling environment for DPOs to establish and participate actively in civil and political life.

⁴¹⁵ IHREC, [Consultation on Terms of Reference and Work Programme for the Joint Oireachtas Committee on Disability Matters](#) (2020) p. 6. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the UN Committee on Economic, Social and Cultural Rights for the List of Issues on Ireland's Fourth Periodic Report](#) (2021) p. 21. We have called for sustainable core funding, capacity building and training. IHREC, [Ireland and the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence](#) (2023) pp. 33-34. We have previously noted the lack of participation with disabled people and DPOs in the decision-making processes around legislation and enforcement. We have recommended that disabled people and their representative organisations are involved in all stages of policy changes that will affect them, and we have called for the establishment and work of community, local and national DPOs - noting the recognition of the UNCRPD of diverse forms of impairment and the intersecting needs of specific groups - including through increasing and reorienting funding to allow for the genuine inclusion of disabled people. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the Committee on Economic, Social and Cultural Rights on Ireland's fourth periodic report](#) (2024) p. 15.

⁴¹⁶ IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights Submission to the Committee on Economic, Social and Cultural Rights on Ireland's fourth periodic report](#) (2024) p. 17.

⁴¹⁷ For more information on impact assessments see IHREC, [7 Steps Towards Human Rights and Equality in the Workplace](#).

Article 30: Participation in Cultural Life, Recreation, Leisure and Sport

Disabled people face barriers to participation in cultural life, recreation, leisure and sport and the approach to addressing these challenges has been inconsistent.⁴¹⁸ Barriers also exist to disabled people engaging as creatives and sports professionals.

Disabled people report issues relating to inaccessible facilities, a lack of sensory-friendly spaces, a lack of support for disabled children to continuously engage in age-appropriate activities, inadequate supports for the inclusion of Deaf people and ongoing transportation issues.⁴¹⁹ Members of our DAC have highlighted that disabled people are often made to feel like ‘hazards’ when they try to attend venues and cultural events, and have highlighted that limited provision of PA preclude many people participating in cultural or leisure activities.⁴²⁰ We further note that State policies do not address the inclusion and participation of disabled people in cultural life.⁴²¹

The Committee should ask the State about:

Measures to address the diverse barriers which exclude disabled people from cultural life, recreation, leisure and sport, and to promote disabled people’s participation in culture and sport.

⁴¹⁸ Houses of the Oireachtas, Joint Oireachtas Committee on Disability Matters, [Towards Harmonisation of National Legislation with the United Nations Convention on the Rights of Persons with Disabilities](#) (2024) pp. 122-123.

⁴¹⁹ We note also the value of opportunities to develop relationships with other disabled people outside of medical or charitable contexts. For an extensive account of the experiences of disabled people and proposed solutions and recommendations see NDA, [NDA Annual Conference 2024: Promoting the Participation of Disabled People in Cultural Life, Recreation, Leisure and Sport in Ireland – UNCRPD Article 30](#) (2025).

⁴²⁰ IHREC, [Disability Advisory Committee](#).

⁴²¹ Government of Ireland, [Culture 2025 – A National Cultural Policy Framework to 2025](#) (2020). This policy sets out the Government’s approach to supporting and promoting creativity and culture in Ireland. Department of Tourism, Culture, Arts, Gaeltacht, Sport and Media, [Culture Ireland Strategy 2022-2025](#) (2022): This policy is focused on the promotion of Irish culture and arts worldwide.

Article 31: Statistics and Data Collection

The State's collection and use of disaggregated equality data is insufficient,⁴²² resulting in a limited evidence base for the development, implementation and evaluation of policies and legislation concerning disabled people.⁴²³ The National Equality Data Strategy is unpublished and has been subject to numerous delays.⁴²⁴

Disaggregated data is severely limited, rendering it impossible to fully evaluate the status of disabled people on a comparable basis with the wider population; to monitor implementation of the UNCRPD in Ireland; and to identify appropriate, evidence-based policy solutions to realise full implementation.⁴²⁵ We have repeatedly highlighted, for example, the gaps in

⁴²² Equality data refers to all types of disaggregated data used to assess the comparative situation of a specific group at risk of discrimination, to design public policies so that they can contribute to promoting equality and to assess their implementation. European Network Against Racism, [Equality Data](#). IHREC, [Submission to the Department of the Taoiseach on the European Semester 2023 and the National Reform Programme](#) (2023).

