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**The Stakeholder Group of**

**Persons with Disabilities**

**2018 High-level Political Forum Report**

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# Commonly used abbreviations

|  |  |
| --- | --- |
| ACDC | Action to the Community Development Center |
| ADF | African Disability Forum |
| CEDAW | Committee on the Elimination of Discrimination against Women |
| CM | Coordination Mechanism |
| CSOs | Civil society organizations |
| DPOs | Organizations of persons with disabilities |
| ECOSOC | United Nations Economic and Social Council |
| EU | European Union |
| GLAD | Global Action on Disability network |
| GNI | Gross national income |
| H.E. | His/ Her Excellency |
| HLPF | High-level Political Forum |
| IDA | International Disability Alliance |
| IDDC | International Disability and Development Consortium |
| IPMG | Indigenous Peoples’ Major Group |
| LDCs | Least Developed Countries |
| LGBTQI | Lesbian, gay, bisexual, transgender, queer and intersex |
| LLDCs | Landlocked Developing Countries |
| MGoS | Major Groups and other Stakeholders |
| MICs | Middle-income countries |
| NGO | Non-governmental organization |
| ODA | Official Development Assistance |
| SDGs | Sustainable Development Goals |
| SGPwD | Stakeholder Group of Persons with Disabilities |
| SIDS | Small Island Developing States |
| STI | Science, technology and innovation |
| UAE | United Arab Emirates |
| UN | United Nations |
| UNCRPD | United Nations Convention on the Rights of Persons with Disabilities |
| UNDESA/ OISC | United Nations Department of Economic and Social Affairs Office of Intergovernmental Support and Coordination for Sustainable Development |
| UNDSD | United Nations Division for Sustainable Development |
| UNFPA | United Nations Population Fund |
| UNGA | United Nations General Assembly |
| UNICEF | United Nations International Children’s Emergency Fund |
| VNR | Voluntary National Review |
| WAFOD | West African Federation of Persons with Disabilities |

**The Stakeholder Group of Persons with Disabilities**

**2018 HLPF Report**

# Executive Summary

The High-level Political Forum (HLPF) is the main United Nations (UN) platform on sustainable development, playing a central role in the follow-up and review of the 2030 Agenda for Sustainable Development and the Sustainable Development Goals (SDGs) at the global level. As part of its follow-up and review mechanisms, the 2030 Agenda encourages Member States to “conduct regular and inclusive reviews of progress at the national and sub-national levels, which are country-led and country-driven.” These national reviews serve as a basis for the regular reviews by the HLPF. As stipulated in paragraph 84 of the 2030 Agenda, regular reviews by the HLPF are voluntary, state-led, undertaken by both developed and developing countries, and provide a platform for partnerships, including through the participation of Major Groups and other Stakeholders (MGoS).

The 2018 HLPF was held from Monday, 9 July, to Wednesday, 18 July 2018, including a three-day ministerial meeting of the forum from Monday, 16 July, to Wednesday, 18 July 2018 in New York. The theme of the forum was "Transformation towards sustainable and resilient societies". The set of Goals reviewed in depth included the following,

* Goal 6. Ensure availability and sustainable management of water and sanitation for all;
* Goal 7. Ensure access to affordable, reliable, sustainable and modern energy for all;
* Goal 11. Make cities and human settlements inclusive, safe, resilient and sustainable;
* Goal 12. Ensure sustainable consumption and production patterns;
* Goal 15. Protect, restore and promote sustainable use of terrestrial ecosystems, sustainably manage forests, combat desertification, and halt and reverse land degradation and halt biodiversity loss; and
* Goal 17. Strengthen the means of implementation and revitalize the Global Partnership for Sustainable Development, that is considered each year.

In 2018, 48 countries volunteered to report on their progress achieved in implementing the SDGs. These countries include: Albania, Andorra, Armenia, Australia, Bahamas, Bahrain, Benin, Bhutan, Cabo Verde, Canada, Colombia, Dominican Republic, Ecuador, Egypt, Greece, Guinea, Hungary, Iceland, Ireland, Jamaica, Kiribati, Lao People’s Democratic Republic, Latvia, Lebanon, Lithuania, Mali, Malta, Mexico, Namibia, Niger, Paraguay, Poland, Qatar, Republic of the Congo, Romania, Saudi Arabia, Senegal, Singapore, Slovakia, Spain, Sri Lanka, State of Palestine, Sudan, Switzerland, Togo, United Arab Emirates, Uruguay and Vietnam.

Highlights from HLPF 2018 for the Stakeholder Group of Persons with Disabilities (SGPwD) are as follows:

* + Maria Soledad, the UN Secretary-General’s Special Envoy on Disability and Accessibility, was an opening panellist at HLPF 2018.
	+ Mr. Idriss Alzouma Maiga, President of African Disability Forum (ADF) and West African Federation of Persons with Disabilities (WAFOD), lead discussant, called on Member States to fulfill their commitments to the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) as they implement the 2030 Agenda during the panel on Least Developed Countries (LDCs), Landlocked Developing States (LLDCs) and Middle-Income Countries (MICs).
	+ The Stakeholder Group of Persons with Disabilities delivered six interventions during the first week of the HLPF.
	+ For the first time during HLPF, an intervention in International Sign language was delivered.
	+ The Stakeholder Group of Persons with Disabilities delivered five statements on behalf of other Stakeholders during the Voluntary National Reviews during the Ministerial week.
	+ In the 46 Voluntary National Reviews (VNRs), 36 included references to persons with disabilities.
* The Ministerial Declaration was adopted with three important references to persons with disabilities, including in WASH.
	+ The SGPwD held an official side event on the inclusion of persons with disabilities in societies. The event addressed the implementation of Goal 11 for persons with disabilities by highlighting the importance of universal design, accessibility, accessible transportation, independent living and resilience.
	+ The Stakeholder Group of Persons with Disabilities had 31 participants attend the HLPF.

# Development of position paper by the Stakeholder Group of Persons with Disabilities

In response to the UN Division on Sustainable Development (UNDSD) Secretariat’s call, the International Disability Alliance (IDA) alongside the International Disability and Development Consortium (IDDC) initiated the preparatory process to draft a position paper on behalf of persons with disabilities for the High-level Political Forum 2018. Through a call widely distributed on the IDA and IDDC online databases, individuals shared information/ research/ material work on the theme and Goals under review in 2018.

Under the leadership of IDA and IDDC a draft position paper reflecting key messages was produced in accordance with the 6 Goals under review and the 2018 HLPF theme. The draft position paper was then submitted to the IDA and IDDC online databases for review and comments. To guarantee the accessible and transparent participation of all persons with disabilities, everyone was encouraged to provide comments on the paper through the online document. Following numerous rounds of consultations, the final draft was sent out for final endorsement and signatures. On behalf of the Stakeholder Group of Persons with Disabilities, it was submitted to UNDSD Secretariat in April 2018.

## Content

The paper mainly focused on how to make cities and human settlements inclusive, safe, resilient and sustainable for persons with disabilities. The paper emphasized that to make cities and human settlements inclusive, safe, resilient and sustainable, all people must be included, diversity must be celebrated, and all must have support to live and be included in cities and human settlements. Since resilience is essential for achieving sustainable development, the furthest behind, such as persons with disabilities, must be meaningfully included. The 2030 Agenda embodies a commitment to include those furthest behind and to reduce their risks to economic, social and environmental shocks. The Sustainable Development Goals can only be realized for persons with disabilities if the UN Convention on the Rights of Persons with Disabilities guides the implementation. For details on the Stakeholder Group of Persons with Disabilities position paper [click here](http://undocs.org/E/HLPF/2018/3).

# Pre-Meetings

## Major Groups and other Stakeholders

Pursuant of A/RES/67/290, the Stakeholder Group of Persons with Disabilities actively participated at the 2018 HLPF. They actively participated in the HLPF pre-meeting organised by the Major Group and other Stakeholders HLPF Coordination Mechanism (CM) in partnership with UNDESA/OISC on Sunday, 9th July 2018 at the Church Centre in New York. This was a preparatory meeting for participants to prepare and coordinate their engagements in the HLPF meetings and sessions. The Voluntary National Reviews were led by the SGPwD and they delivered numerous presentations during the pre-meeting attended by over 150 representatives of MGoS.

## Stakeholder Group of Persons with Disabilities

After the HLPF pre-meeting, the SGPwD delegation convened a work dinner to discuss the HLPF programme. During this meeting, attended by 18 persons with disabilities and advocates, Idriss Alzouma Maiga, President of ADF and WAFOD, welcomed the participants and delivered the opening remarks.

# Monday, 9th July 2018

## Opening: How far have we come on the SDGs?

ECOSOC President Marie Chatardová opened HLPF 2018 on Monday, 9 July, and invited Member States to adopt the provisional agenda (E/HLPF/2018/1).

Liu Zhenmin, UN Under-Secretary-General for Economic and Social Affairs, presented the UN Secretary-General’s SDG Progress Report (E/2018/64). In his remarks, he noted that although social protection is key to poverty alleviation, close to 4 billion people were still left without social protection in 2016. This is accompanied by a global deficit of social protection for marginalized groups such as older persons, mothers with new-born babies, children, people with severe disabilities and the unemployed, leaving many without the means to make ends meet.[[1]](#footnote-1)

The forum generally agreed that there has been progress in many areas of the Goals and targets. For instance, there has been a widespread adoption of the SDGs into national development plans and strategies and the creation of approaches and structures to promote, coordinate and integrate implementation efforts. The forum also maintained the key message of the report of the Secretary-General entitled “Progress towards the Sustainable Development Goals”. The report states that despite positive trends, there is still a long way to go to reach the Goals. Major disparities in achievements exist, both within and between countries. Mainly, the forum expressed concern that the LDCs, LLDCs and Small Island Developing States (SIDS) continue to lag behind on almost all targets, putting them at a higher risk of being left behind.

Keynote speaker, María Soledad Cisternas Reyes, the UN Secretary-General’s Special Envoy on Disability and Accessibility, highlighted that for the implementation of the SDGs at the national level, there are several civil society groups that wish to have more space for participation to contribute to the necessary transformations proposed by the 2030 Agenda. Historically marginalized sectors still do not know about the SDGs, nor do they have the necessary support for their full and effective participation in society, as is the case of many persons with disabilities and older persons, among others. She stated that, currently, there are more than one billion persons with disabilities worldwide and almost 800 million are older persons. She added that these figures are estimated to increase. She also remarked that in building human societies and human settlements which are inclusive, sustainable and resilient, this includes moving towards intelligent cities. In her concluding remarks, she stated that if technology is not accessible, it will become one more barrier for millions of people throughout the world, including persons with disabilities, older persons, and other sectors. [Click here to read her full statement.](https://sustainabledevelopment.un.org/content/documents/27319Discurso_HLPF_MSCR_9julio.pdf)

## Implementing the 2030 Agenda for resilient societies

This session was organized into two sub-sections chaired by ECOSOC President Marie Chatardová. The first sub-session on “Reviewing progress in achieving the SDGs” highlighted the global snapshot of progress made towards the 17 Goals and remaining gaps ahead. The sub-session intended to identify areas where policies and actions need to be strengthened to accelerate progress. This sub-session consisted of presentations on global trends, sector-specific trends, policies and principles of the 2030 Agenda.

During this sub-session the moderator, Emily Pryor, Executive Director of Data2X, highlighted that as the Executive Director of Data2X, the gender data alliance housed at the UN Foundation, she is committed to increasing the collection and use of quality gender data to improve women's and girls' lives. She was hopeful that similar stories of disaggregated data leading to change exist for rural populations, youth, older persons, persons with disabilities, and more.

On behalf of the Stakeholder Group of Persons with Disabilities, Idriss Alzouma Maiga, President of ADF and WAFOD, stressed the need for data disaggregation by disability. He stated that if persons with disabilities are not counted, then they do not count and will be left behind. He also expressed concern that there were only two references to persons with disabilities in the 2018 Secretary-General’s Progress Report on SDG implementation. He recommended that Member States invest in high quality, timely, reliable and disaggregated data for reporting on the SDGs, and to foster global partnerships on data to ensure evidence-based policy making.  [**Click here to read his full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/alzouma_maiga_idriss_9_july_oz_and_po_3.docx)

Responding to comments from the interactive discussion with delegates, Panellist Grace Bediako, National Development Planning Commission, Ghana, remarked that they always disaggregate the data they collect by age, gender, and disability. However, increasingly, national statistical institutions are using data from other sources that they haven't collected themselves. For example, national statistical institutions are using administrative data sources, which are sources held by other governmental bodies. Therefore, to influence the sources of data, it is crucial to involve the national planning authority in all data collection processes as early as possible.

The second sub-session on “Better data for sustainable development” focused on data as a key enabler for achieving the SDGs. It was noted that there is a great demand for quality, accurate, open, timely and sufficiently disaggregated data and statistics for countries to implement the necessary policies and measures to achieve SDGs and fulfil the ambition of reaching those that are the furthest behind. To meet this demand, significant efforts are needed to strengthen countries’ capacity to collect, integrate, analyse, communicate and use data from multiple sources. To do so, this requires strong political commitment and increased resources to support global and national efforts to strengthen statistical systems and leverage technology and synergies across the data ecosystems through partnerships among multiple stakeholders within national statistical systems and beyond. This sub-session brought together statisticians and other data and policy experts to review ways to increase country capacity and resources for data and statistics for the 2030 Agenda.

Panellist Mr. Zachary Mwangi Chege, Chair of the UN Statistical Commission, Chief Statistician of Kenya National Bureau of Statistics, highlighted in his presentation that disaggregation of data by disability was among the statistical areas which requires immediate capacity building in Kenya.

## Review of SDG 6 implementation

This session reviewed the implementation of SDG 6. It was chaired by Mahmadamin Mahmadaminov, Permanent Representative of Tajikistan and ECOSOC Vice President.

During this session, a representative from the Women’s Major Group highlighted that women, particularly women with disabilities, are among the most impacted when water and sanitation are not secure. Mainly, they face a higher risk of gender-based violence when travelling to collect water and access sanitation. In addition, they lose work opportunities throughout their lifetime due to the time burdens associated with their disproportionate responsibilities for unpaid work.

# Tuesday, 10th July 2018

On Tuesday, 10 July, the forum continued with thematic reviews on: transformation towards sustainable and resilient societies – building resilience; and advancing science, technology and innovation (STI) for the SDGs. In the afternoon, the review of SDG implementation continued, with a session on SDG 7.

## Thematic review: Transformation towards sustainable and resilient societies – building resilience

During the morning session, the forum reviewed transformation towards sustainable and resilient societies – building resilience. This session was chaired by Inga Rhonda King, ECOSOC Vice-President. During this session, Mr. Defeje Wordofa, UNFPA Deputy Executive Director, stated that to build resilience people must be put at the centre, especially persons with disabilities. He emphasized that it is not just about addressing their needs but upholding their rights.

On behalf of the Stakeholder Group of Persons with Disabilities, Lan Anh Nguyen, from Action to the Community Development Center (ACDC) in Vietnam, noted that national policies and strategies were still not fully inclusive and responsive to the rights of persons with disabilities, and that there was still a lack of evidence-based, reliable and high quality data on persons with disabilities. She emphasised that in order to achieve inclusive, resilient and sustainable development for all, especially in poverty reduction, education, employment, health and gender equality, resilience-building of communities should ensure equality of opportunities for full participation of persons with disabilities in all of their community activities. [**Click here to read her full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/lan_ahn_10_julyfinal.docx)

# Wednesday, 11th July 2018

## Thematic review: Transformation towards sustainable and resilient societies – SIDS perspective

HLPF plays a special role in addressing the sustainable development challenges facing Small Island Developing States (SIDS). This session examined the issues of building island and community resilience through the water and sustainable energy lens. Reducing poverty, triggering economic growth and building resilient societies requires harnessing the potential of ecosystems to satisfy the demands of water and energy, which are essential for life, health and wellbeing, and economic growth and development. This session was chaired by H.E. Mr. Marc Pecsteen, Vice-President of ECOSOC and H.E. Ms. Henrietta Elizabeth Thompson, Permanent Representative of Barbados to the UN and former Minister for Energy and Environment of Barbados.

During this session, on behalf of the Stakeholder Group of Persons with Disabilities, Savina Nongebatu stressed that SIDS should take steps to ensure the active participation of persons with disabilities in all disaster risk management planning and implementation. She urged Member States to incorporate the Universal Design principle to ensure that information, buildings, products and environments are inherently accessible from the outset. [**Click here to read her full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/savina11_july_final_3.docx)

## Transformation towards sustainable and resilient societies – LDC, LLDC, AND MIC perspectives

This thematic review session was organized to evaluate the progress and challenges in achieving transformation towards sustainable and resilient societies in the least developed countries (LDCs) and landlocked developing countries (LLDCs) which face specific challenges. It was noted that these countries must be prioritized, and the challenges must be overcome if no one is to be left behind in achieving the SDGs. This session also addressed the specific challenges faced by middle-income countries (MICs).

The lead discussant, Idriss Alzouma Maiga, President of ADF and WAFOD, highlighted that climate change, debt sustainability, economic growth and sustainable livelihoods, access to markets and sustainable transport are some of the major challenges for the world. LDCs, LLDCs, MICs, and conflict and post-conflict countries, with their structural vulnerabilities, are affected by these challenges much more. The overall social crisis creates a substantial burden on persons with disabilities, as one of the most marginalized groups in society. He recommended that as we approach the 2020 deadline of the Istanbul Program of Action for LDCs, additional steps should be taken to address the remaining key challenges. These steps include:

1. Improve productivity, invest and guarantee inclusive economic growth to overcome the marginalization of communities, including persons with disabilities;
2. Support investments in accessible infrastructure, transportation and to ensure access to modern affordable and sustainable energy sources without adding additional living costs due to disability, including essential extra fuel costs on household expenditures;
3. Support the empowerment of persons with disabilities to publicly lead and promote universally accessible response, recovery, rehabilitation and reconstruction approaches to disaster risk reduction;
4. Scale up efforts towards the localization and domestication of the SDGs and, at the same time, ensure the mainstreaming of disability and gender equality in local policies and programs;
5. Invest in high quality, timely, reliable and disaggregated data for reporting on SDGs, and foster global partnerships on data such as ‘Together we count to be counted’, to ensure evidence-based policy making;
6. Encourage Member States to fulfil their commitments to the United Nations Convention on the Rights of Persons with Disabilities as they implement the 2030 Agenda.

[**Click here to read his full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/hlpf-idriss-speech_11jul_keynote_en_fr_3.docx)

During discussions, the NGO Major Group stated that in order to leave no one behind, solutions should not only address the easy‑to‑reach and the economically-developed areas. They should also specifically target the vulnerable, the rural and remote communities, and support the social and economic development of currently underserved citizens, including women, refugees, youth, persons with disabilities, and those living in poverty. For all stakeholders to advance and address the specific needs of vulnerable communities is to act in accordance with our only goal, to leave no one behind in this transformation.

## Review of SDGs implementation: SDG 11 – Make cities and human settlements inclusive, safe, resilient and sustainable

This session was organized to explore the topic of building inclusive, safe, resilient and sustainable cities and human settlements through the implementation of Goal 11 and its interlinkages with the rest of the Sustainable Development Goals. Sustainable urbanization has a widespread impact on the majority of the global population currently living in urban areas, but also has important implications for those living in rural areas. It has clear impacts on a wide range of issues within the 2030 Agenda, such as sustainable consumption and production, affordable and clean energy, sustainable transportation, clean water and sanitation and life on land. This session explored the interconnected ecosystem of our cities and human settlements, and the multi-dimensional issues that must be addressed in order to achieve inclusive, safe, resilient, and sustainable cities and human settlements. This session also examined the critical role that local and regional governments play in addressing these collective challenges and ensuring that the 2030 Agenda reaches diverse populations living in cities and those most often left behind.

Panellist Mr. Jean Todt, The UN Secretary-General’s Special Envoy for Road Safety, concluded his remarks by re-stating SDG target 11.2, “to provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, women, children, persons with disabilities and older persons by 2030.” He stated that achieving this target would create a beautiful reality for sustainable mobility and transport. A reality that includes road safety as a key consideration in urban planning and infrastructure design. A reality that addresses vulnerable road users such as children, cyclists and pedestrians. A reality that provides a future where every child, regardless of where they live, can have a safe journey to and from school, whether it is by foot, public transport, or as passengers in motor vehicles.

Panellist Ms. Leilani Farha, The UN Special Rapporteur on Adequate Housing, also highlighted that as it stands, housing conditions globally are fraught. She noted that it is estimated that 1.6 billion people are inadequately housed worldwide and that close to 900 million people are living in informal settlements and encampments in both the Global North and South. She confessed to seeing people live on sidewalks in India and California, beside railway lines in Mexico and the Philippines, and without electricity in Cabo Verde and Serbia. She has also seen children playing on garbage heaps in informal settlements like they are trampolines and persons with disabilities languishing in darkened rooms, cut off from society.

Panellist Ms. Maimunah Mohd Sharif, Executive Director of UN-Habitat, stated that good data needs to be disaggregated by income, gender, age, race, ethnicity, migratory status, disability and geographic location to better understand who is at risk of being left behind the most in the implementation of SDG 11. She noted that UN Agencies and partners have advanced in principles, norms and standards and the identification of gaps, but urged them to go further by preparing training modules for the collection, analysis and use of disaggregated data.

During discussions, the Stakeholder Group on Ageing stated that older persons face discrimination in cities due to their disabilities. South Africa also highlighted that safety in cities means protection of the most marginalized groups, especially persons with disabilities, through targeted interventions to ensure that safety in cities indeed means leaving no one behind. The Major Group for Children and Youth stated that budgeting and planning must be age, gender and disability responsive to prevent violence, discrimination and abuse. This calls for more effective measures to promote inclusive public spaces. The Indigenous Peoples’ Major Group (IPMG) highlighted that States often abscond from their responsibilities towards indigenous peoples as equal citizens, and indigenous persons with disabilities are among the most affected.

On behalf of the Stakeholder Group of Persons with Disabilities, Ana Peláez highlighted that for persons with disabilities Goal 11 means removing barriers in accessing the built environment, information and communication, including information and communication technologies. These barriers deny persons with disabilities access to basic urban services, including housing, roads, public spaces, transportation, sanitation and water, health, education, emergency and disaster response. She noted that safe and inclusive mobility is central for guaranteeing the participation of persons with disabilities to the life of their community and access to economic, social, cultural and political spheres of society. She discussed an exampling in Asia and Africa, where it has been proven that there are linkages between safe mobility and road safety, safe mobility and inclusive education, and safe mobility and socio-economic insertion. [**Click here to read her full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/ana_11_july_final.docx)

Thursday, 12th July 2018

## **Thematic review: Perspectives of society – Session organized with Major Groups and other Stakeholders**

The session was organised in collaboration with the HLPF Coordination Mechanism of Major Groups and other Stakeholders with a focus on the recommendations of MGoS around the implementation, follow-up, and review of the 2030 Agenda, with a particular emphasis on the theme of the 2018 HLPF and the specific Goals being reviewed. It was also organised to survey the contributions of MGoS themselves to the overall successful implementation of the 2030 Agenda, especially at the national level and during ongoing Voluntary National Review processes.

Panellist Ms. Haydee Rodriguez, Executive Director, Unión de Cooperativas de Mujeres Productoras “Las Brumas” (Sendai Stakeholders), stated that the full engagement of stakeholders, including groups led by grassroots women and men, young and old, persons with and without disabilities, in cities and rural communities, is not only essential from the perspective of social justice and our common aspiration “to leave no one behind” – engaging stakeholders simply makes sense to apply all-of-societies talents to solve common problems and to keep ourselves accountable and on track for achieving the Sustainable Development Goals.

On behalf of the Stakeholder Group of Persons with Disabilities, Ana Peláez highlighted that inclusive, safe, sustainable and resilient societies cannot be defined only by bricks and mortar, neither only by physical access. She stated that inclusive societies must be built on the principles secured in CRPD Article 3 by respect for inherent dignity, individual autonomy including the freedom to make one’s own choices, and independence of persons; non-discrimination; full and effective participation and inclusion in society; respect for differences and acceptance of persons with disabilities as part of human diversity and humanity; equality of opportunity; accessibility; equality between men and women; respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities. She emphasized that in order to realize inclusion for persons with disabilities, policy makers must be informed by collecting evidence-based data that are disaggregated by disability using the short set of questions developed by the Washington Group, and by properly consulting persons with disabilities and their representative organizations on the design, implementation and monitoring of SDG plans. [**Click here to read her full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/ana_12_july_final.docx)

At the close of the session, **H.E. Mr. Jerry Matthews Matjila**, Vice-President of ECOSOC, highlighted that the forum took note of the views brought by the Stakeholder Group of Persons with Disabilities, specifically that when planning for SDGs implementation all stakeholders should always consider persons with disabilities, most especially those in rural areas.

## Review of SDGs implementation: SDG 12 – Ensure sustainable consumption and production patterns

This session aimed to consider progress in achieving SDG 12, identify challenges at the global, regional and national levels, and recommend solutions in an integrated manner, through an exchange of lessons learned and best practices.

Panellist: Ms. Nur H. Rahayu, Director of Forestry and Conservation of Water Resources, Ministry of National Development Planning of Indonesia, stated that in Indonesia, different goals are implemented by keeping in mind the principle of leaving no one behind. This type of approach has been taken by the government in the hope that there is no interest from SDG beneficiaries who are not being accommodated, especially in regard to marginalized groups, such as children, ethnic minorities and persons with physical or mental disabilities.

Panellist: Ms. Jane Nyakang’o, President of the African Roundtable on Sustainable Consumption and Production, stated that mobilizing resources for implementing SDG 12 programs remains a challenge. In addition, the challenge of inclusion exists, especially for the vulnerable and marginalized groups such as indigenous peoples, women and persons with severe disabilities. She noted that these people are not sufficiently included in these programs.

Lead discussant Mr. Julius H. Cainglet, Vice President for Research, Advocacy and Partnerships of the Federation of Free Workers (Workers and Trade Unions Major Group), stated that sustainable consumption and production should be made more inclusive by inviting participation from workers, farmers, indigenous peoples, women with disabilities and other grassroot groups.

# Friday, 13th July 2018

## Review of SDGs implementation: SDG 17 – Strengthening the means of implementation and revitalize the global partnership for sustainable development

This session discussed the main challenges and opportunities for strengthening global partnerships and enhancing the means of implementation. Specific attention was given to exploring the existing mechanisms and potential innovations for mobilizing resources for the SDGs, including: (i) financing at both domestic and international levels, from public and private sources; (ii) best practice and experience in scaling up technology solutions; (iii) trends in South-South cooperation for building capacities for SDG implementation and investment; and (iv) overcoming challenges in the international trade and financial system. This was a platform for practitioners, policymakers and experts to share their views and suggestions, based on their most recent experiences and research.

During this session, the Australian representative stated that achieving the 2030 Agenda requires new sources of finance and new partnerships. Preparation for Australia’s first Voluntary National Review demonstrated the ways in which businesses, civil society and governments responded to challenges in delivering the SDGs. The founding co-chair of the Global Action on Disability (GLAD) Network brought together the private sector and agencies to advance disability inclusion in sustainable development and humanitarian action. The representative noted that Australia is working to address the challenge of disaggregating data to ensure no one is left behind, including supporting the development of individual measurement.

## Leaving no one behind: are we succeeding?

A central pledge contained in the 2030 Agenda for Sustainable Development is to ensure that no one is left behind. This session, chaired by H.E. Ms. Marie Chatardová, ECOSOC President, aimed to synthesize the messages that responded to the challenge of fulfilling the promise to leave no one behind from earlier HLPF sessions. The session took the view that by engaging all stakeholders, integrating policies, strengthening global partnerships for sustainable development and mobilizing the means of implementation needed to achieve the 2030 Agenda, the SDGs will be realized for all.

Keynote speaker Andrew Gilmour, Office of the UN High Commissioner for Human Rights, stated that persons with disabilities are segregated from society because they are thought to not to be able to contribute.

Rapporteur Douglas Keh, UN Development Programme, noted that there are communities that are historically discriminated against and some are still intentionally left behind. He urged Member States to come together to recognize this and adopt a whole-of-society approach, including those furthest left behind, as agents of change. He remarked that from the many testimonies during HLPF, it was clear that women, persons with disabilities, indigenous peoples and older persons are those most likely to face discrimination and deprivation, making them most likely to be left behind.

María Soledad Cisternas Reyes, the UN Secretary-General’s Special Envoy on Disability and Accessibility, highlighted that accessibility and the set of conditions that we need to see in the physical space of goods, services and technologies, need to be used by all in a better and more comfortable way. She stated that she saw universal accessibility and design as an unwritten target. She asked the panellists whether, in accordance with SDG 17, it is possible to create indicators to allow accessibility to be captured as a part of the way that many persons with disabilities across the world can exercise their economic, social and cultural rights.

Lead discussant Sakiko Fukuda‑Parr, member of the UN Committee for Development Policy, commented on the issue of identifying those who are left behind by stating that it is very interesting to note that where most of the VNRs talk about leaving no one behind, the groups that are the most frequently identified are women, children, older persons, and persons with disabilities.

Lead discussant Sylvia Beales, Gray Panthers, commented that aging is transforming the European world. Older persons are the fastest growing population group globally with almost 60% of older persons living in urban areas. Older persons do experience complex forms of exclusion and marginalization based on a range of intersecting inequalities that reinforce discrimination based on age, gender and disability.

Moderator, Manish Bapna, stated that the main challenge is financing the system in light of rising costs and changing demographics, and ensuring economic opportunities for all independent of their backgrounds, gender, disability, etcetera.

On behalf of the Stakeholder Group of Persons with Disabilities, Ndèye Dagué Guèye highlighted that the lack of rigorous disaggregated data on persons with disabilities exacerbates vulnerabilities by masking the extent of deprivation and disparities. Consequently, there is no accurate documentation on the discrimination encountered by persons with disabilities. Since persons with disabilities are not counted, then they don’t count. This has affected policymaking in planning and budgeting for reasonable accommodations, and persons with disabilities have largely fallen off the statistical “map”.  [**Click here to read her full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/deguye_13_july_final.docx)

## Summary of the first week

In the closing of the first week of HLPF, H.E. Ms. Marie Chatardová, ECOSOC President, stated that fostering the ambition of leaving no one behind without timely data is impossible and such challenges have slowed us from achieving the SDGs. She noted that the prevailing message from the first week was that solutions exist. There were countless examples of how the 2030 Agenda is being translated into concrete policies and measures. She remarked that it seemed that new ways of making policies are taking root with examples of more inclusive and evidence-based approaches. She added that that the use of statistics is gaining ground, encouraged stakeholders to leave no one behind, and called for a greater share of ODA to be dedicated to statistics.

# Ministerial week, 16th July 2018 – 18th July 2018

During the ministerial week of the HLPF, the forum conducted Voluntary National Reviews for the third time, where 46 countries presented Voluntary National Reviews (VNRs) regarding their country’s progress on the implementation of the SDGs. These countries included: Albania, Andorra, Armenia, Australia, Bahamas, Bahrain, Benin, Bhutan, Cabo Verde, Canada, Colombia, Dominican Republic, Ecuador, Egypt, Greece, Guinea, Hungary, Iceland, Ireland, Jamaica, Kiribati, Lao People’s Democratic Republic, Latvia, Lebanon, Lithuania, Mali, Malta, Mexico, Namibia, Niger, Paraguay, Poland, Qatar, Republic of the Congo, Romania, Saudi Arabia, Senegal, Singapore, Slovakia, Spain, Sri Lanka, State of Palestine, Sudan, Switzerland, Togo, United Arab Emirates, Uruguay and Vietnam. The reporting entailed presentations from individual Member States as well as panel presentations from groups of Member States, followed by interactive discussions. Subsequent to the presentations, the chair of the session opened the floor for questions and discussion. The Stakeholder Group of Persons with Disabilities actively participated throughout all VNRs, contributed in the statement writing and asked questions to government representatives on behalf of Major Groups and other Stakeholders.

The VNRs featured constant references to persons with disabilities. During the delivery of 46 VNRs, 36 made explicit reference to the inclusion and participation of persons with disabilities in their national implementation of SDGs. The Stakeholder Group of Persons with Disabilities delivered five statements on behalf of the Major Groups and other Stakeholders during the VNR presentations. These included statements delivered by Idriss Alzouma Maiga who asked the Government of Niger: “What steps will Niger take to ensure the CSO participation in all their diversity, including organizations of women, youth and persons with disabilities within the national reviews and evaluation of all development programs, in line with national and international legal and regulatory instruments? Will states commit to increase budgets to support the most vulnerable populations?” During the VNR segment by Armenia, Ireland, Namibia, Jamaica and State of Palestine, Alexandre Bloxs, from European Disability Forum, asked the Government of Namibia in International Sign language: “How does Namibia commit to carry out Article 5 of the UN Convention on the Rights of Persons with Disabilities that all persons are entitled to equal protection and equal benefit of the law?” Ana Peláez Narváez, Vice-President of the European Disability Forum and member of the UN Committee on the Elimination of Discrimination against Women (CEDAW), addressed the Government of Greece by saying: “It is highly important to have reliable, strong and accurate data. Could you elaborate on your strategy, in collaboration with your National Statistical Office, to collect data disaggregated by age, gender and disability?” In addition, she asked the Government of Switzerland: “How is Switzerland guaranteeing an inclusive and participatory process for the future Agenda 2030 process, that includes all, also persons with disabilities and sign language users?”; “How will the government tackle the much larger gap as compared with neighbouring states with regard to the real life situation and specific needs of persons with disabilities, such as physical and societal barriers, the non-existence of communication access in sign language, which is a prerequisite to participating in social and political processes, etc.?”; and “Will the Swiss Federal Administration systematically collect data disaggregated by different types of disabilities as required by the CRPD?” Mohammed Loutfy, representative of Disabled People’s International at the United Nations and Executive Director of the Arab Forum on the Rights of Persons with Disabilities, asked the Government of Lebanon: “What measures Lebanon will take to ensure transparent and inclusive monitoring and implementation of the Agenda 2030?”

# Monday, 16th July 2018

On the first day of the ministerial week, 14 Member States presented their VNRs. The countries that presented included Bahrain, Benin, Cabo Verde, Colombia, Ecuador, Kiribati, Lithuania, Mali, Greece, Guinea, Mexico, Slovakia, United Arab Emirates (UAE) and Viet Nam.

During the opening of ministerial segment, Jayathma Wickramanayake, the UN Secretary-General’s Envoy on Youth, encouraged countries to establish strong youth structures to ensure that young people, including young persons with disabilities, recognised stakeholders in local and national processes. She remarked that institutionalizing youth participation gives young people a chance to know the review process and to follow-up, build capacity to play an active role, collaborate with other groups in society in the joint effort of achieving, and holding the government accountable.

## Ecuador, Kiribati, Lithuania, Mali

During this panel presentation, the Government of Ecuador and Government of Lithuania identified persons with disabilities as a priority group of marginalized people in their social inclusion programs. His Excellency, the National Planning and Development Secretary of Ecuador, highlighted that Ecuador had been implementing public policies and priority programs, which target marginalized groups of people to create opportunities and close inequality gaps. He also stated that Ecuador has assessed progress made in terms of access to education, social security, health, water, food, housing, habitat, and environment. The indicator has shown that the rate of multidimensional poverty in the country declined from 37% to 34% in 2017. This social inclusion initiative prioritises children, young people, older persons, persons with disabilities, and their caregivers.

For Lithuania, His Excellency, the Minister of Environment, highlighted that the social dimension is one of the fundamental pillars of sustainable development. He noted that family is the foundation of a sustainable and resilient society, and as such, Lithuania pays great attention to social policies and support for families. Lithuania has created favourable conditions for sustainable financial growth for young families by introducing flat rate allowances for children and implementing financial incentives to help families establish their first home. Furthermore, he highlighted that Lithuania has started to organize the institutional care system. The institutional care system will enable every person with mental or physical disabilities to receive individual care services according to their needs.

When the floor was opened for discussions, Major Groups and other Stakeholders first highlighted that, in Mali, the government had yet to engage in strong political decisions to protect, most especially, older women and women with disabilities from violence. It was stated that Mali needed to step up its efforts in ensuring access to drinking water to all groups of people, such as persons with disabilities, older persons, youth and persons with chronic diseases in decision making to respect, protect and fulfil their rights. In Kiribati, although the VNR estimated a national poverty rate of 34% with female and elderly households overrepresented in the poorest 24% of household, children, including children with disabilities, are more likely to experience poverty. In Lithuania, the deinstitutionalization is not ambitious enough. Currently, there are 6,000 children with parents in social care homes, while the waiting list is growing by 200 monthly. Children and persons with disabilities must be living in the community. The panel was then asked, what its plans were to create mechanisms to engage youth, women, persons with disabilities, outer island populations, and other populations at risk of being left behind in the monitoring and implementation of the SDGs.

Teuea Toatu, Minister for Finance and Economic Development, in response to a question from Major Groups and other Stakeholders, highlighted that Kiribati offers special personal assistance to persons with disabilities.

## Greece, Guinea, Mexico, United Arab Emirates

**Greece**

During a session of individual VNR presentations, Member States highlighted the rights of persons with disabilities in the context of education. In this session, Ana Peláez Narváez asked the Government of Greece about their commitments around the political participation of persons with disabilities as full and engaged citizens. She noted that measures must be taken to give all persons with disabilities the right to vote, and not only persons with physical disabilities. Furthermore, she highlighted that leaving no one behind means ensuring the inclusion of marginalized groups, such as women, youth, persons with disabilities and others. She asked the Government of Greece: “It is highly important to have reliable, strong and accurate data. Could you elaborate on your strategy, in collaboration with your National Statistical Office, to collect data disaggregated by age, gender and disability*?”* [**Click here to read the full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/vnr_greece.docx)

In response, His Excellency, Alternate Minister of Environment and Energy of Greece, emphasised that Greece looks forward to a society without exclusion. He noted that this is why youth and persons with disabilities participate in the Economic and Social Committee. He highlighted that Greece had special policies in place for marginalized groups. For example, Greece has a special policy for 2.5 million people without health insurance. Finally, he noted that in their council, the federation of disabled persons plays a very important role in Greece’s discussions, as they want everyone to be involved.

**Mexico**

A representative from the Indigenous Peoples’ Major Group asked Mexico: “What is Mexico's strategy to implement and to guarantee both data disaggregation which are appropriate for the participation of women, children, persons of African descent, persons with disabilities and LGBTQI populations to leave no one behind, as well as to respect free, prior and informed consent of indigenous people?” However, due to time constraints, the Government of Mexico was unable to respond to the question.

**United Arab Emirates (UAE)**

Responding to remarks and questions from delegates, Abdulla Lootah, Vice-Chair of the National Committee on the SDGs and Director General of the Federal Competitiveness and Statistics Authority of the UAE, highlighted the inclusion of persons with disabilities in the happiness and well-being baseline survey conducted by the Ministry of Happiness and Well‑being in the UAE, and the inclusion of everyone in the UAE’s SDG processes.

## Benin and Cabo Verde

**Benin**

Presenting the VNR for Benin, Abdoulaye Bio Tchané, Minister of Planning and Development, stated that to re-enforce the social safety nets for the most marginalized, for the past 2 years, Benin has been implementing an initiative to target the most vulnerable households in communities. The initiative allows for unconditional cash transfer to persons with disabilities. To sustain this effort, Benin is also creating a legal framework that is more supportive to the most vulnerable. Several laws have been enacted, including a law on taking concern and care for persons with disabilities. To ensure equal opportunities for all people in Benin regardless of disability, the new legal system guarantees the prevention of disability through an appropriate national health policy that is based on early detection and management of disability through vaccination, consultation, rehabilitation and treatment.

## Bahrain, Colombia, Slovakia, Viet Nam

**Slovakia**

During Slovakia’s VNR presentation, Daniel Bunda, a student from Slovakia, highlighted that persons with disabilities are among the groups of people disproportionately at risk of social exclusion despite low levels of income inequality in Slovakia. Vladimír Krčméry, St. Elizabeth University of Health Care and Social Work, also stated that to ensure sustainable development of societies, it is indispensable to ensure a healthy life and promote wellbeing for all people and all ages with special attention to the most vulnerable, including persons with disabilities. He added that this can be accomplished by taking into consideration all determinants including individual behaviours, lifestyle, socioeconomic status and the environment.

**Colombia**

Following Colombia’s presentation, the Indigenous Peoples’ Major Group stated: “We note with regret the fact that we have not seen any effective participation of all social sectors in following the implementation of the 2030 Agenda. There is an absence of women, persons with disabilities and other social sectors in the documents submitted for our consideration.” They also asked the Government of Colombia how it intends to ensure that no one is left behind. In response to this question, Luis Fernando Mejía Alzate, Minister of National Planning, highlighted that Colombia introduced an online platform that allows multi-stakeholder engagement.

**Viet Nam**

At the close of the day, Nguyen The Phuong, Vice Minister of Planning and Investment, presented Viet Nam’s VNR by highlighting that efforts are made to integrate persons with disabilities in society and the economy of Viet Nam. In public transportation, Nguyen noted that Viet Nam is making efforts to support persons with disabilities by securing priority seats in the buses for them. During the discussions on Viet Nam’s VNR presentation, Australia welcomed the State’s efforts to ensure the inclusion of marginalized groups such as persons with disabilities. However, the NGO Major Group highlighted that these efforts were insufficient to address violence and abuse in relation to discrimination and access to public health care infrastructure and services.

# Tuesday, 17th July 2018

## Albania, Latvia, Niger, Sudan

While delivering Sudan’s VNR, Nasreldin Ibrahim Shulgami, a civil society representative, stated that civil society efforts started in 2015 when the SDGs and the 2030 Agenda were adopted. He noted that the VNR process was a great opportunity for NGOs to highlight their role in implementing and monitoring SDGs. He added that it is also a good opportunity to strengthen partnership and trust with governments, noting that the 2018 VNR process engaged a large number of NGOs, including 5,000 NGOs in Sudan at national and sub-national levels. These NGOs came from different specializations such as education, health, environment, consumer protection, public protection, and so on. This process also ensured the engagement of youth, women, the private sector and persons with disabilities. NGO participation has raised commitments towards SDGs, especially towards awareness raising, advocacy, capacity building, data collection, and implementation with a special focus on SDG accelerators identified in the VNR, such as peace, agriculture and social development.