⁴²³ European Commission High Level Group on Non-discrimination, Equality and Diversity - Subgroup on Equality Data, [Guidelines on Improving the Collection and use of Equality Data](#) (2018). European Commission High Level Group on Non-discrimination, Equality and Diversity - Subgroup on Equality Data, [Guidance Note on the National Implementation of the Equality Data Guidelines](#) (2024). IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024) pp 51-52. IHREC, [Ireland and the Sustainable Development Goals](#) (2023) pp. 16-22.

⁴²⁴ The National Equality Data Strategy's development was announced in 2022 and was supposed to be published in 2023: Department of Children, Disability and Equality, [Minister O'Gorman Announces the Development of a National Equality Data Strategy](#) (2022). There is no reference to the National Equality Strategy in the Programme for Government 2025. IHREC welcomed the earlier commitment to develop a National Equality Strategy and related commitments to identify gaps in equality data, provide guidance on how to fill those gaps, develop standard practices in the classification of data, and build an Equality Data Hub. IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024) pp 51-52. We note UN recommendations in this regard. UN Committee on Economic Social and Cultural Rights, [Concluding Observations on the fourth periodic report of Ireland \(2024\) E/C.12/IRL/CO/4](#), para 19 (b); UN Committee on the Rights of the Child, [Concluding Observations on the combined fifth and sixth periodic reports of Ireland \(2023\) CRC/C/IRL/CO/5-6](#), Para 10; UN Committee on the Elimination of Discrimination against Women, [Concluding Observations on the combined sixth and seventh periodic reports of Ireland \(2017\) CEDAW/C/IRL/CO/6-7](#), Para 19 (d); European Committee of Social Rights, [Conclusions 2019 \(2020\)](#).

⁴²⁵ IHREC, [Ireland and the International Covenant on Civil and Political Rights](#) (2022). IHREC, [Ireland and the Convention on the Rights of the Child](#) (2022). IHREC, [Ireland and the Council of Europe Convention on preventing and combating violence against women and domestic violence](#) (2023). IHREC, [Submission to the Department of the Taoiseach on the European Semester 2023 and the National Reform Programme](#) (2023). IHREC, [Ireland and the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment](#) (2024). IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024). IHREC, [Ireland and the International Convention on the Elimination of All Forms of Discrimination Against Women 2025](#) (2025). The last National Disability Survey was conducted in 2006. We note the Government has identified a number of areas with insufficient data including assistive technology use, travel patterns, employment preferences, and career progression post-welfare benefits. DCEDIY Presentation at the Disability Symposium (13 May 2024). Central Statistics Office, [National Disability Survey \(2006\)](#).

equality data in relation to mental health and disabled people residing in institutions,⁴²⁶ economic, social and cultural rights,⁴²⁷ income inequality,⁴²⁸ access to justice,⁴²⁹ disabled women⁴³⁰ and children.⁴³¹

Article 16 of the EU Directives on Standards for Equality Bodies provides that Member States shall ensure that equality bodies collect data on Member State activities, are able to access statistics related to the rights and obligations derived from EU Equality Directives and can make recommendations on which data is to be collected in relation to the rights and obligations derived from EU Equality Directives.⁴³²

⁴²⁶ We have called for the establishment of a robust, comprehensive and publicly assessable data system to provide for the collection, processing and publication of disaggregated data to effectively monitor the reduction of seclusion and restraint over time. We have also recommended that data on seclusion and restraint should be disaggregated by equality grounds and impairment groups and that such statistical information should be routinely published and made publicly and research accessible. IHREC, [Submission to the Mental Health Commission's Public Consultation on the Rules and Code of Practice Governing the use of Seclusion and Restraint](#) (2021) pp. 19-20.