Following the VNR presentation of Niger, Idriss Alzouma Maiga, President of ADF and WAFOD, asked the Government of Niger: “What steps will Niger take to ensure the CSO participation in all their diversity, including organizations of women, youth and persons with disabilities within the national reviews and evaluation of all development programs, in line with national and international legal and regulatory instruments? Will states commit to increasing budgets to support the most-vulnerable populations?” [**Click here to read the collective statement with questions.**](http://www.internationaldisabilityalliance.org/sites/default/files/collective_statement_link_latvia_link_niger_link_sudan_link_albania_link_cross-cutting_link.docx)

 In addition, the Women’s Major Group highlighted that the negative perception of persons with disabilities is one of the most significant barriers to the inclusion of these people in society, according to the Fédération Nigerienne des Personnes Handicapées (FNPH) report on the implementation of SDGs in Niger. The Women’s Major Group asked the Government of Niger to discuss what new measures the State would take to change the negative perception of communities and promote a better understanding of disability.

Aïchatou Boulama Kané, Minister of Planning of Niger, said that Niger has set up specific measures which take into account all the stakeholders in implementing their strategy for sustainable development and inclusive growth. Regarding the negative perception of persons with disabilities he stated that they need to take it seriously in order to remedy it.

Following the VNR presentation of Latvia, Idriss Alzouma Maiga, President of ADF and WAFOD, asked the Government of Latvia about what legal instruments the State would use to re-establish and expand the civic space in the country to reflect full diversity, including young people and persons with disabilities in the national planning and development system so that they will be on an equal footing with other partners. [**Click here to read the collective statement with questions.**](http://www.internationaldisabilityalliance.org/sites/default/files/collective_statement_link_latvia_link_niger_link_sudan_link_albania_link_cross-cutting_link.docx)

Responding to questions from the Stakeholder Group of Persons with Disabilities, Arvils Ašeradens, Minister for Economics and Deputy Prime Minister, noted that in order to ensure that people at risk of poverty benefit from medical services Latvia has developed different kinds of systems to target different groups of people, including persons with disabilities, to ensure that those included in Latvia’s social system have full access to the medical system.

## Armenia, Ireland, Namibia, Jamaica, State of Palestine

**Ireland**

Presenting the VNR for Ireland, Denis Naughten, Minister for Communications, Climate Action and Environment, Lauren Flanagan, youth delegate, and Paul Dockery, youth delegate, highlighted that addressing poverty and inequality both nationally and internationally were two of the most important goals for the young people they spoke to, particularly for marginalized communities such as refugees, ethnic minorities, persons with disabilities and women. In order to address poverty experienced by young people, there were calls for greater action to be taken in providing better access to decent jobs with proper remuneration, including at the UN level. Although young people felt that Goal 1 would be the most difficult to achieve, they felt it would have the greatest impact and call for strong leadership in eradicating poverty.

**Namibia**

Presenting the VNR for Namibia, Obeth Kandjoze, Minister of Economic Planning and Director-General of the National Planning Commission, highlighted that although poverty and inequalities remain high in the country, the government has increased the coverage and value of social protection grants which cover older persons, orphans, war veterans, school children, persons with disabilities and other marginalized groups. In terms of ensuring inclusive and equitable quality education, Namibia has achieved universal access to primary education and all targets in that respect have been met under the Millennium Development Goals.

Following Namibia’s presentation, Alexandre Bloxs, European Disability Forum, asked the Government of Namibia in International Sign language: “How does Namibia commit to carry out Article 5 of the UN Convention on the Rights of Persons with Disabilities that all persons are entitled to equal protection and equal benefit of the law?” [Click here to read his full statement.](http://www.internationaldisabilityalliance.org/sites/default/files/vnr_namibia.docx)

In response, Obeth Kandjoze, Minister of Mining and Energy, stated that persons with disabilities have representation and participation in all higher offices. The previous government also set up a ministry under the office of the vice president that deals with all disability issues. Persons with disabilities are also participants in the social grants, so there is a serious recognition and a very new drive to include persons with disabilities. He noted that while Namibia may not have a history of including persons with disabilities, there are serious efforts underway to do so. He concluded by stating that there is a deputy minister that handles the rights of persons with disabilities under the program that deals with disability.

**Jamaica**

Presenting the VNR for Jamaica, Pearnel Charles Jr., Minister of State, Ministry of Foreign Affairs and Foreign Trade, said that critical to the advancement of the national development agenda is the promotion of increased institutional coordination at the national and sub-national levels for policy coherence, coupled with targeted communication and advocacy, particularly for vulnerable groups, including persons with disabilities, older persons, women and children. Jamaica stated their commitment to ensuring that no one is left behind.

Speaking on behalf of and representing vulnerable and marginalized communities, including grassroots women, LGBTQI people, persons with disabilities and young people, a representative from the Women's Major Group addressed Jamaica’s delegation by stating that by nature, vulnerable and marginalized people are resilient. The representative noted that grassroots women, LGBTQI people, young people and persons with disabilities are resilient, and as a community and people interested in realizing Vision 2030, the representative invited the Government of Jamaica to engage them. The representative went on to ask the State about its plans to ensure funding and other partnership opportunities are given to NGOs, particularly grassroots women and other vulnerable groups such as LGBTQI people and youth organizations, to implement programs on the ground.

Responding to questions on plans to ensure funding and plans to develop engagement, Pearnel Charles said that Jamaica has prioritized engagement with a multi-stakeholder and multi-sector approach.

**State of Palestine**

Presenting the VNR for the State of Palestine, Riyad Mansour, Permanent Observer of the State of Palestine to the UN, stated that more than half of the population live under the poverty line in Gaza and 80% of them rely on humanitarian assistance. To address this, the government provides cash assistance to 110,000 families and implements an economic empowerment initiative for marginalized groups of people, especially for persons with disabilities.

## Togo and Bhutan

**Bhutan**

Presenting the VNR for Bhutan, Lyonpo Namgay Dorji, Minister of Finance, and Thinley Namgyel, Secretary, Gross National Happiness Commission, highlighted inadequate disability-friendly infrastructure and public spaces as one of the challenges in implementing Goal 11.

## Uruguay, Sri Lanka, Switzerland, Australia

**Australia**

Presenting the VNR for Australia, Gillian Bird, Permanent Representative of Australia to the UN, highlighted that Australia’s Voluntary National Review reflected on the efforts to support people who still face barriers to full inclusion. These include the Aboriginal and Torres strait islander people, those from culturally and linguistically diverse backgrounds, women, girls, transsexual, gay, and bisexual persons, youth, older persons, persons with disabilities, and those living in remote and rural locations.

Following Australia’s presentation, a representative of civil society from Nonviolence International delivered the following remarks on behalf of Major Groups and other Stakeholders. The representative stated that Australian civil society has welcomed the opportunities to contribute to the Voluntary National Review process and welcomed Australian action towards SDG realization, including the implementation of a national disability insurance scheme and the passage of gender equality legislation. They asked the Government of Australia to promote SDG awareness and engagement throughout the Australian community. In addition, they highlighted the following areas where Australia's leadership through committed action and resourcing could play a substantial role in achieving the SDGs. First, by rebuilding the aid budget to reach 7% of GNI by 2030. Second, by contributing their fair share, 2.4%, of global climate finance by 2020. Third, by lifting spending on water and sanitation to the average of 4.6% of the aid budget. Fourth, by increasing direct funding support for women's rights organizations. Fifth, by targeting budget for preventing violence against children. Sixth, by continuing leadership on the disability inclusive development, including setting a disability inclusion target within the aid performance work.

**Switzerland**

Presenting the VNR for Switzerland, Sophie Neuhaus, National Youth Council of Switzerland, stated that leaving no one behind is the most important demand of the 2030 Agenda. She highlighted that we cannot enjoy wealth while others live in want and that we cannot be satisfied with progress that raises average incomes but leaves many behind. As indicators make clear, inequality is on the rise in Switzerland while some groups are excluded altogether. She, therefore, recommended that the next Swiss VNR should focus more closely on the most vulnerable by considering gender and young people, and assessing the situation of persons with disabilities, migrants, and other marginalized and disadvantaged groups.

Following Switzerland’s presentation, Ana Peláez Narváez, Vice-President of the European Disability Forum and member of the UN Committee on the Elimination of Discrimination against Women (CEDAW), asked the Government of Switzerland: “How is Switzerland guaranteeing an inclusive and participatory process for the future Agenda 2030 process, that includes all, also persons with disabilities and sign language users?”; “How will the government tackle the much larger gap as compared with neighboring states with regard to the real life situation and specific needs of persons with disabilities, such as physical and societal barriers, the non-existence of communication access in sign language, which is a prerequisite to participating in social and political processes, etc.?”; and “Will the Swiss Federal Administration systematically collect data disaggregated by different types of disabilities as required by the CRPD?” [**Click here to read the full statement.**](http://www.internationaldisabilityalliance.org/sites/default/files/switzerland_ana_2.docx)

Doris Leuthard, Minister of the Environment, Transport, Energy and Communications, highlighted that Switzerland still has to improve regarding persons with disabilities. For instance, access for persons with disabilities is not yet 100% guaranteed. She noted that Switzerland has underway strategies to include everyone and guarantee that persons with disabilities can be members of this participatory process.

**Uruguay**

Following Uruguay’s presentation, a representative of civil society from the International Trade Union Confederation delivered a statement on behalf of Major Groups and other Stakeholders by asking the Uruguay delegation the following questions. First, what has the State done to guarantee an adequate participation of human rights? Second, on the 2030 Agenda, what are the specific initiatives that Uruguay is taking to focus on the social groups that are facing major discrimination or are particularly vulnerable, in particular, women, young people, and indigenous communities, the elderly, persons with disabilities, and the LGBTQI population? Lastly, what progress has been made in inclusive education, in particular, when it comes to gender equality education?

Responding to this question from civil society, Álvaro García Rodríguez, Director of the Office of Planning and Budget, said that Uruguay is ensuring that the policies are implemented to ensure appropriate protection for all of the marginalized groups that were mentioned.

## Andorra, Canada, Dominican Republic, Egypt, Lao PDR, Senegal

**Andorra**

Presenting the VNR for Andorra, Maria Ubach Font, Minister of Foreign Affairs, Silvia Calvó Armengol, Minister of the Environment, Agriculture and Sustainability, and Jaume Esteve, President of the Andorran Mountaineering Federation, stated that Andorra wanted to ensure that sustainable development is ever present by aligning themselves with the Himalaya Project in 2017 and the UNICEF project for children with disabilities in Bhutan in 2018.

Following Andorra’s presentation, the Stakeholder Group on Ageing asked: “What specific strategies and programs will Andorra commit to improve education and employment for persons with disabilities and older persons, locally and globally?”

In response, Maria Ubach Font, Minister of Foreign Affairs, stated that the education system in Andorra is inclusive, which works to include all new arrivals, children of vulnerable situations, and also persons with disabilities. She noted that from that point of view, the Government of Andorra is working extremely hard to ensure that children with disabilities can be fully integrated into the education system.

**Canada**

Presenting the VNR for Canada, Celina Caesar Chavannes, Parliamentary Secretary to the Minister of International Development, highlighted that as Canada is working domestically to give everyone a fair chance to succeed, Canada's foreign policy is guided by the belief that no one should be left behind. As such, the government wants to see women and girls involved in policy making so they can contribute to the programs, services and policies that affect their lives. Canada affirmed its adoption of a rights-based approach and an intersectional lens. This requires the State to accept the various ways in which systems of social categorization intersect with one another, like gender and sexuality, race and ethnicity, disability and social class, for instance. Canadians expressed pride for the progress they have made, but they also recognized there was more work to be done. She commented that for too long, underrepresented groups, such as women, newcomers, indigenous peoples, persons with disabilities, LGBTQI communities and others have faced barriers that have held them back and prevented them from fully sharing in Canada's economic and exceptional process territory.

**Dominican Republic**

Following the Dominican Republic’s VNR presentation by Isidoro Santana, Minister of Economy, Planning and Development, a representative from the NGO Major Group from the Act Alliance highlighted that there is a disability rate of 12.3% in the country, and this group requires particular support for social, educational and labour market integration. The representative noted the importance of improving accessibility and transport for them. He then asked what actions have been undertaken to implement the 5% work quota for persons with disabilities in the government, and 2% in the private sector, pursuant to law 5/13.

**Egypt**

Presenting the VNR for Egypt, Hala El Said, Minister for Planning, Monitoring, and Administrative Reform, highlighted that following the principle of leave no one behind, the government worked on expanding social safety net coverage using savings accrued from subsidies to empower persons with disabilities, low-income families and women, in addition to many other programs showcased in their VNR.

**Lao PDR**

Following the Lao PDR VNR presentation by Saleumxay Kommasith, Minister of Foreign Affairs, a representative of the NGO Major Group highlighted that many local civil society organizations are deeply embedded in their communities and maintain trusted relationships with those people who are often marginalized, such as young and older persons, persons with disabilities and other minority groups. He noted that in order to truly deliver on the core principle of leaving no one behind, it is crucial that the process is open and inclusive to everybody. He stated that they also believe that civil society organizations were able to contribute additional information for the policy formulation process. The representative of the NGO Major Group asked the Government of Lao PDR to clarify more regarding the engagement they have undertaken and the mechanisms that have been put in place to ensure that all voices are heard. In addition, the Government of Lao PDR was asked about its plans to follow-up on the presentation of the VNR at the national and sub-national level, particularly with those social groups that are most often marginalized.

Responding to the question from the NGO Major Group, Saleumxay Kommasith, Minister of Foreign Affairs, said that Lao PDR has a roundtable process that is participatory. At the end of every year, the State organizes a roundtable where it provides a platform for interaction between the government, development partners and civil society groups who are stakeholders in the development agenda.

**Senegal**

Following Senegal’s VNR presentation by Mame Thierno Dieng, Minister of Environment and Sustainable Development, a representative from the Major Group for Workers and Trade Unions asked the minister the following questions. On education, how does the government intend to implement inclusive education, and what are the specific measures that are taken by the government in order to combat violence against women and persons with disabilities? The representative noted the need for data that is disaggregated when it comes to disability, age and gender and urged the government to look at social plans to reduce poverty. The representative asked the what measures the government had in mind to better ensure an approach which included women and persons with disabilities, as well as the union organizations.

# Wednesday, 18th July 2018

## Lebanon, Romania, Bahamas, Hungary, Malta, Poland, Singapore, Spain, Saudi Arabia

**Bahamas**

Following the VNR presentation by the Bahamian Prime Minister, Hubert Alexander Minnis, a representative from the NGO Major Group asked the Prime Minister the following questions. First, what plans does the government have to follow-up the presentation of the VNR at national and sub-national levels after the HLPF? Secondly, how will the State ensure that data on progress is disaggregated by income, sex, race, ethnicity, migration status, disability and geographic location among other characteristics, as agreed in the introduction of the SDG indicators.

**Romania**

Following the VNR presentation by Grațiela-Leocadia Gavrilescu, Vice-Prime Minister and Minister of Environment, a representative from the Major Group for Children and Youth highlighted that there is agreement that the 2030 Agenda represents an extraordinary opportunity to create equitable progress and ensure the fulfillment of the rights for the most vulnerable and marginalized groups in society. While there has been an improvement in the inclusion of such groups in decision-making processes and their needs are increasingly recognized in policymaking, society is still far from leaving no one behind. In that context, the representative noted that the Romanian VNR underlined the importance of education for the universal achievement of SDGs, but the representative wanted to know how Romania planned to make it more inclusive and equitable for children with disabilities. Secondly, the representative noted that while the VNR highlighted the need for additional measures to protect marginalized groups in general, it did not address the specific rights violations of groups such as the LGBTQI or persons with disabilities. These groups are at increased risk of homelessness and precarious housing due to the social exclusion they experience. The representative asked if there are any measures to target these rights violations of the aforementioned groups, in Romania’s strategy for the achievement of SDG 6, 11, and 15.

**Malta**

Presenting Malta’s VNR, Carmelo Abela, Minister for Foreign Affairs and Trade Promotion, highlighted that Malta is sensitive to the rights and needs of persons with disabilities. Employers are required to ensure that 2% of their workforce is made up of persons with disabilities when the total workforce comprises more than 20 staff. As an incentive, these employers benefit from a tax reduction.

 Megan Smith, International Disability Alliance, asked the Government of Malta: “What is being done to make sure that Malta provides universal access to persons with disabilities? What do you do to ensure persons with disabilities do not fall into the poverty trap?” [**Click here to read the statement with questions.**](http://www.internationaldisabilityalliance.org/sites/default/files/malta_speech.docx)

The Government of Malta responded that there are also education initiatives that have been undertaken when it comes to persons with disabilities. The Government of Malta noted that full potential has not been achieved in this regard, but there is training for persons with intellectual disabilities.

**Poland**

Following the Polish VNR presentation by Jadwiga Emilewicz, Minister of Entrepreneurship and Technology, Belarus highlighted that Poland is a donor for sustainable development in their region and, in particular, it's important to note that in their cooperation with Poland and several Belarus cities, there are projects underway to support persons with disabilities to ensure their employment, especially the employment of young persons with disabilities. This has helped Belarus and the government solve issues, namely those of creations of new jobs and training for persons with disabilities. The representative of Belarus then asked whether Poland would to comply with the UN Convention on the Rights of Persons with Disabilities to ensure that person with disabilities are recognized as citizens who have rights.

In response, Jadwiga Emilewicz highlighted that regarding social exclusion, Poland has the 75 plus program and 500 plus program which are geared towards poverty but also that the government had just adopted the program. It is dedicated purely towards “capital people” which means dedicating a significant amount of the budget for making social services available for persons with disabilities.

**Singapore**

Presenting Singapore’s VNR, Masagos Zulkifli, Minister for the Environment and Water Resources, highlighted that on Goal 11 Singapore has a five-year master plan to integrate persons with disabilities into the workforce and society.

Following Singapore’s presentation, the Stakeholder Group on Ageing welcomed Singapore’s response to older persons and persons with disabilities as central to SDG implementation. They remarked that this is an example to others, as inadequate visibility has been given to older persons and persons with disabilities in most national implementation plans. Given Singapore's progress and demonstrable commitment to older persons, the Stakeholder Group on Ageing asked if Singapore would commit 2 million Singapore dollars each year for the realization of SDG 11 on a long-term basis of goals and targets for older persons and persons with disabilities. It was noted that in cities and at home, participation, accountability and people-centered inclusive planning are key to Goal 11's success for all citizens of Singapore.

**Spain**

Following the VNR presentation by Teresa Ribera, Minister for the Ecological Transition, Josep Borrell, Minister of Foreign Affairs, EU and Cooperation, and Cristina Gallach, High-Commissioner for the 2030 Agenda for Spain, the Major Group for Children and Youth expressed concern that when it comes to looking at the leverage policies for marginalized communities and the effect on the budget areas, 34% of the youth in Spain are unemployed and 100,000 persons with disabilities cannot exercise the right to vote. The Major Group for Children and Youth requested that the Spanish national sustainable development strategy should be a state policy which is inclusive, accessible and cuts across all political constituencies, embracing young persons, persons with disabilities, older persons, etc., to ensure that nobody is left behind. The group asked about the ways to implement this strategy.

**Lebanon**

Following the VNR presentation by Ghassan Hasbani, Deputy Prime Minister and Minister of Public Health for Lebanon, Mohammed Loutfy, Representative of Disabled People’s International at the United Nations and Executive Director of the Arab Forum for the Rights of Persons with Disabilities, asked the Government of Lebanon: “What measures Lebanon will take to ensure transparent and inclusive monitoring and implementation of the Agenda 2030?” [**Click here to read the statement with questions.**](http://www.internationaldisabilityalliance.org/sites/default/files/lebanon_vnr_2018_hlpf.docx)

# The Ministerial Declaration

The Ministerial Declaration was negotiated by Australia and Bangladesh. During the intergovernmental negotiation, Major Groups and other Stakeholders were invited and participated in developing the content and drafting the declaration. The Stakeholder Group of Persons with Disabilities participated in the negotiations and delivered numerous statements.

The final outcome of the Ministerial Declaration stressed that leaving no one behind requires addressing the specific needs of people in vulnerable situations but also supporting their empowerment and participation in decision making that impacts their lives. This includes those whose needs are reflected in the 2030 Agenda including all children, youth, persons with disabilities (of whom more than 80 percent live in poverty), persons living with HIV/AIDS, older persons, indigenous peoples, refugees and internally displaced persons, migrants and people living in areas affected by complex humanitarian emergencies, and peoples in areas affected by terrorism and conflict. It emphasized that high quality, accessible, timely and reliable data and statistics are central to the implementation of the 2030 Agenda. It urged countries to further strengthen collaboration at the bilateral, regional and global levels for capacity-building and sharing of best practices for collecting, producing, disseminating, analyzing and using quality data and statistics, disaggregated by income, sex, age, race, ethnicity, migration status, disability, geographical location and other characteristics relevant in national contexts. The Ministerial Declaration welcomed the adoption of resolution A/RES/71/313 on the work of the UN Statistical Commission. It also noted that to achieve universal and sustainable access to safe drinking water and sanitation and to end open defecation, substantial long-term investment and capacity building will be required, particularly in rapidly growing urban areas. Strengthening the institutional capacity of local, sub-national and national authorities, as appropriate, to manage and regulate sanitation systems as a high priority was noted. In particular, the Ministerial Declaration noted that special attention must be paid to ensuring access to sanitation and hygiene facilities, considering the specific needs of women and girls, for menstrual hygiene management, and for persons with disabilities, without compromising their safety and dignity. [Click here to read the full Ministerial Declaration.](http://www.un.org/ga/search/view_doc.asp?symbol=E/HLS/2018/1&Lang=E)

# Compilation of references to persons with disabilities in the 2018 Voluntary National Reviews

This section of the report highlights main references to persons with disabilities in the 2018 Voluntary National Review reports submitted by the volunteering States at the High-level Political Forum on Sustainable Development at its 2018 meeting, in accordance with General Assembly resolutions 67/290 and 70/1. The analysis of volunteering States main reports revealed over 520 references to disability. These are summarised as follows:

# Albania

Albania[[2]](#footnote-2) is party to all core human rights treaties and has made significant efforts in improving its human rights records and strengthening its national human rights institutions. Yet, issues such as gender inequality, violence against women and domestic violence, human trafficking, and child labour and exploitation are still challenges for the country. Whereas during the country’s communist period the integration of Roma and Egyptians, was ‘compulsory’, persons with disabilities did not usually benefit from specialised state services, or in only a very limited form and of insufficient quality. The transition years brought little in terms of improvements, and rather, in some respects, deterioration: marginalisation increased for Roma and Egyptians, many children of these groups dropped out of school and their social inclusion and access to the labour market worsened. Albania has a weighty heritage of marginalised and vulnerable persons in dire need of support but who continue to receive no, or often inadequate, services.

Inclusion is especially unsatisfactory in particular groups: the poor, Roma and Egyptians, and persons with disabilities, posing significant challenges for achievement of SDG Target 10.2: By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status. Roma people experience extremely high levels of unemployment, estimated at around 71 percent, compared to 20 percent for the population as a whole .13 Less than a quarter of Roma and Egyptians are employed, and the gender inequality is stark: only 15 percent of Roma women and thirteen percent of Egyptian women have paid jobs .14 Most of these women work in the informal economy and, consequently, are not registered in the official employment scheme and lose entitlements to social benefits (e .g. health insurance coverage, pension fund). Roma children often begin work at a very early age in order to contribute to the survival of their families. People with disabilities are much less likely to participate in the labour market than their non-disabled peers. The labour force of eight in ten disabled working age adults remains untapped, with them neither working nor looking for work. Consequently, disabled adults are five times less likely to be working than the nondisabled population15, despite the existence of a quota for employment of disabled people by public and private employers provided in the legislation. The barriers these disadvantaged groups face is mainly linked to their low level of education to meet the requirements of the market economy and the discriminatory attitudes of employers.

Gradual improvements in Albania’s children’s access to primary (age 6–10 years) and, particularly, pre-primary (age 3–5 years) education in recent years are reflected in the current Net Enrolment Rates (NERs): 96 percent and 81 percent, respectively, compared to 90 percent and 58 percent in 200816. However, inequities in access associated with income status revealed by the latest Living Standard Measurement Survey (LSMS: 23% of the poorest quintile children accessing pre-primary education versus 48% in the upper quintile) still persist.[[3]](#footnote-3) Roma children benefit much less from early education than do other children, though since 2011 the number of Roma in Albania’s kindergartens has almost doubled18. According to Census 2011 data, most Albanian (97%) and Egyptian (93%) children of age from six to nine years attend primary schools, but this is the case for only 55 percent of Roma children. Dropping out is rather rare prior to ten years of age (less than 3%, and mainly includes girls rather than boys), but is more significant at the beginning of lower secondary school. However, the dropout percentage varies among different categories (e.g. Roma children 4%; Egyptian children, 3 .4%; children with disabilities, 7%).[[4]](#footnote-4)

The main barriers contributing to low school attendance by Roma children are poverty, birth registration, parental attitudes in valuing children’s participation from their economic potential rather than them completing formal education, ineffective implementation of policies, and discriminatory attitudes of some teachers and non-Roma parents. Moreover, lack of information and appropriate competencies among teachers, combined with inappropriate infrastructure, lack of a dedicated cadre of support teachers and insufficient learning instruments, all contribute to the continued exclusion of children with disabilities from their right to education.[[5]](#footnote-5)

One adult in four with a disability was unable to attend school, the vast majority of whom remain illiterate. The education gap between non-disabled and disabled individuals is huge: individuals with disabilities are much more likely to stay out of the school system, and when they do attend; they are more likely to drop out after primary school. Census 2011 data show that only 55 .6 percent of persons with disabilities over 15 years of age have completed basic education. Only 3.3 percent of persons with disabilities have completed university studies and almost a quarter (24 .3%) have never attended education. The Albanian government is committed to increasing the registration of children with disabilities and children from poor families in the pre-university education system. The government has prioritised pre-school teacher training, to enable teachers to address with greater care the needs of children with disabilities. Moreover, it is recognised that new appointments of trained support teachers in integrated teaching schools are a necessity for children with disabilities.

National and local institutional capacities and coordination still have to be improved to make a difference and bring results in children’s lives. Inequalities in accessing quality health services have affected specific vulnerable groups of the population. Infant and under-5 mortality rates have dropped over the years, but nevertheless, in the underserved areas of mountainous Albania, the rates are twice the national average.[[6]](#footnote-6) Although government spending on health care increased from 2.6 percent of GDP in 2013 to 2 .95 percent in 2017, this is still substantially less than the amounts other countries, with comparable levels of income, spend and, again, the lowest in the SEE26. Early identification and prevention of disabilities do not align with international standards in the health sector, with neonatal screening still absent.[[7]](#footnote-7)

ii) Disability Allowance (DA) for people with mental or physical disability, or both, including blind, paraplegic and quadriplegic persons. Households that have a member with a disability receive social protection cash payments regardless of the economic situation of the family members. Social protection transfers include disability allowance, social assistance benefits and support with energy bill payments. Even though disability allowance payments have increased year on year, it is still evident that persons with disabilities find it difficult to cover their expenses with their DA. The current number of children with disabilities (around 15,000) officially receiving disability[[8]](#footnote-8) equates to approximately 2.2 percent of the total child population of age 0–17 years, significantly less than the global prevalence estimate of five percent29. Moreover, the scheme follows the medical model, focusing mainly on children with severe disabilities, leaving out other categories30. A bio psychosocial model is being piloted in two administrative units of Tirana Municipality and based on international standards—International Classification of Functioning, Disability and Health, and WHO—as part of the disability reform undertaken by the government.

The social protection reform in Albania is outlined in NSDI II, the National Strategy for Social Protection and the Policy Document on Social Inclusion 2015–2020. The reform aims to improve the targeting of families and persons receiving assistance, as well as through aligning the implementation with other ongoing and related reforms in the country. Albania has made operational the National Registry of Social Services, Persons with Disabilities and the NE Management Information System, which will improve the efficiency of the social protection mechanism, enhance its transparency and administration and reduce bureaucratic barriers.

Census 2011 shows that almost one in five poor households (18 .9%) live in overcrowded conditions, with 15 percent of Roma households living in a nonconventional housing (shelter, tent, shack, barracks, or other inadequate, or even dangerous, construction) lacking basic infrastructure and services. UNDP research shows that only a small share (14 .34% of applicants) of the Albanian population in need of housing has benefited from social housing programmes.[[9]](#footnote-9) The largest proportion of beneficiaries (40%) are young couples, and the smallest, orphans, Roma and Egyptian families, female-headed families, or victims of domestic violence, despite the fact that these are the groups submitting the largest number of applications. In addition, there are no housing blocks or units available for persons with disabilities to live independently with personalised assistance services.

The government has made efforts to prioritise the needs of women with disabilities by offering dedicated vocational training courses and employment mediation programmes. The legal framework provides that disabled single mothers or heads of households may benefit from additional support services offered by public community centres, or may be referred to NGOs providing alternative services, where such services are not provided by the authorities.

In all current CSCs under its administration, including the IPRO Front Office in Tirana, ADISA has set improved standards of service delivery for people with disabilities based on customer care principles, especially with regard to:

* Providing for the infrastructure necessary to allow access therein to people with disabilities (e.g. ramps, dedicated toilets)

## Justice reform

As part of the overall efforts of Albania to reform its justice system, under the auspices of Parliament, a thorough Analytical Paper was produced, pointing out all of the system’s challenges and bottlenecks to the delivery of a fair, professional and equitable justice to citizens, sensitive and adaptable to their vulnerabilities. The Analytical Paper was followed by a Justice Reform Strategy, envisaging amendments to the Constitution of the Republic, development of some 40 laws, and the setting up of several institutions.

## Social inclusion

Albania is party to all core human rights treaties and has made significant efforts in improving its human rights records and strengthening its national human rights institutions. Yet, issues such as gender inequality, violence against women and domestic violence, human trafficking, and child labour and exploitation are still challenges for the country. Whereas during the country’s communist period the integration of Roma and Egyptians was ‘compulsory’, persons with disabilities did not usually benefit from specialised state services, or in only a very limited form and of insufficient quality. The transition years brought little in terms of improvements, and rather, in some respects, deterioration: marginalisation increased for Roma and Egyptians, many children of these groups dropped out of school and their social inclusion and access to the labour market worsened. Albania has a weighty heritage of marginalised and vulnerable persons in dire need of support but who continue to receive no, or often inadequate, services.

National and local institutional capacities and coordination still have to be improved to make a difference and bring results in children’s lives. Inequalities in accessing quality health services have affected specific vulnerable groups of the population. Infant and under-5 mortality rates have dropped over the years, but nevertheless, in the underserved areas of mountainous Albania, the rates are twice the national average.[[10]](#footnote-10) The total burden of disease for children of age 1–4 years has reduced significantly but nevertheless remains the highest in the South East Europe (SEE) region.[[11]](#footnote-11) Although government spending on health care increased from 2.6 percent of GDP in 2013 to 2 .95 percent in 2017, this is still substantially less than the amounts other countries, with comparable levels of income, spend and, again, the lowest in the South East Europe.[[12]](#footnote-12) Early identification and prevention of disabilities do not align with international standards in the health sector, with neonatal screening still absent.

## Tackling the inclusion challenges in Albania

Social protection for vulnerable groups in Albania is an important national priority and contributes towards achieving Goal 10: Reduce inequality within and among countries, particularly through Target 10.4: Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality. Focusing on projects and programmes that emphasise the links between social inclusion, poverty reduction, employment and enterprise support, health, education, basic needs, participation and human rights is crucial in achieving Goal 10 in Albania.

The fight against marginalisation is the main pillar of Albania strategy. We have drafted new laws, providing broader education, housing and facilitating access to the work market for the Roma Community, the LBGT Community, and other minorities in the country. Early this year, a new law on Ethnic Minorities was implemented, focusing on protecting the rights of freedom of expression, association, and self-identification.

We are also committed to greater regional and European cooperation because we believe that no country can eradicate poverty, inequalities and marginalisation alone. It is our common responsibility, as civilized nations, to make sure the World we are shaping will be a World in which our children will thrive.

# Armenia

Inclusion: Children with disabilities continue to be the largest group of out of school children despite the policy of towards universal inclusive education. Only 1/3 (80% in rural areas) of children with disabilities are enrolled in preschool. In fact, children with disabilities do not appear in national statistics, becoming “invisible” to decision-makers, service providers and the public.

## Challenges

In 2016, gross enrolment in pre-school facilities (children of age group 0-6 years) in Armenia constituted 29.2 percent and varied depending on poverty status. For urban areas, the preschool enrolment rate was 35.6 percent and only 17.2 percent in rural areas, which meant that children in rural areas were even more deprived. About 71 percent of children with disabilities did not attend preschools (80 percent in rural areas). Thus, children in the poorest rural areas and with disabilities could not effectively realize their right to education.

Though the country has adopted a national plan of action for making general education system inclusive by 2025, there is still a gap in putting in place national accessibility standards for physical environment, learning materials, communication of information (sign language, Braille, large print, Easy Read and pictorial information) in line with universal design principles and ensure compliance with them within mainstream settings to promote and facilitate access to educational institutions. Access and retention of children with disabilities to mainstream education at pre-primary and secondary education levels is still an issue due to gaps in methodologies and universal design of learning environment.

Another key challenge is high drop-out rate from high schools and the lower involvement of boys and persons with disability in university education. Despite the resilience of the economy, key persistent challenges in Armenia to be tackled are the high level of national poverty with about 30 percent level, and high unemployment with about 18 percent level in 2017. The economic growth and development in the last decade did not translate into either significant poverty reduction or the reduction of unemployment. So far, the economic growth has not been pro-poor, and the challenge is how to make the economic growth and development more inclusive, how to make it pro-poor. The challenges are exacerbated by a high dependency of large segments of population on remittances, and constraints on increasing Government spending due to high debt/GDP ratio.

### Table 2. Unemployment, by sex, age and persons with disabilities, %

|  |  |  |
| --- | --- | --- |
| Years | 2015 | 2016 |
| Total, 15-76 age | 18.5 | 18 |
| Men | 17.6 | 18.1 |
| Women | 19.5 | 17.8 |
| Total, 15-24 age | 32.5 | 36.6 |
| Men | 28.6 | 29.8 |
| Women | 37.2 | 46 |
| With Disabilities | 15.7 | 18.9 |

## Inclusive communities (SDG target 11.7)

Urban as well as rural communities in Armenia do not have inclusive and accessible, green and public spaces, in particular for persons with disabilities. Most of urban planning and construction requirements to buildings and other facilities/infrastructure were based on the Soviet standards without consideration of the needs of people with disabilities. In Armenia, 6.2 percent of the population is disabled (186,384 people). According to official statistics that the unemployment rate among disabled people was 18.9 percent. However, some international sources suggest a much higher unemployment among the disabled. Though the Government policies include provisions for promoting the inclusion of disabled in all aspects of social life (for instance the strategy of inclusive education), the implementation of those provisions are weak. In effect, disabled people do not always have the opportunity to actively participate in the economic and social life of the country.

# **Inclusive communities (SDG 11.3, 11.7, 11a**)

Urgent action must be taken to improve access to green and public places for people with disabilities and for application of the principles of universal design. The action is also required for inclusive community service delivery and accessibility of services. Achieving inclusivity in urban and rural communities would require a systemic approach and joint effort by the state, municipalities, civil society organizations, and private businesses.

# Australia

Australia[[13]](#footnote-13), like all countries, faces challenges and we are focusing on those areas where more could be done. We have recently implemented policies to improve the liveability of our cities, including through investments in infrastructure and reforms through City Deals. We are also delivering on our commitment to fully fund and implement a National Disability Insurance Scheme.

While Australia is a prosperous country, people remain at risk of being left behind due to lingering barriers to their participation in the workforce and difficulties in accessing services. These groups include Aboriginal and Torres Strait Islander peoples, those from culturally or linguistically diverse backgrounds, women and girls, lesbian, gay, bisexual, transgender and intersex (LGBTI) persons, youth, the elderly, people with disability and those living in remote and rural locations. The disadvantage can be compounded, exacerbated or prolonged by a combination of factors including the range of environmental, social and economic aspects encompassed in the SDGs, for example, a lack of access to quality education, health care or employment. The disadvantage can increase vulnerability to financial or other shocks, such as natural disasters, highlighting the importance of resilience and inclusion.

In 2016-17, Australian Volunteers for International Development[[14]](#footnote-14) had 1,212 Australians volunteering with 754 host organisations in 25 countries in the Indo-Pacific in support of the SDGs. Eighteen per cent of volunteers focused on working with people with a disability. The Australian Volunteers program matches skilled Australians with organisations in developing countries to assist these organisations in delivering their development objectives.

As a member of the United Nations Human Rights Council (2018-20), Australia has pledged to promote equal human rights for all individuals around the world. We are committed to promoting the rights of women and girls, people with disability and indigenous peoples in Australia and beyond. The Commission assisted with over 1,000 conciliation processes in 2016-17. There are seven commissioners, responsible for representation, advocacy and awareness for specialist areas including social justice for Aboriginal and Torres Strait Islander peoples, Age Discrimination, Children, Disability Discrimination, Human Rights, Race and Sex Discrimination. Recent inquiries include the National Inquiry into Employment Discrimination Against Older Australians and Australians with Disability. One of the outcomes of this inquiry was the development of a Good Practice Guide for Employers that provides practical, realistic and evidence-based solutions for employers who wish to do more to employ people with disabilities and older Australians.

## Australia’s approach to the SDGs

The SDGs, targets and indicators provide us a complex, ambitious and holistic global framework for sustainable development. Many of the SDGs are integrated with issues that cut across multiple aspects of sustainability, such as economic vitality, gender equality, human rights, disability, climate change and disaster risk reduction. This requires a broad system-based approach, while also advocating a targeted approach to leave no one behind.

Voluntary National Review draft consultations, featured ACFID, ACIUCN, ACOSS, GCNA, SDSN, UNAA, People with Disability Australia, National Congress of Australia’s First People, Council of Small Business of Australia, Australian Chamber of Commerce and Industry

## Leaving no one behind: Australia’s National Disability Strategy

Australians living with a disability or chronic health conditions are less likely to be employed, more likely to be dependent on income support and more likely to live in poverty6, as are those caring for them. Poverty can also be both a determinant and a consequence of poor mental health.

The National Disability Strategy 2010-2020 provides a 10-year national policy framework for all levels of government to improve the lives of people with disability. The Strategy seeks to drive a more inclusive approach to the design of policies, programs and infrastructure so that people with disability can participate in all areas of Australian life. It aims to ensure that policy settings touching on a number of SDGs – including health, education, employment, income support systems and infrastructure – are inclusive of people with disability. The Strategy is also an important mechanism to ensure the principles underpinning the United Nations Convention on the Rights of Persons with Disabilities are incorporated into policies and programs affecting people with disability, their families and carers.

Australia’s development assistance program, administered by DFAT, has a cross-sectorial approach that integrates aspects of ‘leave no one behind’ through the disability-inclusive development and gender equality targets. For example, the Vanuatu Skills Partnership is a long-standing partnership established between the Australian Government and the Vanuatu Ministry of Training and Education. The Partnership has a locally-led approach that recognises the contribution of skills not only to economic outcomes but to social and environmental outcomes, consistent with the SDGs and Vanuatu’s own national plan. The Partnership has a particular focus on improving skills and economic engagement by women, youth and people with disabilities in areas including tourism, handicrafts and agribusiness.

## Disaster risk reduction: building resilience

Australia also supports partner countries in the Indo-Pacific region to protect the most vulnerable communities and to build a platform for strengthening disaster resilience. Disability inclusion is a focus, and we have ensured disability inclusion has been taken into consideration when building infrastructures such as clinics and disaster shelters. Australia joined other Pacific Islands Forum members in endorsing a proposal for a Pacific Resilience Facility at the 2018 Forum Economic Ministers Meeting.

While transient poverty is a problem, the experience of persistent poverty is of deeper concern, particularly where families experience intergenerational disadvantage and long-term welfare reliance: young people in Australia are 1.8 times more likely to need social assistance if their parents have a history of receiving social assistance themselves. However, analysis of longitudinal data suggests that only a small proportion of people in Australia are persistently poor. Groups more likely to experience deep and persistent disadvantage include lone parents, Aboriginal and Torres Strait Islander peoples, people with disability and those with low educational attainment. Many are social housing tenants and are weakly attached to the labour market.

## Australian action

Social security and welfare account for the most significant component of Government spending, with around one-third of total expenses providing support to older Australians, families with children, people with disabilities, veterans, carers and unemployed people. Unlike most other countries in the OECD, the payment system is funded through government revenue; it is not based on past contributions and is not capped or time limited. In addition, Australia has a universal health system, which includes Medicare and pharmaceutical subsidies.

### National Disability Insurance Scheme

The National Disability Insurance Scheme is a new way of providing support for Australians with a disability, their families and carers. It will provide about 460,000 Australians under the age of 65, with a permanent and significant disability, with the reasonable and necessary supports they need to live a more independent life. It supports people with disability to build skills and capability, so they can participate in the community and employment and provides supports required for daily living such as aids and equipment, prosthetics, home modifications, personal care and domestic assistance, allied health and other therapy.

The Government partners with states and territories in shared policy areas, including housing, homelessness, disability services, concessions and children’s welfare. Civil society organisations and the private sector also deliver residential and community services to those in need. Australian governments also partner with civil society organisations to support vulnerable individuals and families experiencing financial crisis, helping them to improve their financial capability, resilience and lifetime wellbeing. Over 400 service providers are funded to provide vulnerable individuals with emergency relief, food relief, financial counselling, financial literacy education, and assistance with budgeting or access to microfinance products as an alternative to high-risk, high-interest products such as payday loans.

### Regional and global action

The rights of people with disabilities are an important focus of Australia’s international advocacy on human rights. People with disabilities and their families are more likely to be persistently poor as a result of higher living costs, barriers to education, health and employment opportunities, and unpaid caring responsibilities. Australia is a leading provider of disability inclusive development assistance, taking a twin-track approach: supporting disability-specific aid investments, as well as mainstreaming activities that include people with disabilities as participants in development work across all sectors.

*“While there are positive signs and progress on many fronts, it is clear that Australia is not healthy in every way, and some patterns and trends give cause for concern. Chronic diseases… are becoming increasingly common in Australia due to a population that is increasing and ageing, as well as to social and lifestyle changes. … Presenting a broad picture of health status can mask the fact that some groups in our community are not faring as well, including people living in rural and remote areas, the lowest socioeconomic groups, Indigenous Australians and people living with disability.”*

In Tonga, Australia is supporting the Ministry of Health to improve health service systems, delivery and to address NCDs. The program’s focus on primary and preventive approaches includes supporting Tonga to introduce legislation and fiscal measures, strengthening primary health care, improving community health centres and expanding diabetes outreach to outer islands and remote communities. Future work will focus on strengthening the workforce, health financing and leadership to improve primary care and disability inclusive health services at the community level.