⁴²⁷ IHREC, [Ireland and the International Covenant on Economic, Social and Cultural Rights](#) (2024) pp. 51-52.

⁴²⁸ We have highlighted the limitation of current methodologies for measuring income inequality in Ireland, with research suggesting that voluntary surveys, including the Household Finance and Consumption Survey, underestimate aggregate wealth within the wealthiest households, and fail to capture the nuanced inequalities experienced by structurally vulnerable groups, including the nuanced experiences of households with disabled persons, noting that measurement of income alone does not account for the substantial extra costs of living. IHREC and ESRI, Karina Doorley, Theano Kakoulidou and Agathe Simon, [Adjusting Estimates for the Cost of Disability](#) (2024); IHREC, [Ireland and the Sustainable Development Goals \(2023\)](#), pp. 15-16; 19-20; 21-22. We have recommended that the State strengthens its system of data collection to capture regional, county and electoral-district level data on poverty and its root causes, informed by the direct participation of people living in poverty, including children and disabled people.

⁴²⁹ There is a dearth of comprehensive data regarding disabled people accessing and working in the justice system, including, for example, children with disabilities and disabled parents in childcare proceedings. IHREC, [Access to Justice: Implementation of Article 13 of the UN Convention on the Rights of Persons with Disabilities](#) (2024) pp. 46-48.

⁴³⁰ IHREC has recommended national surveys to document incidences of violence against structurally vulnerable women and their experiences in accessing supports and justice, and emphasised the importance of improvements in disaggregated data, including on disabled women and girls. IHREC, [Ireland and the Council of Europe Convention on preventing and combating violence against women and domestic violence](#) (2022) pp. 36-44.

⁴³¹ IHREC, [Ireland and the Rights of the Child Submission to the Committee on the Rights of the Child on Ireland's combined fifth and sixth periodic reports](#) (2022) pp. 18-19.

⁴³² See European Union, [Standards for Equality Bodies in the Field of Equal Treatment and Equal Opportunities](#).

Monitoring systems established under the forthcoming NDS should be developed in line with EU Equality Directives and international guidance⁴³³ with the active participation of rights holders throughout the data planning, collection, dissemination and analysis processes. Ambitious targets should be set from the outset with clear indicators to benchmark progress.⁴³⁴

We recommend that the Committee ask the State about:

The status of the National Equality Data Strategy and investments made in the national equality data infrastructure.

How the National Statistics Board's Strategic Priorities for Official Statistics and the National Data Infrastructure realises UNCRPD obligations to collect, report and publish in accessible formats equality data, including data on the rights of disabled people.

The legislative basis for the collection of disaggregated equality data.

The status of the transposition of the EU Directives Article on 'Data collection and access to equality data'.

The status of the data collection methodology and approach in the National Disability Strategy.

⁴³³ Including systems for collecting, analysing and reporting data, and the development of benchmarks and indicators. OHCHR, [Indicative Indicators](#). See also [UNSD — Methodology](#). The UN Praia Programme on Governance Statistics, European Handbook on Equality Data, [Equality data collection - European Commission](#).

⁴³⁴ IHREC, [Ireland and the Sustainable Development Goals](#) (2023) pp. 15-16; 19-20; 21-22. Our DAC has stressed the need for peer-to-peer training and capacity strengthening in relation to data collection and use. They also highlighted that data collection must be able to assess implementation of the right to independent living. This includes but is not limited to the topics of institutionalisation, housing and transport and that data should make visible "the mismatch between the progression of disability issues and the progress within Irish Society." Our DAC has further called for a baseline to be established from the outset, expressing concern that the previous NDS was based on outdated data.