## Inclusive and quality learning in Australia

There is universal access to primary and secondary education, with school attendance compulsory until the age of 16 and gender equity in literacy and numeracy outcomes on completion of primary school. Government funding for schools includes loadings to target student and school disadvantage, including students with disabilities. Governments work with civil society organisations to provide additional support where needed. For example, the Smith Family's Learning for Life program, funded by the Australian Government, will support approximately 56,200 disadvantaged students by 2020 to achieve improved educational and post-school outcomes. All schools in Australia have access to computers and the Internet and are adapted for students with disabilities.

## Global action

In the Indo-Pacific region, Australia has a strong focus on leaving no one behind, with a focus on women, girls, and children with disability. Our work seeks to increase opportunities for girls to attend and stay in school, including by making schools more affordable, closer to home and supportive of girls’ needs in Laos, Bangladesh and countries across the Pacific. Where education participation rates are high, our support targets the last remaining out-of-school children, who are often hard to reach. In Fiji, we are working with the Ministry of Education and education and disability stakeholders to improve the ability of children from very poor communities, particularly those with disabilities, to access a quality school education.

### Enhancing global knowledge exchange through education

From 2014-18, the Government has supported 30,000 students to have overseas education experiences through New Colombo Plan scholarships or mobility projects in 37 host locations. The program is inclusive: more than 50 per cent of participants are female and approximately five per cent have identified as having a disability.

Economic participation and leadership pathways may be especially difficult for particular cohorts of women, who experience additional or different barriers due to geographical distance or isolation, cultural or linguistic diversity, age, disability, indignity and intergenerational disadvantage. This is particularly true where women are seeking to work in non-traditional sectors, and some sectors are taking measures to address these gaps. For example, the Oothungs (Sisters) in Mining traineeship provides pathways for Aboriginal and Torres Strait Islander women into the resources sector

### Addressing violence, discrimination and harassment

Progress towards gender equality is hampered by the continued experience of gender-based violence. Gender inequality is the root cause of violence against women. Nearly one in three women in Australia has experienced physical violence and one in five has experienced sexual violence since the age of 15.[[15]](#footnote-15) Some women are particularly vulnerable to violence, Women with a disability are particularly vulnerable to family violence: they were more than twice as likely to have experienced partner violence as women without a disability in 2015-2016.

### Leaving no one behind

Governments work with the private sector and civil society to address gaps in workforce participation, particularly for under-represented groups. The Australian Human Rights Commission has investigated barriers to employment for people with disability and older Australians, making comprehensive recommendations to governments, business and employers. Our development policies prioritise engaging the private sector to attract investments that deliver social as well as commercial outcomes. Our development assistance has a particular focus on gender equality and women’s empowerment, the inclusion of women and girls and persons with disability, such as our work with CBM and the NORFIL Foundation in the Philippines establishing groups of parents of children with disabilities to work with local councils.

### Inequality and human rights

Ensuring universal enjoyment of human rights is fundamental to reducing inequality. No society can truly prosper if elements of it are excluded or subjected to discrimination and violence. Inequality, exclusion, discrimination and violence cost states in lost GDP, in increased expenses on health and social security, and in lost human potential. This understanding is one of the underpinnings of Australia’s advocacy for equal human rights protections for women and girls, people with disability, youth, the elderly, LGBTI individuals, indigenous populations, and racial, ethnic or religious minorities. For example, Australia is committed to ensuring that LGBTI people are included in the implementation of the SDGs, and since 2015 has increased its advocacy and funding to support equal human rights for LGBTI persons globally.

Intrepid Travel, Australian Volunteers International and the Australian Government have formed a collaborative partnership in Myanmar to improve tourism suppliers’ skills to boost economic growth to meet consumer demand. The initiative has trained 28 candidates in sustainable tourism management and supported 10 businesses to develop their tourism products to take to market. The Sustainable Tourism Hub is providing business advisory services and skills development to small and medium sized tourism enterprises, focusing on people who would otherwise face significant barriers to participation in the tourism market in Myanmar, such as women, ethnic minorities and people with disabilities. The partnership is designed to meet an increasing demand for sustainable, local experiences in the Myanmar tourism market.

Separately, Australian Volunteers program participants work in sustainable tourism in the Philippines and Fiji with projects including a focus on employment opportunities for people with disabilities.

## Australia in the Green Climate Fund

The potential impacts of climate hazards on communities are linked to vulnerabilities associated with a range of complex, interrelated factors, such as poverty, environmental degradation, disability and gender inequality. Given its cross-cutting nature as an issue, Australia is integrating climate action and resilience across its development assistance program, taking a holistic multi-hazard approach to risk reduction.

### Sector wide engagement: Extractives

Many of the examples provided in Australia’s review involve a multi-stakeholder approach. Further examples include, Australia is a founding co-chair of the Global Action on Disability Network that brings together civil society, donor governments, multilateral agencies and the private sector to advance disability inclusion in sustainable development and humanitarian action. The Minister for International Development and the Pacific leads Australia’s engagement in this network. Recognising the role that sport can play across the SDGs, DFAT’s sport for development program is built on partnerships between the Australian Government and Australian, regional and Pacific Island sporting organisations and federations. The program supports sixteen sports across nine countries that deliver activities to address primary risk factors associated with non-communicable diseases, particularly physical inactivity, and address inequalities experienced by women, girls and people living with disability. All these efforts aim to reduce poverty and promote the inclusive participation of the most disadvantaged, including women and girls and people living with disabilities.

### Data disaggregation

An ongoing challenge for Australia is the disaggregation of all data sets. An example of our work on this includes Australia’s support for the Washington Group on Disability Statistics, established under the UN Statistical Commission. This multi-stakeholder group has developed a range of disability data tools including the Short Set of Questions on Disability and the UNICEF/WG Module on Child Functioning. These tools have been tested extensively and when added to ongoing collections provide an efficient approach to monitor implementation of the UN Convention on the Rights of Persons with Disabilities and the SDGs by disaggregating data by disability status

# Bahrain

In Bahrain,[[16]](#footnote-16) the Labor Fund (Tamkeen) provides vast support to SMEs. More than 47,000 SMEs and 120,000 individuals including women, youth, and persons with disabilities benefited from its financial and training support. Pursuant to the Constitution of Bahrain and public policies which guarantee universal access to basic services. Public and civil society-led programs provide support to abused women, persons with disabilities, and those in need.

# Bhutan

Despite the progress made, Bhutan[[17]](#footnote-17) is confronted with the following challenges in its development efforts: In ensuring that no one is left behind, Bhutan faces last-mile challenges. In the 12th FYP, Bhutan aims to eradicate poverty, reduce inequality and address the needs of vulnerable groups. It endeavours to reduce income and multidimensional poverty to less than 5 per cent. The Gini coefficient increased slightly to 0.38 in 2017 from 0.36 in 2012, indicating a need to assess existing policies and programmes. Further, addressing the needs of vulnerable groups through targeted interventions is a priority. Promoting gender equality and empowering women and girls has been identified as one of the sixteen national key result areas. Fourteen different vulnerable groups have been identified through a Vulnerability Baseline Assessment. Bhutan is currently in the process of drafting the National Disability Policy and National Gender Equality Policy.

Reducing inequality such that no-one is left behind is at the core of all the SDGs.[[18]](#footnote-18) This goal, among others, aims to empower and promote social, economic and political inclusion irrespective of specific characteristics such as age, gender, sexual orientation, disability, religion, economic or another status. Bhutan has made modest success in providing access to education for children with disabilities. In addition to the two special schools catering to hearing and visually impaired children, the government has established Special Educational Needs Programme (SEN) in 12 schools to integrate children with disabilities into the mainstream school system. As of 2017, 647 students with various forms of disabilities were enrolled. Additionally, there are two private institutions, which provide vocational skills to disabled children.

Bhutan is determined to address emerging concerns of different forms of inequalities across all sections of society through the implementation of policies and legal frameworks, as reflected consistently in the FYPs and assessed in the development stage of any policy or project using the GNH Policy Screening Tool. However, the intent of the Government to address issues of inequality is illustrated through the formulation of Bhutan’s first Gender Equality Policy and the National Policy for Persons with Disabilities.

More fundamentally, the commitment to inclusive development is also reflected in the Constitution of the Kingdom of Bhutan, which celebrates its 10th anniversary in 2018. Article 7 (Fundamental Rights) Section 15 of the Constitution states that ‘All persons are equal before the law and are entitled to the equal and effective protection of the law and shall not be discriminated against on the grounds of race, sex, language, religion, politics or other status’. In addition, Article 9 (Principles of State Policy) Section 22 of the Constitution also states, ‘The State shall endeavour to provide security in the event of sickness and disability or lack of adequate means of livelihood for reasons beyond one’s control’. As Bhutan prepares itself for graduation from the LDC status, holding true to these Articles of the Constitution is a priority.

To provide access to safe, affordable, accessible and sustainable transport for all, the Government continues to invest in improving road and air networks. In keeping with the vision of “Bhutan Transport 2040: Integrated Strategic Vision” in urban areas like Thimphu and Phuntsholing, public transport services have been introduced with ramps and designated seating for elderly citizens, pregnant women, and people with disabilities.

Gaps remain in the legal and policy framework to fully protect and promote the rights of women and children, and of vulnerable groups. Steps are underway to address this, in line with 2014 recommendations of the Universal Period Review, for example on advancing the rights of people with disabilities. The National Policy for Persons with Disability is under development, with efforts being made to explore ratification of the Convention on the Rights of Persons with Disabilities.

The study on Violence Against Children conducted in 2016 sheds light on the situation of children and their vulnerability to violence, exploitation, and abuse. Children are still vulnerable to violence and abuse. This is particularly true for children with disabilities, children from broken homes or living with extended families, and children from low economic backgrounds.

# Cabo Verde

Cabo Verde[[19]](#footnote-19) has made remarkable progress in its almost 43 years of independence, rated since 2007 as a Middle-Income Country, however, it continues being a country of deep inequalities and of regional asymmetries that have persisted over the last 78 years. As a result, Cabo Verde keeps leaving a lot of people behind and remains at risk. These are the families who do not have piped water or electricity or have interrupted supply because the price is excessive. And also, the disabled who do not attend formal education or vocational or higher education because there is not adequate and mass assistance for children, young people and adults with Special Educational Needs (SEN). It is the Cabo Verdeans and especially the majority of young people who do not have effective political participation. This is also the case of the disabled, the elderly and people with dependents, without income.

## Families with problems of access to piped water or electricity

In Cabo Verde, about 20% of the poor, and 30% of those living in extreme poverty, lack access to electricity, particularly in rural areas, and only 51 out of every 100 poor households get water mainly from the public grid. Thousands of poor households are often without power and public water network because of high tariff level. These include People with special educational needs that have difficulty accessing education. About 83% of the population with disabilities can read and write, about 14 percentage points below the population without a disability. Only 2822 people with disabilities attend a public or private educational institution, against 133,000 people without disabilities. Attending public or private education, especially those with a low level of disability, most pre-school, primary and secondary school teachers are not able to deal with children with SEN.  In Cabo Verde, people with visual, motor or hearing disabilities face physical, architectural and mobility barriers. Both housing and services buildings have no access, movement and hygiene functionalities adapted to these people. Thus, on a smaller scale in education and health, but especially in terms of accessibility and urban mobility, part of the population with disabilities is in danger of being left behind, aspects that must be properly addressed in the new urban agenda.

The intervention of the tax-paying social security is determinative in the financing of part of the expenditures in the Cabo Verdean health, but also it creates an important market niche for the private sector, which is the greatest mobilizer of national savings, and biggest institutional investor in the country, with determining intervention in the country’s strategic companies.  The non-contributory plan provides for a monthly pension of $55.1 and medicine coverage with an annual ceiling of $21.6 covering individuals aged 60 years and over, as well as children from poor families with disabilities or chronic disabling illness less than 18 years of age, belonging to households with an income below the poverty line, deprived of coverage of any national or foreign social security plans. It covers about 21,000 beneficiaries, with the elderly being the majority.

Housing deficits and insecurity constitute an important dimension of poverty in terms of access to basic social services, especially for those in need of care as children of poor, elderly and disabled families, compounded by the weakening of traditional forms of social protection.  Unpaid work represents close to 70% of the total workload in the country, meaning that the social effort and social contribution of families to social well-being and social cohesion are very high and falls mainly on women, but more than half of children and adolescents stay long periods of the day without adult supervision.

Cabo Verde became, in the last two decades, a destination of immigration, thus increasing the foreign population and immigrants, posing challenges of flow management, as well as an integration of immigrants in Cabo Verde, namely, regularization, labor market regulation, protection, and social inclusion domains. Social inequalities also translate into gender inequalities, opportunities especially for the disabled and decent work, with special emphasis on women.

It is in this context that government interventions in the field of social inclusion are accompanied by policies to promote family development and social inclusion, the fight against poverty, the promotion of equal rights and opportunities and the full participation and integration of people with disabilities, of policies that promote decent job creation that provide access to basic social goods such as health, education, water, energy, housing, food and vocational training; protection and social inclusion of children and adolescents at risk of social exclusion of gender equality and policies relevant to the management of immigration and integration of immigrants.

The implementation of the dependent care system (children from 0 to 3 years old, elderly people and people with disabilities) is one of the priorities of the Government of Cabo Verde. Institutional and legal conditions have already been created for the effective implementation of the National Plan for Care.  The inclusion programs include the municipalisation of the Social Inclusion sector with the municipalisation of the Social Development Centers, ensuring greater proximity and eliminating duplication of interventions and contributing to an integrated management of the social inclusion sector.

The Access to Health program consists of ensuring access to the health service and compensation mechanisms for persons with disabilities and the chronically ill, as well as access to health care and medical and medical care for people who are sick and are not covered social security systems in the country. However, no Cabo Verdean city has mobility systems adapted for people with disabilities, so architectural barriers seriously limit accessibility.

# Egypt

The eradication of extreme poverty, promotion of gender equality, empowerment of women, youth and people with disabilities, and the achievement of balanced regional development are the core principles of Egypt’s national sustainable development strategy, and these priorities are in compliance with the principle of leaving no one behind.[[20]](#footnote-20) Accordingly, the Government is committed to improving the effectiveness of social programs and on expanding them to cover more citizens in need. The Government is also working on the protection, rehabilitation, and empowerment of people with disabilities, as reflected by President Abdel-Fattah Al-Sisi’s declaration of 2018 as the Year for People with Disabilities. This is in addition to launching programs designed to empower women, young people and the poor.

Takaful (“Solidarity”) is a monthly conditional cash transfer for households with children, aiming at promoting capital accumulation by providing family income support while incentivizing poor households to invest in their children’s health, education and nutrition by imposing conditions such as enrolment of children in schools (with a minimum of 80 percent attendance) and getting the necessary health check-ups, including child immunization and growth monitoring for children aged 0-5 years old, and antenatal care for pregnant mothers. Approximately 2,268,000 families are enrolled in the program at present, more than the triple the number (707,000) enrolled in the fiscal year 2015/16.3 Karama (“Dignity”), on the other hand, is a monthly unconditional cash transfer program aimed at promoting social inclusion through integration of the most vulnerable, namely the elderly (those over 65 years old), people with disabilities, and, in a recent addition, orphaned children. Total enrolment currently stands at 306,000 households

## Protection, rehabilitation and empowerment of people with disabilities

One of the flagship accomplishments of the Government of Egypt in protecting the most vulnerable, and one of the main outcomes of announcing 2018 as the Year for People with Disabilities, was law No. 10 for 2018 on the Rights of Persons with Disabilities, which was issued in February this year after being approved by the parliament. The new law, which was worked on by the Ministry of Social Solidarity in partnership with the National Council for Disability and several NGOs, is the first Egyptian law that specifically addresses the rights of people with disabilities, and it provides an array of new beneficial measures. It provides the disabled with tax cuts and requires the Government and the private sector to allocate five percent of vacant jobs to people with disabilities, based on their qualifications and capacities. It will require transport service providers to dedicate space for disabled commuters. Under the bill’s mandate, the disabled will also receive free medical treatment at state-run hospitals.

In addition, the Ministry of Social Solidarity is collaborating with more than 12 ministries and 50 NGOs that specialize in disability issues to create an annual plan on disability that will help respond to the package of rights and services that the new law entails. This plan will start in July 2018 and is expected to be a regular mechanism for monitoring performance and results on disability issues in Egypt. The Government of Egypt, through the ministry, is shifting from deploying an institutional and medical approach to managing disabilities to a societal and functional approach. Under this new approach, it is promoting the idea that people with disabilities are “differently abled” people, and that society bears the responsibility to integrate them, secure their rights and utilize their capacities, both for their own sake and for the sake of social and economic development at large. Currently, more than 1.055 million people with disabilities benefit from different cash transfer programs (801,000 from the Daman social pension program, and 254,000 from the Karama program), at a total annual government expenditure of EGP 5 billion.

In addition to supporting the establishment of the legal framework for integrating people with disabilities and financing the cash transfer programs, the Ministry of Social Solidarity also supports other programs that aim at including this group in the economy and providing them with social and medical services. Many of these programs are either run by NGOs or done in collaboration with the private sector. Some of these programs include:

A recruitment unit established at the Ministry of Social Solidarity to assist people with disabilities who have the capacity to work to find relevant job opportunities; more than 1,045 people have been employed as a result of these efforts, in partnership with 20 private companies.

Collaboration and coordination with 50 NGOs and foundations to develop a database of their most important activities and divide them according to the four types of disabilities and facilitate joint initiatives.

Provision of scholarships for students with visual disabilities in 18 public universities, with total funds of EGP 900,000 per year.

## Corporate social responsibility(CSR) allocated to provide health services

The role of the private sector in providing aid for vulnerable groups in Egypt through their corporate social responsibility (CSR) programs has grown over the past decade. Corporate social responsibility activities cover a wide range of groups, including poor people, people with disabilities, people living in informal settlements and deprived areas, orphaned children, and children living or working on the street. Several hospitals that serve thousands of patients every year depend on both CSR and citizens’ donations to provide the resources for quality health care to vulnerable groups. The Magdi Yacoub Foundation and the Children’s Cancer Hospital (57357) are notable examples.

Economic inequity is not the only inequity the country faces; there are also gaps between men and women, between young people and older generations, between urban and rural communities, between people with disabilities and those without, and among different regions in Egypt – with Upper Egypt in particular having the highest poverty rates in the country and the lowest levels of access to and quality of services. Egypt has expanded the social safety net to secure the essential needs of poor people. However, the real challenge is Egyptians’ attitudes towards women, young people and people with disabilities, as a number of surveys reveal Egyptians do not trust their capabilities.

## Data

The first national statistics report on the SDGs produced by CAPMAS sheds light on the issues of data availability and accessibility, revealing that only 35.7 percent of the SDG indicators are classified under Tier 1.28 This percentage reflects the availability of these indicators on the aggregate level, but not necessarily by the required level of disaggregation (geographical location, sex, age, ethnicity or disability). Having only approximately 87 measurable and regularly updated indicators, coupled with problems of data disaggregation, somewhat constrains the SDG monitoring process. Moreover, these data problems adversely affect planning decisions and raise concerns regarding allocative justice.

# Greece

Greece[[21]](#footnote-21) has adopted a set of policy measures aiming at: the expansion of social goods, the protection of vulnerable social groups, the strengthening of social cohesion and social solidarity, the creation of new local and regional public services, the improvement of the educational system, tackling undeclared/under-declared/unpaid work as well as infringement of labour law, improving the sustainability of the social security system, implementing universal access to healthcare, measures against the humanitarian crisis, promotion and protection of mental health, prevention of addictions and strengthening the rights of people with disabilities

The Economic and Social Committee of Greece (ESC), the constitutionally established institution responsible for conducting the social dialogue on the country’s general policy and in particular on economic and social issues, has assumed an important role towards promoting the systematic and structured consultation and dialogue on the effective implementation of SDGs at different levels and sectors. The ESC is working, following the model of the European Economic and Social Committee (EESC), on the basis of a tripartite structure representing the interests of three main groups involved, directly and indirectly, in achieving the SDGs at different levels: (i) one of employers-entrepreneurs; (ii) one of public and private sector employees; and (iii) one including other categories of interests groups such as farmers, self-employed people, professionals, consumers, environmental agencies, disabled people’s confederation, gender equality, multi-child parents associations, and regional and local government.

## Job guarantee programme in the private sector

In particular, the emphasis is placed on designing targeted policies for women who suffer multiple discrimination and enhance the collection and diffusion of gender-disaggregated data. A multisectoral support of women who are victims of gender violence and/or multiple discrimination (e.g. immigrants, refugees, women with disabilities, Roma, single mothers), awareness campaigns among the overall population, and networking development are also covered by the NAPGE. Furthermore, the NAPGE encourages women’s participation in the labour market through promoting female entrepreneurship and the principle of equality in enterprises, collecting and providing data on gender differences in the labour market outcomes, improving the status of women in the agricultural sector, and reconciling work and family life.

In parallel, in line with Article 24 of the UN Convention on the Rights of Persons with Disabilities, the Greek education policy fully supports the right of all students to equal access to educational advantages, including children with disabilities and special education needs, taking measures and adopting legislative initiatives designed to combat imbalances and discriminations. In such a context, the promotion of inclusion policies favoring students with disabilities constitutes a key component of the national education strategy. The institutional framework being in place uses the integration of students with disabilities in mainstream education structures (attendance in mainstream education classes with parallel programmes of individualised support to students with disabilities and/or special educational needs) as a springboard to enable inclusion.

Access of students with disabilities and/or special educational needs to the available educational material, software and infrastructure In compliance with the UN Convention on the Rights of Persons with Disabilities, Greece has implemented specific actions with a view to enabling the access of students to the available educational material, software and infrastructure and to formulating support structures and services regardless of hearing or visual impairment, reduced mobility or other learning difficulty. One of these actions is the “development of accessible educational and support material for children with disabilities and/or special educational needs”. Additionally, general education textbooks were further enriched and turned into accessible forms for First and Second Grade Students in 2016. Moreover, according to Article 49 of the UN Convention on the Rights of Persons with Disabilities, the text of the Convention was made available in all accessible formats with the contribution of people with special needs. All formats of Braille script, the aural format as well as the production in the Greek Sign Language, were made by the Panhellenic Association of the Blind and Deaf. The educational material produced during this action was published on the website of the Institute of Pedagogical Policy.

Sustainable Urban Mobility – linking SDGs 7, 11, 13 The transport sector in Europe is responsible for the 25% of GHG emissions, and road transport, in particular, corresponds to a 70% of total emissions from transport, hence the European Commission systematically promotes the concept of Sustainable Urban Mobility Planning and encourages EU member states to ensure the right legislative and support conditions for their local authorities. In this regard, the Hellenic Ministry of Infrastructure and Transport established in 2017 a Division for Sustainable Urban Mobility with main responsibilities the monitoring of the development of Sustainable Urban Mobility Plans (SUMPs) in Greece and the preparation of a Strategic Plan to promote Sustainable Urban Mobility throughout the country. In order to establish a common framework for the development of SUMPs by Greek local authorities, a technical inter-ministerial Working Group has been set up by the Ministry of Infrastructure and Transport with experts from the Ministries of Environment and Energy and of Interior to elaborate general guidelines for SUMPs, ensuring the participation of all local stakeholders from transport agencies to citizens’ groups (e.g. cyclists, people with disabilities etc.), that will be shortly officially adopted by law. Additionally, the Greek Government is providing financial support to 162 municipalities with a population higher than 25,000 inhabitants for the elaboration of their SUMPs, through the Green Fund (operating under the Hellenic Ministry of Environment and Energy), with a total budget of EUR 9 million. These SUMPs address transport issues such as urban road safety, urban logistics, mobility management and intelligent transport systems, with emphasis on sustainable mobility means e.g. public transport, walking and cycling, but could also have a wider scope, entailing wider urban renewal, restoration and landscape planning projects (e.g. to increase public open green spaces and address urban “thermal/heat island” effects), thus considerably improving the quality of life for all citizens in large Greek settlements. In terms of awareness raising, participation of Greek municipalities implementing sustainable urban mobility interventions in the European Mobility Week has increased remarkably over the past years, growing from 8 municipalities in 2013 to 86 in 2016, with many of them also ranking in the list of the 10 finalist European cities to receive a Sustainable Urban Mobility Award. Moreover, dedicated training courses are being organised for the representatives of interested cities, on a repetitive basis, by the involved Ministries and the Institute of Training of the Greek Center of Public Administration and Local Government.

With regard to the implementation of SDG 7.1, Greece has taken a number of measures to protect vulnerable citizens and tackle the humanitarian crisis by ensuring energy supply to all, by free-of-charge re-connection and electricity supply to people and families living in extreme poverty (law 4320/2015). Since 2010, a reduced Social Residential Tariff has been established for vulnerable social groups (i.e. people with low family income, long-term unemployed, families with three children, people with disabilities, people with a need for mechanical support), which has been restructured in early 2018 to double the reduction rates provided to the most vulnerable households. Provisions for favourable arrangements have also been laid out through the Electricity Supply Code (issued in 2013) defining criteria for integrating customers into the Vulnerable Electricity Customers’ categories for electricity supply. Moreover, according to law 4508/2017 and Ministerial Decision 7408/1228/2018, an amount of EUR 10 million is available to support low-income citizens who have been disconnected from the electricity supply network due to overdue debts, to meet their energy needs.

In addition to the above fields of intervention, the Ombudsman has also recently been entrusted with other special mandates that relate to: (i) the external monitoring of procedures for the removal of third-country nationals; (ii) the National Torture Prevention Mechanism, in accordance with the UN’s Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT); (iii) the National Mechanism for the investigation of arbitrary behaviour; (iv) the Framework for the Promotion of the Implementation of the United Nations Convention on the Rights of Persons with Disabilities; (v) the auspices of the General Secretariat for Human Rights of the Ministry of Justice; and, most recently; (vi) under law 4509/2017, the Ombudsman has the competence to enter in the special treatment centers in order to control the possible violation of the rights of the patients.

# Ireland

Ireland[[22]](#footnote-22) has a comprehensive social protection system providing support for individuals and families across the various stages of the life-cycle, and addressing contingencies such as unemployment, disability, and the assumption of caring responsibilities [SDG 1.3].

Ireland has had national poverty reduction targets in place since 1997. The National Action Plan for Social Inclusion 2007-2016 [NAPinclusion] is a wide-ranging and comprehensive programme of action to address poverty and social exclusion. It adopted a new strategic framework to facilitate greater coordination across Government Departments at local and national levels. It was based on a lifecycle stage approach with goals set for each group: children; people of working age; older people and people with disabilities; and communities. The Plan included a wide range of specific actions to be taken by various Government Departments, including targets for the levels of social welfare payments. It was updated for the period 2015-2017,with a greater focus on modernising the social protection system, improving effectiveness and efficiency of social transfers and strengthening active inclusion policies. Increasingly Ireland is supporting technical and vocational training to enable young people to develop skills leading to employment. We also support initiatives aimed at integrating persons with disabilities into technical and vocational training programmes [SDG 4.4, 4.5]. Lone parents and women with disabilities continue to have much lower rates of labour market participation. The EU indicators do not address the policy frameworks, which address social, and political exclusion in Ireland. These would include the National Strategy for Women and Girls, the National Disability Inclusion Strategy, the National Traveller and Roma Inclusion Strategy and Migrant Integration Strategy.

In relation to legal frameworks, the Equal Status Acts 2000-2015 prohibit discrimination in the provision of goods and services, accommodation and education in Ireland. They cover the nine grounds of gender, marital status, family status, age disability, sexual orientation, race, religion, and membership of the Traveller community. In addition, the Acts prohibit discrimination in the provision of [housing] accommodation services against people who are in receipt of various social welfare payments. The Acts prohibit discrimination subject to some exemptions, in access to and use of goods and service, including indirect discrimination and discrimination by association, sexual harassment and harassment, and victimisation. The Acts allow positive action to promote equality for disadvantaged persons or to cater for the special needs of persons. Discriminatory advertising is also prohibited. It is prohibited to publish, display or abuse to be published or displayed, an advertisement, which indicates an intention to discriminate, harass or sexually harass. Within our bilateral aid programmes efforts are underway to ensure that our programmes address growing inequality across and within countries. In reporting on SDG 5, we refer to Ireland’s focus on inclusive economic growth for women. Ireland also works to empower and promote the social, economic and political inclusion of people with disabilities. For example, in Ethiopia through our support to the Ethiopian Centre for Disability and Development, Ireland supports inclusive vocational training and employment for persons with disabilities. In Vietnam, Ireland supports several civil society organisations that work with people with disabilities on social inclusion, empowerment, health and early childhood detection of disabilities, as well as mine-related risks. We also support work on issues relating to disability through civil society organisations such as Christian Blind Mission [CBM], Sightsavers, Plan Ireland and Misean Cara [SDG 10.2].

Public transport accessibility is addressed through Ireland’s Sectoral Plan for Accessible Transport ‘Transport Access for All’. This policy is based on the provisions of the Disability Act 2005 and related Government strategies, for example the Comprehensive Employment Strategy and in particular the National Disability Inclusion Strategy [NDIS] 2017-2021, Accessibility features, such as wheelchair accessibility and audio/visual aids, are built into all new public transport infrastructure projects and vehicles from the design stage. For example, Dublin’s Light Rail system, known as the Luas, is fully accessible. 100% of the Dublin Bus and Bus Éireann city fleets are wheelchair accessible, as well as approximately 80% of the Bus Éireanncoach fleet and this will increase as the coach fleet is replaced. Other measures to assist people with disabilities using public transport include the provision of Real Time Passenger Information on the web, by app and electronic displays at bus stops, improved functionality and availability of the Leap Card and the development of the step free journey planner. Department of Transport, Tourism and Sport also funds a programme of retro-fitting older, existing, public transport infrastructure and facilities to improve their accessibility feature [SDG11.2].

# Jamaica

The key tenet of Agenda 2030 strongly embraced by Jamaica is “leaving no one behind”. Our own National Vision echoes the principle of social and economic inclusion.[[23]](#footnote-23) Essentially, as we implement the SDGs and advance our own development prospects, we continue to ensure that our development approaches are for all. Importantly, we will ensure that we focus in more precise ways on some key groups – women and girls, unattached youth, persons with disabilities, the vulnerable and marginalized, focusing in a holistic way on all Jamaicans.

## Inclusiveness and stakeholder participation

The process of sensitization on the SDGs and consultation on the VNR began in 2017 with an approach to “Localise the SDGs”, through the Dialogue for Development series under the theme “The Jamaica We Want: Vision 2030 Jamaica, advancing the SDGs… Leaving no one behind” engaging children and youth, farmers, fisher folk, business community, persons with disabilities, women and grassroots organizations, service organizations, local level authorities, and parliamentarians. Preparation of the VNR was no diﬀerent as a major feature of the planning process is the high level of engagement of all stakeholders including NGOs, CSOs, private sector, academia, philanthropic organizations, international development partners and all sub-groups of the population (women, children, youth, older persons, persons with disabilities etc.). The process of sensitization regarding the SDGs and consultation on the VNR began in July 2017 with the view to “Localise the SDGs”.

# Lao PDR

Expanding access to education and health services for people with disabilities, promoting access for the elderly to free health care, and promoting a culture of healthy diets and healthy lifestyles.[[24]](#footnote-24)

## People with disabilities are another vulnerable group

Disabilities in Lao PDR are often caused by UXO, road traffic accidents, disease and congenital conditions. The overall prevalence of disabilities among the population 5 years and over is 2.8 percent. 10 Lao PDR ratified the Convention on the Rights of Persons with Disabilities (CRPD) in 2009 and submitted the State Party’s Report in 2016.11 Lao PDR has set up the National Commission for Persons with Disabilities and the Elderly, and has taken several measures to implement the CRPD as laid out in its Report, such as the Decree on Persons with Disabilities (No. 137) in 2014, and adopting a National Strategy and Plan of Action on Inclusive Education (20112015).

Measurement issues**:** Lao PDR has an effective education management information system (EMIS), which produces data routinely disaggregated by sex and robust enough for annual planning. Many SDG 4 indicators can be monitored through EMIS. Data on technical and vocational education and training (TVET) need strengthening and linkage with employment outcomes. Education for children with disabilities will require further inter-ministerial work. Successive surveys and censuses will need standardization: the mix of self-reported and tested literacy rates in different surveys funded by different partners is not conducive to interpreting trends.

Disaggregation of data by sex and age has improved but is still inconsistent**.** Moreover, many areas such as employment, migration, incomes, disability, domestic violence, ethnicity, and residence need robust gender statistics. Data on violence against women and girls need to be regularly collected and monitored with due consideration of the principles to ensure women’s safety and confidentiality.

Measurement issues**:** Administrative systems for SDG 16 indicators need strengthening to produce regular and robust reports with sex-disaggregated data. These are the indicators on homicide victims and victims of violence, the handling of cases by the Ministry of Justice and the People’s Supreme Court, transparency in budget planning and execution, the composition of public sector employees (by gender, ethnicity and disability status), and birth registration.

Tackling the measurement and data challenges identified in this report**.** Lao PDR has passed Statistics Law No.03/NA, dated 30 June 2010 with a clause requiring gender disaggregated statistics.141 Support is needed to strengthen statistical capacities to track SDGs and fully implement the Statistics Law. Among the gaps that have been identified is the lack of systematic disaggregation of data by gender and especially by disability status. Monitoring the well-being of people with disabilities needs to start with key indicators, such as access to basic services. Other national priorities include strengthening and expanding the coverage of the civil registration and vital statistics system and strengthening administrative information systems to reliably track key service coverage and outcome indicators

# Latvia

In the medium term, Latvia has prioritised reducing the poverty rate for employed persons and families with children, while continuing to improve conditions for older persons and persons with disabilities. The share of people at risk of poverty or social exclusion (Eurostat data) fell by 10 % between 2010 (38.2%) and 2016 (28.2%), while the population has decreased by about 9% during the same period.[[25]](#footnote-25)

Persons with disabilities are provided with government-funded assistant services to access schools, universities and work. In 2016, 24.9% of persons with disabilities (52% women and 48% men) were registered as employed. To encourage employment of persons at risk of social exclusion, the government has launched a pilot project to support social enterprises. From 2018, businesses can qualify for social enterprise status and receive special support

Support to families with children has been significantly increased between 2014 and 2018 through family benefits during the child-care period. This includes differentiated family benefits, depending on the number of children, additional allowances and tax exemptions. Local governments provide free meals in schools and kindergartens, and there are also discounts on public transport. Persons with disabilities, orphans etc. receive free public transport and families with three and more children are entitled to a 25% discount on public transportation costs. This support has contributed to the reduction in the risk of poverty for families in which two adults raise three or more children (19.8 % in 2016), however, the risk of poverty remains high (34.3 %) in single-parent families.

Employment is a key factor in improving people’s lives. The employment rate increased during the economic recovery, boosted by labour market inclusion programmes that have enhanced opportunities for youth, people over the age of 50, the long-term unemployed and persons having served prison sentences. Persons with disabilities are provided government funded assistant services to access educational institutions and/or work places. A pilot project has been launched to support the newly legislated social entrepreneurship system, and from 2018 businesses qualifying for the status of social entrepreneur may receive support for inclusion initiatives.

On the macro level, a relatively small percentage of the GDP is channelled to social protection. Changes in the corporate income tax will promote business activity, hence competitiveness. However, the changes may lower tax revenues against the GDP, which, if they were higher, could be effectively redistributed to persons with insufficient income from paid employment, such as people with disabilities, the elderly, etc.

Latvia is introducing a compulsory health insurance from 2019 that must be monitored carefully to ensure that it does not pose risks for certain groups. Although all citizens will continue to be entitled to basic health care services, in the future a full basket of services funded by the government will be available to socially insured persons and those who make voluntary health insurance contributions. The full-service basket also will be available to certain vulnerable groups: children up to age of 18, orphans and children without a parental care up to the age of 24, pupils and students, persons with disability groups I and II, the unemployed, etc.

# Lebanon

Public sector employees have access to various social protection programmes such as maternity leave, health cover, private education, and end of service indemnity schemes that offer a choice between a lump sum after retirement or a monthly pension—and sometimes both.[[26]](#footnote-26) Private sector employees have access to the NSSF. Most of the NSSF’s protection schemes offer maternity and health cover and a lump sum end-of-service indemnity on retirement. The elderly and non-public sector retirees, the disabled, the unemployed and blue-collar self-employed benefit from medical services cover provided by the MoPH, or they receive social assistance under MoSA’s programmes. MoSA is currently preparing a participatory study on social protection to improve its provision by a well-identified formal and unified system. Many social services are already available and the disabled also receive assistance and medical coverage through MoPH and MoSA.

To facilitate school enrolment and provide services to students who have learning, physical and sensory disabilities, MEHE is implementing several initiatives with different education partners. MEHE is currently piloting inclusion in 30 public schools and equipping 100 public schools with resource rooms to support students with learning disabilities Human rights: ProAbled is an online job opportunities platform for people with disabilities.

# Lithuania

Single persons, single-adult households with one and more children, disabled and elderly persons are persons who are at the highest risk of poverty in Lithuania.[[27]](#footnote-27) Another concern is the increasing at-risk-of-poverty rate of the disabled (persons whose activity was restricted for 6 months and longer due to health problems) and persons of 65 years of age and over, which in 2016 amounted to 30.6% and 27.7% respectively. Therefore, Lithuania is carrying out significant reforms to help reduce poverty and social exclusion. To improve the situation of elderly and disabled persons, however, the Government seeks to maintain the sustainability of the pension system as well for the reason that an unsustainable pension system inspires no confidence.

The launch of an institutional care reform that is gaining momentum has been a step of particular importance. This reform will replace the long-standing Soviet system and create a system that is completely new for Lithuania. The institutional care reform will help to establish a system of integrated services which will make individual services available for each mentally disabled person or his/her relatives according to their needs in the community and ensure that each child left without parental care grows in a family or in an environment as close to the family as possible.

In developing inclusive education, more efficient assistance will be provided for the individual progress of persons with disabilities and special learning needs. Lithuania seeks to make the general schools more attractive and ready to accept children with disabilities and special learning needs who currently are educated at special schools: jobs for assistant teachers are established, possibilities for allocating larger funds are reviewed, schools are encouraged to adopt the physical environment to the universal design requirements, pedagogical workers undergo training, and schools are supplied with the required teaching aids. Since 1 September 2017, the administrations of 55 municipalities have established positions of interinstitutional cooperation coordinators whose main purpose is to take care of the development of education assistance and social and health services for children and their parents, and to reduce the negative effect of the social and economic context on the children’s learning achievements and personal development. Despite the attempts to lower the share of children learning at special schools, the situation has not improved since 2012 (the share of children learning at special schools accounted for 0.99% in 2012 and 1.1% in 2016). The number of vocational schools implementing vocational training programmes customised for the disabled (about one-third) is increasing in Lithuania. However, the share of persons with disabilities at vocational schools is very small and it has changed slightly (this share was 2.47% in 2012 and 2.84% in 2016). The situation at higher education establishments is similar (0.54% in 2012 and 0.55% in 2016). Social scholarships are granted to students and, to improve the availability of studies, successful students also offered an opportunity to receive targeted payments.

In view of the existing situation, it is planned to increase the funding for the development of children’s non-formal education (to ensure the inclusion of children with disabilities), establish a network of joint schools with special education divisions and draw up qualification development programmes for teachers aimed at the provision of individual assistance for the education of children with special needs in classes. There are also plans to create and implement a mechanism for the provision of services designed for the development of activities that promote lifelong learning and professional career planning, by devoting particularly great attention to the disabled and foreseeing their possibilities, adapt the physical and information environment of vocational schools to the disabled and modernise the student social support system.

## Achieve gender equality and empower all women and girls

A network of specialised assistance centres operates in the sphere of assistance to victims of domestic violence. In 2017, assistance at specialised centres was provided to a total of 11 600 persons (of which 9 300 were women and 1 600 were men, and more than 600 children; also, the victims of violence who benefited from assistance included 507 disabled persons). The specialised assistance centres are funded on a project basis, and this funding has been increasing steadily during the recent years. Social security pensions were increased in 2017. This has affected more than 593 000 pensioners, more than 202 000 recipients of disability pensions and 7 400 recipients of early pensions. With a view to ensuring the consistent increase of pensions in accordance with the country’s economic indicators, pensions are subject to indexing from 1 January 2018. In 2016–2018, Lithuania has increased the basic non-taxable income amount (hereinafter ‘NTIA’) and individual non-taxable income amounts for the disabled.

# Namibia

In general, considerable inequalities of access to university education remain in terms of social class, geographical location, marginalized groups as well as those with special needs and disabilities.[[28]](#footnote-28)

During the period between independence in 1990 and 2017 the country notably reduced poverty, increased access via free education at both primary and secondary school levels, broadened health services coverage (including stabilizing the HIV and AIDS epidemic), increased the coverage and value of old age, disability and OVC social safety grants, safeguarded biodiversity and ecosystem services in protected areas, adopted legislation to improve good governance and environmental management, and created specific institutions to target support for the poor.[[29]](#footnote-29) The growth in employment opportunities subsequently fell short of the of number new entrants in the labour market, thus there is now high unemployment rate (34 percent), impacting certain vulnerable groups more severely, including women, youth, people with disabilities, and the poor.

Fragmented social programmes**.** Namibia has one of the most comprehensive social protection systems in sub-Saharan Africa: it supports elderly people, orphans and vulnerable children, people with disabilities, war veterans, school children, marginalized communities and populations affected by hunger. However, the registration and targeting procedures are not efficient, monitoring needs strengthening as well as the beneficiary selection, which leads to exclusion and inclusion errors.

Higher education and training. With reference to Namibian higher education, quality and relevance of university education has been a serious concern for both private and public-sector employers. Considerable inequalities of access to university education remain in terms of social class, geographical location, marginalized groups as well as those with special needs and disabilities.

# Poland

Poverty reduction is an essential element of the Strategy for Responsible Development. According to the SRD, the groups at the highest risk of poverty in Poland are families with many children and single-parent families, children and youth (in particular those with disabilities) and families where at least one carer is unemployed.[[30]](#footnote-30)

The improvement of the situation of dependent persons (children, elderly and disabled persons and their families) is implemented within the framework of policies and programmes addressed to these groups of persons. The Friendly Poland - Accessibility Plus Programme, on the other hand, aims to improve the quality and independence of life of all citizens, including in particular the elderly and people with permanent or temporary limitations to mobility and perception. This is to be achieved by improving the accessibility of public areas, products and services in terms of architecture, information and communication. A number of measures in the For-Life programme provide for the improvement of the situation of heavily burdened families with expenditures on treatment and rehabilitation of disabled people.

In order to reduce the mortality and post-traumatic disability of injured persons in accidents, injury centres for adults have been established in Poland, where traumatic patients, including accident victims, are treated. It is planned to create injury centres for children.