Article 33: National Implementation and Monitoring

IHREC is the IMM under the UNCRPD.⁴³⁵ We are supported in our role by a ‘DAC’, a statutory committee, established in 2019.⁴³⁶

We stress the State’s obligations to comply with the standards established by Articles 4(3) and 33(3) of the UNCRPD and elaborated by General Comment No 7 of the Committee on the UNCRPD. There is an imperative on the State, through the forthcoming NDS and other policies, to properly support and empower DPOs through the provision of stable, multi-annual funding, including core funding; suitably designed and accessible engagement processes; and provision of information including appropriately disaggregated data and statistics.⁴³⁷

IHREC’s expanded mandates⁴³⁸ have not been matched by annual budgetary increases to adequately resource their delivery.⁴³⁹ We reiterate our requirement for a stable, multi-annual

⁴³⁵ Following the ratification of the UN Convention on the Rights of Persons with Disabilities in 2018, the Irish Government enacted the [Assisted Decision-Making \(Capacity\) \(Amendment\) Act 2022](#). The Act designated the Commission as the UNCRPD IMM, as provided for by Article 33 of the Convention, and mandated the NDA to provide information and advice to the IHREC, including the development and provision of statistical information if required, in order to assist it in carrying out its functions as the UNCRPD IMM. [Assisted Decision-Making \(Capacity\) \(Amendment\) Act 2022](#). Paragraph 103 provides for an amendment to the [Irish Human Rights and Equality Commission Act 2014](#), to provide that IHREC will “promote and monitor the implementation in the State of the Convention on the Rights of Persons with Disabilities.” Paragraph 100 provides for an amendment to the [National Disability Authority Act 1999](#), to provide that the NDA will “provide information and advice to the Irish Human Rights and Equality Commission, including the development and provision of statistical information if required, in order to assist it in carrying out its functions under section 10 (2)(ha) of the *Irish Human Rights and Equality Commission Act 2014*.”

⁴³⁶ Details of current DAC members available on our website, [IHREC, Members of the Disability Advisory Committee](#).

⁴³⁷ We recommend that the forthcoming NDS commits to delivering on this obligation, including, but not limited to, by resourcing DPOs to attend domestic and international UNCRPD monitoring activities, including UN sessions (not only UNCRPD but also others); adequate funding to generate and engage with policy analysis; and structures to engage with the UNCRPD focal point that are empowering for DPOs and disabled people. We recommend that the Strategy commits to ensuring representation of diverse and intersecting identities, backgrounds, impairment types and views on any DPO advisory group.

⁴³⁸ These include our role as National Rapporteur on the Trafficking of Human Beings, Independent Monitoring Mechanism under the UNCRPD, the proposed co-ordinating NPM body in relation to OPCAT, and as a designated Article 77 body under the EU Artificial Intelligence Act.

⁴³⁹ Despite receiving an overall increase of 13% in our Budget for 2025, we do not have the level of funding required to meet our mandate in full on behalf of the State. We have previously corresponded to the State that

budget to carry out our mandates independently, without impacting on our ability to carry out our existing statutory functions.⁴⁴⁰ We emphasise the importance of the EU Directives on Standards for Equality Bodies,⁴⁴¹ to be transposed by June 2026, which have introduced a legal requirement on EU Member States to provide multi-mandate bodies⁴⁴² with adequate human, technical and financial resources to perform their tasks and competencies effectively.⁴⁴³

We note the State's obligation to ensure regular and timely engagement with the IMM, to ensure due consideration and response to the IMM's recommendations with regard to implementation of the UNCRPD, and to ensure that IMM's are meaningfully involved and participate, in an independent capacity.

our budget allocation has not been increased to provide for the development and staffing of our expanding functions, in a way that would give meaningful effect to new mandates. See IHREC, [Correspondence to An Taoiseach on the adoption of EU Directives on Standards for Equality Bodies](#) (25 June 2024). IHREC, [Correspondence to the Minister for Children, Disability, Equality, Integration and Youth re. budgetary allocation](#) (6 July 2022).

⁴⁴⁰ This should cover unanticipated costs, be linked to the rising costs of inflation; account for public sector pay agreements and salary increments; and allow a margin of budgetary contingency for responding to emerging human rights issues. IHREC, [Mid-Term Report to the UN Human Rights Council for the Third Cycle of the Universal Periodic Review of Ireland](#) (2024) p. 2.