Comprehensive support programme for families “For Life” - comprehensive solutions concerning support for families with persons with disabilities, including children with disabilities, in particular in areas concerning support for pregnant women, early support for the child and its family, support and rehabilitation services, health, education, housing support, as well as coordination, counselling and information. The solutions adopted in the Programme are aimed at enabling real and full social integration of people with disabilities and at providing psychological, social, functional and economic support to their families.

Economic activation of young people, women, people aged 50+, the long-term unemployed, as well as people with disabilities is the overriding objective at the junction of economic and social policy. It is also important to improve the flow of unused labour from agriculture to other sectors e.g. by facilitating the acquisition of professional skills and qualifications (in particular by people from small and medium-sized agricultural holdings) and making it possible to combine work and agricultural activity.

An important element of the development of the Polish labour market is to ensure its openness to the most vulnerable groups, i.e. people with disabilities. The Strategy for persons with disabilities 2018-30 and the related National Programme for Employment of Persons with Disabilities are being prepared, which provide e.g. for supplementing or modifying the currently functioning instruments supporting employment and economic activation of persons with disabilities and supporting them in entering and maintaining the labour market or taking up economic activity.

With a view to equalising the living standards of communities living in different areas of Poland, it is important to improve access to services, including social and health services. Within this area, solutions are implemented to increase access to cheap housing, changes in the functioning of the private rental market and supported housing for people at risk of social exclusion. Social activities aimed at reducing inequality among children, access to assistance and care services and rehabilitation equipment for persons with disabilities, promotion of professional and social activity of seniors, ensuring accessibility to public space for persons with reduced mobility are implemented.

Equal access to the labour market ensuring the use of the potential of human resources is also important for the preservation of social equality within the country. In this respect, support instruments are adjusted to individual needs of the local labour market, considering human capital reserves available in the region (young people, women, people with disabilities, people aged 50+, the long-term unemployed, including those in sectors with unused labour resources - agriculture, mining, etc.)

# Qatar

Qatar has built an advanced infrastructure, enabled citizens to obtain modern housing, constructed universities, research centers, schools, public libraries, museums, heritage villages and clubs, and established hospitals, health centers, playgrounds, parks, green areas and rehabilitation centers for people with disabilities. It has further provided clean water and electricity at affordable cost, in addition to transport, telephone and Internet networks.[[31]](#footnote-31)

Achievements.[[32]](#footnote-32)

Public spending on social benefits as a percentage of GDP rose from 0.05% in 2008 to 0.14% in 2015.[[33]](#footnote-33) The promotion and protection of the rights of persons with disabilities is a top priority for Qatar through its ratification of the Convention on the Rights of Persons with Disabilities. Qatar has made significant strides towards promoting the rights of marginalized and vulnerable groups and their integration into society and in the labor force, especially in employment and education.[[34]](#footnote-34) Substantial progress has been made in providing persons with disabilities with support and means to exercise their rights, particularly in the areas of education, employment and sporting activities. The role of civil society in various aspects of social work is increasing through the distinctive efforts of civil society organizations.

Provide universal access to safe, inclusive and accessible green spaces and public areas, in particular for women, children, older persons and persons with disabilities Due to the high and rapid urban growth rate in Doha city and other urban areas of Qatar, the need for green spaces and public and inclusive recreation areas has increased. In the relatively harsh climate of Qatar during the summer, the absence of natural protection makes the use of outer spaces unattractive to the population. The National Development Strategy 2018-2022 sets out a target to establish a green belt around Doha and its suburbs, which will play a major role in improving environmental and health conditions. Qatar National Master plan 2032 includes a number of urban development policies and procedures for the expansion and development of open spaces, parks and recreational services aimed at providing public spaces that are vital, attractive and accessible for all users. The plan also aims to use natural and urban garden landscaping designs as basic tools in the design of public spaces and open areas.[[35]](#footnote-35)The open, well-prepared green spaces have grown at an annual growth rate of 4% for the use of all segments of society, especially women, children, the elderly and persons with disabilities. There has been a significant expansion in the number of integrated parks between 2010 and 2016 with an annual growth rate of 9%.

# Romania

In the health field, the National Health Strategy 2014 represents the main strategic document – 2020 (NHS), adopted by the Romanian Government at the end of 2014 (GD no 1028/2011). [[36]](#footnote-36)Beyond this, many sectoral strategies have been developed with the timeline 2014 – 2020 at national level, in an attempt to define a coordinated framework for reforming those sectors and to access, in this purpose, the EU funds (e.g. the strategy for child protection, the strategy for long life learning, the strategy for promoting active ageing, the strategy for social inclusion and poverty reduction, the strategy regarding the persons with disabilities) etc. Most of these strategies have objectives or areas involving the health sector, but the synergy and coordination in their implementation should be improved.

The health system is social insurance based and theoretically all the people supposed to be insured. Some particular groups are being protected by law and being insured without payment (eg: children, pensioners with low income, people with disabilities, people benefiting for a minimum income guaranteed by the state, unemployed, prisoners, pregnant women without income or uninsured people with severe diseases, covered by the national health programs).

## Addressing most vulnerable groups

Some health policies and national health programs are targeting vulnerable groups: In Romania some categories of people are exempted from the payment of health contribution, in order to be protected by poverty (children, people with disabilities, pregnant women without income, retired people and adults with low income, unemployed etc.).

Longer working life is encouraged and ability to work is maintained**.** Presently, a very low percentage of people with disabilities are active in the labor market - only 7.25% of people with disabilities between the ages of 18 and 64. Thus, the disability indemnity and the complementary budget are the main sources of income for this vulnerable group. Based on the legal rules, people with disabilities can enter the open (and highly competitive) labormarket. Romanian law specifies that companies with more than 50 employees must ensure that at least 4% of their staff is comprised of people with disabilities. If not, they need to pay an amount equivalent to half of the minimum income for all positions that are not occupied by people with disabilities or to buy products from the sheltered units. In practice, the majority of enterprises prefer to pay the penalties, instead of hiring people with disabilities and to benefit from the incentives and facilities established by law.

Long-term and health care for the dependent elderly Decreased dependence of the elderly and improving long-term care (LTC) as part of the Active Ageing concept is a strategic objective assumed by the Romanian Government in the National Strategy for the promotion of Active Ageing and Elder Protection 2015-2020. However, the level of formal supply of LTC services is low, and the system is fragmented across the health/social service divide, distinctions between disabled and older persons, as well as across jurisdictions with uneven access to services. A heavy burden of care provision is, therefore, falling on family members without any major support structure. Historic cultural norms of care provided by the family have more recently been stressed by strong emigration flows.

## Public safety

According to the National Strategy on Social Inclusion and Poverty Reduction 2015-2020 of the Ministry of Labor and Social Justice, children, elderly and citizens with disabilities represent the most vulnerable communities in Romania. From this perspective, this guideline covers general safety and security measures such as and, in particular, measures centered on vulnerable members of the human communities in Romania.

# Saudi Arabia

**Equal opportunities**

The Ministry of Education seeks to achieve the requirements associated with SDG 4 “Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all”. This objective has been at the core of strategies, initiatives and programs launched by the Ministry in various areas. Key among these are; [[37]](#footnote-37)

**Special needs education**

* Development of special education, through the development of a national strategy for the education of people with disabilities.
* Creation of a national centre for special education, in cooperation with the private sector. The center will provide integrated high-quality education and training to students with disabilities, along with their teachers and families.
* School transportation for special education students of with motor disability.

# Singapore

ComCare provides assistance to low-income Singaporeans to meet their basic needs.[[38]](#footnote-38) There are four ComCare schemes: Short-to-Medium-Term Assistance (SMTA), Long-Term Assistance (LTA), ComCare Interim Assistance, and Student Care Fee Assistance. SMTA targets low-income families and individuals who are temporarily unable to work (e.g. due to illness, care giving responsibilities), and those who are unemployed and need temporary financial support while they seek employment. LTA targets individuals who are unable to work due to old age, long-term illness, and disability, have limited or no means of income, and have little or no family support. Assistance such as cash grants, rental, utility assistance, medical assistance, and employment assistance may be provided based on the assessed needs of the individual. Individuals are also linked up with other services, such as Family Service Centres (FSCs), Medical Social Workers at Public Healthcare Institutions, Senior Activity Centres, or affiliated agencies for further social support as needed.

Singapore has also introduced the Nominated Member of Parliament (NMP) scheme to promote political inclusion of all Singaporeans, including those who may be potentially disadvantaged and marginalised. NMPs represent the varied interests of different groups of Singaporeans. For example, NMP Ms Chia Yong Yong, who is also the President of the SPD, has spoken in Parliament to champion issues concerning the welfare of persons with disabilities.

Singapore has also introduced various policies to ensure that all Singaporeans are empowered to achieve their fullest potential. This includes our Third Enabling Masterplan (2017 - 2021), which looks at improving the quality of life of persons with disabilities, supporting their caregivers, and building a community that is more caring and inclusive. The Masterplan was endorsed by a Steering Committee that included key stakeholders such as persons with disabilities, caregivers, and professionals in the disability field, voluntary welfare organisations, and Government agencies.

Inclusive Transport We continue to put in measures to guarantee the accessibility of public transport to all, including the elderly, disabled, visually-handicapped, and families with young children. Since 2006, all our train stations have been equipped with at least one barrier-free entrance with a lift, a tactile guidance system, and wheelchair-accessible toilets. More than 85% of train stations now have barrier-free access routes from the station entrance to the station platforms. Priority queue zones for passengers in need for boarding of trains, public buses and lifts were introduced in 2015, and have been implemented in 20 train stations and nine bus interchanges to date. Since April 2017, our public buses are also equipped to allow parents to board with children in open strollers. By 2020, all public buses will be wheelchair-accessible.

Safer Streets To make our streets safer for the elderly and persons with disabilities, 50 “Silver Zones” will be implemented by 2023 in areas with high senior resident populations, amenities which seniors frequent, or higher accident rates involving senior pedestrians. Silver Zones have road safety features, such as lower speed limits, centre dividers, and road humps and chicanes that slow down motorists and remind them to look out for pedestrians. To date, 15 Silver Zones have been completed.

# Spain

In an outstanding exercise of shared construction, on 9 April the Congress of Deputies hosted the most important event in this process, organized by thirteen networks and platforms, three nationwide trade unions, twenty-five civil society organizations and four university research institutes and study centres.[[39]](#footnote-39) Noteworthy among these organizations is the Third-Sector Platform, which includes Spain’s Volunteering Platform, the European Anti-Poverty Network in Spain, the Social Action NGO Platform, the Spanish Committee of Representatives of Persons with Disabilities,

## Organized civil society: FuturoenComún’s vision of the Action Plan

Futuroen Común is an innovative inter-sector dialogue platform, working towards sustainable development, human rights and the strengthening of the civic democratic space. It comprises more than 50 organizations with different focuses, including the environment, human rights, social action, feminism, childhood, disability, alternative economy, human mobility, and labour issues. It works using a systemic, cross-cutting approach, to generate proposals for policy change, awareness-raising and mobilization.

In the near future, further measures expected include the prompt adoption of the 2017-2020 National Strategy to Prevent and Reduce Poverty and Social Exclusion, as well as the continuation of the Action Plan within the 2014-2020 Spanish Strategy for Persons with Disability. In addition, the ongoing 2015-2020 Comprehensive National Strategy for Homeless Persons will be further developed, and a new Strategic Plan for Equal Opportunities will aim to reduce the inequalities between women and men that persist in employment and in the economy.

Spain’s Health Ministry has expressed its willingness to contribute to mainstreaming the contents of the 2030 Agenda in the field of public health and to help achieve the progressive implementation of the “health in all policies” goal, seeking to act not only in disease prevention but also in promoting individual and collective health within the healthiest possible environment. It has been affirmed that the definition made of public health should integrate all the dimensions of the 2030 Agenda: social, economic, environmental and governance. These dimensions are determinants of the population’s health (in addition to the biological concept and the focus adopted within the healthcare services). Therefore, in the health sector, these dimensions should all be addressed as a natural and harmonious part of public policies regarding health care. In addition, social well-being must be taken into account, with special concern for particularly vulnerable areas of the population such as persons with disabilities and the elderly.

Furthermore, measures should be adopted to prevent and respond appropriately to disabilities, reducing their impact on individual health, and promoting quality of life and integration into the activities of the society. Moreover, the need for preventive measures should not be limited to individual interventions. The social sphere exerts a decisive influence on the life of individuals, and so interventions in this area must also adopt a collective scope, and therefore address a much more extensive and heterogeneous environment. Finally, making all levels of the health system more inclusive and accessible to persons with disabilities will also reduce inequalities and unmet health needs (WHO World Report on Disability, 2011).

Statistics published by the Ministry of Education, Culture and Sports for the academic year 2015-16 show that students receiving support for special educational needs accounted for 2.6% of the total student population and that 83.0% of them attended conventional schools and institutions, although there is some variability in the rate of integration according to the type of disability presented. Thus, among students with visual disability or behavioural/personality disorders, integration rates of 95.1% and 96.8%, respectively, have been achieved. It can be concluded, therefore, that students with special educational needs are normally incorporated into conventional schools, where they are given the necessary support for effective inclusion, as required under the UN Convention on the Rights of Persons with Disabilities, which was ratified by Spain in 2008.

Children with disabilities need effective technical, material and human support. The lack of such support has a significant negative impact on their daily activities, both in the classroom and in after-school activities. Apart from academic questions, the issue of these students’ coexistence with their peers must be addressed, recognizing that situations of bullying may arise and must be eradicated.

Nevertheless, our society is still confronted with fundamental challenges to real and effective equality. Despite the notional equality declared in the Constitution and in our legal system, and the significant progress made in recent years, discrimination persists, ranging from the most extreme forms—such as those suffered by women who are victims of violence—to those which are less perceptible but suffered every day, in all areas. Accordingly, it is essential to assist those who are victims of multiple discrimination (a population group that is too often ignored), such as women and girls with disabilities.

The most serious manifestation of inequality between women and men is undoubtedly that of gender violence. Since 2012 the existence of disability has also been taken into consideration. Thus, between 2012 and July 2017, 26 persons with disabilities were killed. In 2017, 13,500 complaints of gender violence were recorded, which highlights the urgent and continuing need for Spain to address the question of violence against women.

Disability is another factor that heightens women’s risk of social exclusion, in areas such as health conditions, access to education, justice and employment, and in their level of participation in the society of which they are part. Jointly, these aspects can produce the phenomenon of multiple discrimination, placing women with disabilities in a position of even greater vulnerability to violence and limitations to their sexual and reproductive rights, as well as exacerbating inequalities in social issues, education, employment, and health.

The most notable feature of the population sector comprising persons with disabilities (SDG indicators 8.5.1 and 8.5.2.)—which in 2016 included more than 1.84 million persons aged between 16 and 64—is their low level of participation in the labour market. Their activity rate is lower than that of the population as a whole, although it has risen during the last three years. In the same line, unemployment among those with disabilities has fallen since 2014; nevertheless, it continues to be notably higher than the overall rate. The proportion of those in work has also grown in recent years. There is almost no gender gap between men and women with disabilities; thus, the unemployment rate among women with disabilities is only one point higher than that for men.

SDG 10 seeks to reduce the inequality caused by factors such as sex, age, disability, race, ethnicity and religion, both within Spain and among countries, through the adoption of relevant policies and legislation. Special attention will be paid to the case of persons with disabilities, who experience significant financial inequality due to the additional expenses their condition provokes in daily life, such as those of the technical means and support needed to ensure personal autonomy and independent living. This SDG also aims to improve the regulation and control of financial markets and institutions.

The challenge of accessibility**.** Cities are increasingly working to adapt their infrastructures and services to people with disabilities. Issues such as urban constructions, public spaces, transport, housing and related infrastructure, information and communication are of crucial importance in determining the accessibility or otherwise of a city, an issue that presents a significant challenge to the provision of social inclusion. Investments in accessibility always generate multiple benefits that are enjoyed by all citizens, regardless of whether they have a disability.

In the regulatory field, Act 9/2017, of 8 November, on public sector contracts (transposing EU Directive 2014/24 on public procurement into domestic law) has as a fundamental goal that of clarifying the regulations in force, to enhance legal security and to ensure that public procurement is used as an instrument favouring EU and national policies regarding environmental issues, as well as in the social field (hiring persons with disabilities and at risk of exclusion) and in ethical matters (such as ensuring respect for human rights throughout the production chain, as supported by the Fair Trade movement). In the general context of reducing inequality, the promotion of equal access to justice represents a further element of social cohesion. Indeed, it is the basis of a democratic society, because economic, social or educational vulnerability should never be an obstacle to citizens’ obtaining the legal protection of the State. Thus, the free legal aid system has been reformed so that disadvantaged groups, such as victims of gender violence, terrorism and trafficking in human beings, and minors and disabled persons who are victims of mistreatment, may benefit from it.

With respect to persons with disabilities, particular concern has been raised about the rising number of hate crimes committed against those with a disability. This worrying situation was reported in the 2017 Ombuds Annual Report, together with difficulties in securing access to justice for women with disabilities and for persons with intellectual disabilities. Nevertheless, the Report acknowledges improvements in police treatment towards persons with an intellectual disability who may have suffered criminal victimization (intervention as a witness during the police process, procedural adaptations to ensure access to justice under equal conditions, etc.).

Going forward, planned measures include the upcoming approval of the 2017-2020 National Strategy to Prevent and Combat Poverty and Social Exclusion, as well as monitoring of the 20142020 Spanish Disability Strategy Action Plan. Furthermore, there is already a 2015-2020 Comprehensive National Strategy for Homeless People, which will be further developed. Also, the Strategic Plan for Equal Opportunities will address reducing the inequalities that still exist between women and men in employment and the economy as a whole.

In 2016, the highest percentage of women at risk of poverty or social exclusion in Spain was in unemployed women (59.5%), and the second highest percentage was in non-working women (32.7%). In 2016, among men, the highest percentage in Spain was in unemployed men (70.9%), and the second highest percentage was in non-working men (46.8%). Given that the unemployment rate among people with disabilities in 2016 was 9.1pp higher than that for those who have no disabilities, and that the participation rate was 42.8pp lower than that for those who have no disabilities, people with disabilities are one of the groups at the greatest risk of poverty or social exclusion.

It is also important to highlight that the risk of financial problems for families with minors, which is particularly high when one or more have disabilities, is notably higher than in any other form of family. The social exclusion rate for households in Spain is 1.5 times higher when families include minors aged under 18 and is 2.5 times higher in large families. This problem is especially serious in terms of breaking the vicious circle of poverty. As the report on Inter-Generational Transfer of Poverty (FOESSA, 2016) states, 8 out of 10 people who experienced severe financial difficulties in their childhood or adolescence, repeat the experience as adults.

# Sri Lanka

Social protection: There are a large number of social protection programmes implemented by Government agencies targeted towards the poor and other vulnerable groups like elderly, persons with disability and internally displaced persons.[[40]](#footnote-40) These include the Samurdhi program- the main poverty alleviation program, elderly assistance programme and disability assistance program. The establishment of the Welfare Benefit Board (WBB) in 2016 is a significant step towards ensuring access to social protection among the neediest groups. The WBB is tasked with the creation of an integrated social safety net with a unified social registry and the formulation of appropriate selection criteria for each social protection programme; this initiative is expected to help minimize targeting errors and provide social protection to the most vulnerable people in the country.

In addition, the PIP 2017-2020 has identified key vulnerable groups and programmes in place to ensure that these groups are not left behind. Given the low political participation of women, steps for women’s empowerment have been introduced through quotas for female representation in political institutions. Additionally, there are several on-going livelihood development programmes that target vulnerable women.13 In terms of improving the welfare of children, the country is aiming at reducing malnutrition and taking steps to ensure child safety especially in the face of increasing violence against children.

 Sri Lanka has identified the challenges posed by the rapidly increasing aging population and is currently developing a new model for elder care to ensure the protection of vulnerable elders.15 With regard to improving the well-being of the differently-abled, Sri Lanka is focusing on supporting targeted welfare programmes for poor, severely disabled people and developing livelihoods through Community Based Rehabilitation. The principle of ‘leaving no one behind’ is well-entrenched in the country’s legislations and policy frameworks. It is at the heart of Sri Lanka’s development agenda. This has provided the foundation for the country to make significant progress under the 2030 Agenda. The Government is taking action to further enhance the inclusion of marginalized groups in making Government policies and plans at the provincial and national levels. In addition, it is essential to raise awareness of SDGs among all stakeholders17 including the general public, and especially the vulnerable and marginalized communities. Furthermore, there is a need for more disaggregated data - for example, based on gender, disability status, migrant status, etc. - in order to enable evidence-based policy formulation fully equipped to ensure that no one is left behind.

Many social protection programmes have been implemented in Sri Lanka targeting vulnerable segments of the population such as the poor, elderly, disabled, children, and women. Despite the multitude of programmes, gaps are observed in the current social protection system. These include: issues in targeting, inadequate benefits and lack of coordination among programmes leading to high costs and overlaps of beneficiaries.

It is further imperative to improve targeting of the social protection programmes and ensure that the deserving and the marginalized groups are sufficiently covered by these programmes. In addition, it is necessary to revisit the adequacy of benefits given under these programmes. As a significant step towards achieving this, the Welfare Benefit Board (WBB) was established in 2016, tasked with the creation of an integrated social protection system. At present, the WBB is in the process of compiling a unified database for four key programmes (Samurdhi, elder payments, disability payments, kidney patient payments), and refining their selection criteria. It is expected that in the long-term all social protection programmes in the country will be included in this integrated system, leading to improved targeting and minimized overlaps among the programmes.