⁴⁴¹ On 7 May 2024, the Council of the European Union formally adopted the EU Directives on Standards for Equality Bodies in the field of equal treatment and equal opportunities. Member States will have two years to adapt their national legislation to the provisions of the Directives, which lay down standards for equality bodies to ensure that people enjoy a common minimum level of protection against discrimination. The Directives cover the mandate, independence, resources, tasks and powers of equality bodies to (1) engage in the prevention of discrimination and awareness raising activities and (2) deal with cases of discrimination/assist victims. The Directives will strengthen the implementation and enforcement of EU and Irish equality legislation. European Union, [Standards for Equality Bodies in the Field of Equal Treatment and Equal Opportunities](#). Equinet, [Standards for Equality Bodies](#). The Directives are the first legally binding international instruments providing detailed standards for equality bodies, underlining their importance.

⁴⁴² Such as an NEB and a NHRI.

⁴⁴³ Where new mandates are given to equality bodies, they should receive the financial and other resources to effectively exercise their mandates. Recital 20 of the [Directive \(EU\) 2024/1500 of the European Parliament and of the Council of 14 May 2024 on standards for equality bodies in the field of equal treatment and equal opportunities between women and men in matters of employment and occupation, and amending Directives 2006/54/EC and 2010/41/EU](#); and Recital 21 of the [Council Directive \(EU\) 2024/1499 of 7 May 2024 on standards for equality bodies in the field of equal treatment between persons irrespective of their racial or ethnic origin, equal treatment in matters of employment and occupation between persons irrespective of their religion or belief, disability, age or sexual orientation, equal treatment between women and men in matters of social security and in the access to and supply of goods and services, and amending Directives 2000/43/EC and 2004/113/EC](#).

There has been inadequate meaningful engagement by the State with our expert advice and recommendations⁴⁴⁴ with our advice and recommendations not responded to or implemented.⁴⁴⁵

The IMM must be incorporated into policy monitoring structures including in forthcoming strategies. Structured engagement and formal participation of the IMM in monitoring must be promoted by Government focal point for the UNCRPD (the Department of Children, Disability and Equality).⁴⁴⁶

We stress the importance of transparent and accessible reporting and monitoring apparatus. We reiterate our call that the Minister provide an annual statement by the Minister for Children, Disability and Equality in the Dáil on Ireland's progress on implementation of UNCRPD.⁴⁴⁷

The Committee should ask the State about:

The status of national monitoring structures to monitor the implementation of the UNCRPD, and the procedures, funding and resourcing in place to ensure the full participation of disabled people and DPOs in all such structures.

Provision of adequate funding and resourcing to enable IHREC to fulfil its mandate as Ireland's IMM, including provision of multi-annual budgetary allocation at a level that ensures the effective discharge of all of IHREC's statutory functions.

⁴⁴⁴ We have communicated this to the European Commission as part of their [Rule of Law mechanism](#). We are not being provided with adequate access to information and access to officials in the policy and legislative process. We have had non-responses to requests for information and meetings from across different Government officials. We consider meaningful engagement to include regular, structured engagement that purposefully addresses issues of mutual concern.

⁴⁴⁵ In March 2024 we provided the State with a comprehensive list of our recommendations in relation to disabled people and implementation of the UNCRPD, together with a compilation of UN and Council of Europe recommendations to Ireland on the rights of disabled people, to support the State's development of a new NDS.

⁴⁴⁶ We understand that the forthcoming NDS is intended to represent a whole-of-government approach to advancing the implementation of the UNCRPD. We have engaged with senior officials to urge that clear and explicit reference be made to IHREC's role as the IMM to monitor the Strategy, and the provision of all relevant data and information to IHREC, in a timely and transparent manner.

⁴⁴⁷ IHREC, [Correspondence Re: Accession to the Optional Protocol to the United Nations Convention on the Rights of Persons with Disabilities](#) (2024).

Measures implemented to ensure structured and meaningful engagement, and cooperation with the IMM, by the focal point, and relevant Government bodies and public bodies,

How the State publicly reports on its implementation of the UNCPRD in Ireland in an accessible and transparent manner.



Coimisiún na hÉireann um Chearta
an Duine agus Comhionannas
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