Census of Population and Housing data reveals that nearly one-fourth of 5-14-year-old children with disabilities are not in school.89 Moreover, participation in education declines with age: around 55.4% of the disabled population aged 15-19 and 86% of the disabled population aged 20-24 years were not engaged in any educational activity or vocational training. Access and quality concerns also exist for vulnerable students from disadvantaged backgrounds. There are wide disparities in exam pass rates among rich and poor students: in 2012/13, around 60% of students belonging to the richest expenditure docile passed the O-Levels and A-Levels, compared to only 20% in the lowest expenditure decile.91 Distribution of school resources also favours more affluent students attending privileged schools, while low income students lack high-quality school infrastructure and teachers.

Attention also needed to increase facilities and access to education for the disabled, by improving related school infrastructure, implementing appropriate training programmes for special education teachers, as well as nurturing appropriate mindsets of principals, teachers, and fellow-students in accommodating and assisting differently-abled children throughout their school career. In this regard, the Government has pledged to improve education access for the differently abled through more targeted education programmes.

# State of Palestine

The Israeli occupation imposes immense restrictions on the Palestinian government, which have created an external disabling environment that counteracts the government’s efforts to foster an internal enabling environment.[[41]](#footnote-41) Despite external challenges, the Palestinian government took the required measures to establish an institutional enabling environment towards the achievement of the SDGs. Until the right of self-determination is attained and an end is put to the colonization and occupation of Palestinian land, an external disabling environment will continue to be imposed upon the Palestinian governments strive to join the international community in achieving the SDGs and attaining a better quality of life for all of its citizens.

Despite the efforts made, the adoption of the Law on the Rights of Persons with Disabilities and the ratification of the Convention on the Rights of Persons with Disabilities by Palestine, persons with disabilities continue to live in a state of marginalization and social exclusion in many areas, especially women with disabilities. The realization of the rights of persons with disabilities and the achievement of social, economic and political integration have many challenges, including the lack of enforcement of laws and legislation on the rights of persons with disabilities, particularly those related to the compatibility of public spaces with the needs of persons with disabilities. The prevailing societal culture towards persons with disabilities, the inability of persons with disabilities to access and benefit from public services, and the limited programs for the training and rehabilitation of persons with disabilities are also challenges facing reducing poverty amongst disabled persons.[[42]](#footnote-42)

The Government and its partners have made great efforts to provide social protection and promote the social and economic integration of persons with disabilities. In addition, to support and raising awareness of the rights of persons with disabilities, the government issued the disability card, which gives persons with disabilities a special set of packages that include special services and access to medical instruments. To increase the inclusivity of persons with disabilities the government supports vocational training programs and provide soft loans to persons with disabilities to help them create their own income-generating businesses. The Ministry of Social Development and its partners are reviewing the laws on the rights of persons with disabilities to amend and develop them to align with the International Convention on Persons with Disabilities.

Currently, the Ministry of Social Development (MoSD) is implementing a poverty alleviation program that directly transfers regular quarterly funds to the most poverty-stricken families in Palestine. Among the cash transfers, beneficiaries are 36,000 elderly-headed households and 19,000 households headed by a person with disabilities. In this regard, the MoSD is also working to establish a social protection floor starting with allowances to the elderly and the disabled, and one of the MoSD’s key projects has been a micro-credit lending scheme for the people with disabilities to generate income and facilitate social inclusion.

The Palestinian government decided to establish a Unified Portal Gate for social assistance and social services for the purpose of coordination; this will serve to reduce inefficient spending and duplication in support programs particularly between civil society and the government. In addition, the government aims to expand economic and social integration programs for marginalized individuals, especially persons with disabilities. Moreover, to follow up the implementation of the Government’s decision to adopt public buildings to the needs of persons with disabilities.

Palestinian laws provide for the provision of health care to persons with disabilities and their free access to health services covered by governmental health insurance. A person with a disability is granted government health insurance if the disability rate is 60% or above. Persons with mental and psychiatric disabilities are also part of the government funded free public health insurance. To facilitate their access to health services, the Government has adapted all government hospitals to the needs of people with mobility disabilities and has worked to adapt primary health care centers. The Government and its partners provide medical assistive devices and tools, and provide rehabilitation, psychological and social support services. Despite efforts, persons with disabilities continue to face difficulties in accessing health care, especially women with disabilities, and persons with mental disabilities. Lack of adequate infrastructure for the needs of persons with disabilities, lack of specialized medical staff in the areas of disability, lack of mental health care services, and the difficult economic situation of persons with disabilities is all factors impeding their access to health care

## Key challenges to good health and wellbeing:

Despite the efforts of the MoH to improve the Palestinian healthcare system, violence and the policies of the Israeli occupation continues to put severe restrictions and strains on the well-being of Palestinians and development of Palestinian healthcare. Since the beginning of the March of Return, Israeli Occupying Forces killed 131 Palestinians and 14,000 injured. Serious injuries result in long-term disabilities and the need for continuous medical treatment, particularly as the majority of those injured are children or youth.

The MoH is committed to widening its specialty coverage network and localizing services to reduce its budget for referring special cases to hospitals abroad and create local specialized healthcare coverage through partnership with the hospitals in East Jerusalem. This includes: widening primary, secondary and tertiary healthcare services and improving health access especially in vulnerable areas especially to persons with disabilities both physical and mental, residents in Area C, and improve maternal and sexual health; providing quality free drug rehabilitation services to all drug abusers; and implementing international standards for healthcare. Education is a core of Palestinian value, and the Palestinian government shares this view with its citizens that education is a tool for empowerment and resilience. Hence, it provides free primary and secondary education for all, and has ratified “Education Law 2017” - a mandatory minimum of 10 years of schooling for all its citizens. The provision of net school enrolment rates in 2016 was 98.2% for primary education (1-4), 98% for upper basic education (5-10) and 63% for secondary education (11-12).[[43]](#footnote-43) Pre-schooling enrolment has also increased by 50.7% between 2012 and 2016, reaching 56%, while the enrolment rates for students aged one year before entry into basic education is 75%29. For children with disabilities the enrolment rate was 32.5% in 2011 between ages 6-9, while for children ages 10-15 the enrolment rate was 69.8%.[[44]](#footnote-44) Persons with disabilities remain left behind in the educational system, where illiteracy rates amongst person with disabilities is 31.7% (34% in West Bank and 29% in Gaza Strip) as of 2017, and 4.5% (3.8 in West Bank and 5.4% in Gaza Strip)[[45]](#footnote-45) of whom have completed university education. Attendance rates of persons with disabilities particularly ones with hearing disabilities, autism, and mild learning disability remain low due to the incapability of the ministry of Education of attending to their needs. Enrolment in vocational and technical education remains low at 2.6%[[46]](#footnote-46) and approximately 25.8% of youth, aged 18-24 is enrolled in higher education institutions[[47]](#footnote-47)

Internal challenges include the lack of sufficient numbers of qualified technical employees, the brain drain of skilled staff owing to the challenging living conditions decrease the ability the government to deliver better results and higher educational standards39. The Education ministry’s implementation of the Inclusive Education Policy faces a number of challenges, namely: shortage of specialized staff in dealing with disabilities, lack of availability of resource rooms where 123 rooms operate in 1800 public schools; inadequate adaptation of schools to the needs of persons with mobility disabilities, which constitute 65% of school.[[48]](#footnote-48)

## Government and partners efforts:

The Palestinian government has prioritized education as a mean for supporting resilience in the face of the Israeli occupation. In 2014, the Ministry of Education and Higher Education (MoEHE) launched an inclusive education policy in order to integrate all students, regardless of their disabilities. In addition to training the educational staff to attend to persons with disabilities, the Ministry of Education has set up three resource centres, equipped 123 resource rooms for persons with disabilities, provided textbooks in Braille language, and launched the Peer Support and Guidance Initiative through the formation of the Friends of Students with Disabilities Committee. Actions are currently underway to further develop a curriculum for students with disabilities in addition to creating action plans to deliver education to students at home.

Looking forward**:**

To maintain and improve the quality of education, the Government and its partners will continue to develop educational facilities adapted to the needs of persons with disabilities, rehabilitate and develop school curricula, train teachers and support staff, develop e-learning programs and bridge the education gap between marginalized areas, “C” and the rest of Palestine. To facilitate the transition from education to work, the Government will promote the alignment of education and vocational training with labour market needs to reduce the high levels of unemployment, particularly among young people.

However, inequality in Palestine takes many different dimensions across a range of intersecting factors, suggesting that this number varies widely according to different Israeli occupation restrictions. While women and persons with disabilities experience high levels of unemployment than the rest of the population. Data indicates that existing inequalities in the occupied Palestinian territory are increasing. Currently, the richest 20% of the Palestinian population controls approximately 43% of the wealth, while the poorest 20% hold just 7%.

To reduce the impact of disability on equality in the Palestinian society, it is vital to ensure that children who experience development delays and disability have access to early detection and interventions, which can help them reach their full potential. This requires specific support and services to ensure that their rights and needs are met, including their right to education, health and social potential. It remains challenging for the Palestinian government to enact the child and disability laws, mainstream programmes and services designed to ensure disability and learning difficulty detection and child development.

## Looking forward:

Parallel to the Government’s commitment to end the inequality created by the Israeli occupation, the Government is committed to reducing inequalities among Palestinians by increasing employment and implementing the policies in the Sixth National Priority “Economic Independence”, which will reduce wealth inequalities (see SDG 8). It will also promote a social integration of marginalized groups, including disabled people, youth, women and liberated prisoners.

Unemployment amongst disabled persons who take part in the workforce has increased to reach 37.3%. Of those aged 15 and over, labour force participation stood at 45.3%, or 1.4 million Palestinians, 70.9% of males participate in the official workforce while only 19% of females. Informal employment remains very high, with 59.0% of the total workforce work within unregulated employment, 89% of which work in the agricultural sector, which makes up owing to the small-scale of the majority of Palestinian farms alongside the family-centred model.[[49]](#footnote-49)

**Government efforts:** The Palestinian government aims to reduce unemployment and increase its economy’s capacity to generate job opportunities through a series of incentivizing laws that aim at empowering the private sector to expand the Palestinian economy. A micro-loan program was created to support persons with disabilities start their own ventures and join the productive sectors in the Palestinian economy, in addition, the Office of Public Employees also reserves a quota of 5% to employ persons with disabilities in the civil service sector. In 2016, a social security law created the social security institute, which is expected to start operating mid-2018.

# UAE

## My Community. A City for Everyone. Dubai Disability Strategy.

One cannot have inclusive societies when a segment of the world population remains marginalized, under-represented and underserved, in other words, left behind.[[50]](#footnote-50) In many countries, the reality is that people with disabilities remain the most excluded and hardest to reach of all groups in their community. They are less likely to have access to healthcare and education and in turn find earning a living and lifting themselves out of poverty that much more difficult, near impossible. Unlike the previous Millennium Development Goals (MDGs), the inclusion of disability in the SDGs is a cause for real hope that people with disabilities will this time be included and feel the impact of development progress. Disability is referenced in various parts of the SDGs related to education, growth and employment, inequality, accessibility of human settlements, as well as data collection and monitoring of the SDGs. Specifically, there are 11 explicit references to persons with disabilities in the 2030 Agenda, and disaggregation of data by disability is a core principle.

UN Convention on the Rights of People with Disabilities and the Sustainable Development Goals In 2006 the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) came into force. The UNCRPD is one of nine core international human rights treaties and it includes 33 core articles covering all areas of life. To date, 175 out of 193 United Nations Member States have ratified the UNCRPD, including the UAE ratification in 2008, making the countries legally bound to implement the articles and to report on their progress in writing to the United Nations on a periodic basis. According to the 2011 World Report on Disability by the World Health Organization and World Bank, there are an estimated 1 billion persons with disabilities worldwide. The same report states that 1 in 5 of the world’s poorest people have disabilities. Disability is both a cause and consequence of poverty, yet international policy-makers and stakeholders have not historically recognized or prioritized this issue within international development efforts, until now. The 2030 Agenda and the Sustainable Development Goals (SDGs) will undoubtedly influence the direction of the broader global and national policies on sustainable development plans, in addition to the extent to which the said plans mainstream disability in the implementation and monitoring at policy and practice levels

Goal 4: Inclusive and equitable quality education and promotion of life-long learning opportunities for all focuses on eliminating gender disparities in education and ensuring equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities. In addition, the proposal calls for building and upgrading education facilities that are child, disability and gender sensitive and also provide safe, non-violent, inclusive and effective learning environments for all.

Goal 8: Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all, with the aim to achieve full and productive employment and decent work for all women and men, including for persons with disabilities, and equal pay for work of equal value.

Goal 10: Reduce inequality within and among countries by empowering and promoting the social, economic and political inclusion of all, including persons with disabilities.

Goal 11: Transform cities and human settlements to be inclusive, safe and sustainable by (1) providing access to safe, affordable, accessible and sustainable transport systems for all, (2) improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, such as persons with disabilities. In addition, providing universal access to safe, inclusive and accessible, green and public spaces, particularly for persons with disabilities.

Goal 17: Enhance capacity-building support to increase the availability of high-quality, timely and reliable data that is also disaggregated by disability, given the increased emphasis on the collection of data, monitoring and accountability of the SDGs.

UN Convention on the Rights of People with Disabilities and the Sustainable Development Goals In 2006 the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) came into force. The UNCRPD is one of nine core international human rights treaties and it includes 33 core articles covering all areas of life. To date, 175 out of 193 United Nations Member States have ratified the UNCRPD, including the UAE ratification in 2008, making the countries legally bound to implement the articles and to report on their progress in writing to the United Nations on a periodic basis. According to the 2011 World Report on Disability by the World Health Organization and World Bank, there are an estimated 1 billion persons with disabilities worldwide. The same report states that 1 in 5 of the world’s poorest people have disabilities. Disability is both a cause and consequence of poverty, yet international policy-makers and stakeholders have not historically recognized or prioritized this issue within international development efforts, until now. The 2030 Agenda and the Sustainable Development Goals (SDGs) will undoubtedly influence the direction of the broader global and national policies on sustainable development plans, in addition to the extent to which the said plans mainstream disability in the implementation and monitoring at policy and practice levels.

Local context: Dubai in the United Arab Emirates has made concerted efforts to align its strategic objectives with the global agenda. In fact, the leadership in Dubai has a vision and commitment to ensure that Dubai is transformed into a disability-friendly city by 2020. The inspired vision is to make Dubai an inclusive, barrier-free, rights-based society that promotes, protects, and ensures the self-determination of people with disabilities, or, as aptly coined in October 2017 by H.H. Sheikh Mohammed bin Rashid Al Maktoum, the Vice President and Prime Minister of the UAE and ruler of Dubai, “People of Determination”. In line with Dubai’s commitment to promoting inclusion, H.H. Sheikh Mohammed bin Rashid Al Maktoum, Vice-president and Prime Minister of the UAE and Ruler of Dubai, issued Dubai Law No. 2 of 2014 for the protection of the rights of persons with disabilities in the Emirate of Dubai. The law ensures that persons with disabilities are entitled to all the rights prescribed to them, that they are respected and treated with dignity, and that their potential as empowered and productive members of society is recognized. The law calls on all concerned parties in Dubai to provide essential and basic services to all persons with disabilities, such as: affordable healthcare and rehabilitation services; inclusive quality education at all stages; public services, which include the use of roads and public transportation; facilitated access to public amenities; and ensuring that their surrounding environment is easily accessible. The Dubai law is also aligned and in accordance with the UN Convention of the Rights of Persons with Disabilities (2006), ratified by the UAE in February 2008.

‘My Community, A City for Everyone’ To establish the Emirate of Dubai as a leading example, H.H. Sheikh Hamdan bin Mohammed bin Rashid Al Maktoum, Crown Prince of Dubai and Chairman of The Executive Council, launched the “My Community…A City for Everyone” initiative in November 2013, which aims to transform Dubai into a disability-friendly city by 2020. Several communication campaigns, projects and activities were designed to maximize the participation and integration of persons with disabilities and eliminate the various attitudinal barriers which currently prevent persons with disabilities from achieving their full potential as participating and contributing members of society. The initiative gained support and attention from members of society, which is further proof of the importance of social awareness about the role of persons with disabilities as able members, capable of achieving positive change in society. According to the new law and to the “My Community” initiative, H.H. Sheikh Hamdan bin Mohammed bin Rashid Al Maktoum, Crown Prince of Dubai and Chairman of The Executive Council, issued The Executive Council’s decision No.3 of 2014. The decision stipulates the establishment of the Higher Committee for the Protection of the Rights of Persons with Disabilities under his supervision and to be led by H.H. Sheikh Mansoor bin Mohammed bin Rashid Al Maktoum. The aim of this committee is to implement the articles of the local law and supervise the implementation of the initiatives and the work plan aimed at protecting the rights of persons with disabilities. All government entities, committees, and offices in Dubai have combined their efforts to help develop successful, tangible, and practical steps to support the related legislations and laws.

Dubai Disability Strategy 2020 In order to provide a clear roadmap for the My Community initiative and the law, persons with disabilities and their allies, along with stakeholders; local and global experts, developed a comprehensive strategy in 2015 defining the pathway to achieving the vision that reinforces the articles of the federal and local laws, in addition to the UNCRPD and development agenda priorities as outlined in the SDGs. H.H. Sheikh Mansoor bin Mohammed bin Rashid Al Maktoum, Chairman of the Higher Committee for the Protection of the Rights of Persons with Disabilities, announced the launch of the “Dubai Disability Strategy (DDS) 2020” that outlines the role of private and public sectors and civil society institutions in supporting and implementing this strategy along with its requisite objectives, goals, and strategic direction in transforming Dubai into a disability-friendly city by 2020. The DDS mission is to implement policy and best-practices that empower persons with disabilities to make choices in an environment that is inclusive and ensures access to opportunities on an equal basis with others as guided by the Framework

# The Dubai Disability Strategy Framework

Local Context**:** Dubai in the United Arab Emirates has made concerted efforts to align its strategic objectives with the global agenda. In fact, the leadership in Dubai has a vision and commitment to ensure that Dubai is transformed into a disability-friendly city by 2020. The inspired vision is to make Dubai an inclusive, barrier-free, rights-based society that promotes, protects, and ensures the self-determination of people with disabilities, or, as aptly coined in October 2017 by H.H. Sheikh Mohammed bin Rashid Al Maktoum, the Vice President and Prime Minister of the UAE and ruler of Dubai, “People of Determination”. In line with Dubai’s commitment to promoting inclusion, H.H. Sheikh Mohammed bin Rashid Al Maktoum, Vice-President and Prime Minister of the UAE and Ruler of Dubai, issued Dubai Law No. 2 of 2014 for the protection of the rights of persons with disabilities in the Emirate of Dubai. The law ensures that persons with disabilities are entitled to all the rights prescribed to them, that they are respected and treated with dignity, and that their potential as empowered and productive members of society is recognized. The law calls on all concerned parties in Dubai to provide essential and basic services to all persons with disabilities, such as: affordable healthcare and rehabilitation services; inclusive quality education at all stages; public services, which include the use of roads and public transportation; facilitated access to public amenities; and ensuring that their surrounding environment is easily accessible. The Dubai law is also aligned and in accordance with the UN Convention of the Rights of Persons with Disabilities (2006), ratified by the UAE in February 2008.

‘My Community. A City for Everyone’ To establish the Emirate of Dubai as a leading example, H.H. Sheikh Hamdan bin Mohammed bin Rashid Al Maktoum, Crown Prince of Dubai and Chairman of The Executive Council, launched the “My Community…A City for Everyone” initiative in November 2013, which aims to transform Dubai into a disability-friendly city by 2020. Several communication campaigns, projects and activities were designed to maximize the participation and integration of persons with disabilities and eliminate the various attitudinal barriers which currently prevent persons with disabilities from achieving their full potential as participating and contributing members of society. The initiative gained support and attention from members of society, which is further proof of the importance of social awareness about the role of persons with disabilities as able members, capable of achieving positive change in society. According to the new law and to the “My Community” initiative, H.H. Sheikh Hamdan bin Mohammed bin Rashid Al Maktoum, Crown Prince of Dubai and Chairman of The Executive Council, issued The Executive Council’s decision No.3 of 2014. The decision stipulates the establishment of the Higher Committee for the Protection of the Rights of Persons with Disabilities under his supervision and to be leaded by H.H. Sheikh Mansoor bin Mohammed bin Rashid Al Maktoum. The aim of this committee is to implement the articles of the local law and supervise the implementation of the initiatives and the work plan aimed at protecting the rights of persons with disabilities. All government entities, committees, and offices in Dubai have combined their efforts to help develop successful, tangible, and practical steps to support the related legislations and laws.

Dubai Disability Strategy 2020 In order to provide a clear roadmap for the My Community initiative and the law, persons with disabilities and their allies, along with stakeholders; local and global experts, developed a comprehensive strategy in 2015 defining the pathway to achieving the vision that reinforces the articles of the federal and local laws, in addition to the UNCRPD and development agenda priorities as outlined in the SDGs. H.H. Sheikh Mansoor bin Mohammed bin Rashid Al Maktoum, Chairman of the Higher Committee for the Protection of the Rights of Persons with Disabilities, announced the launch of the “Dubai Disability Strategy (DDS) 2020” that outlines the role of private and public sectors and civil society institutions in supporting and implementing this strategy along with its requisite objectives, goals, and strategic direction in transforming Dubai into a disability-friendly city by 2020. The DDS mission is to implement policy and best-practices that empower persons with disabilities to make choices in an environment that is inclusive and ensures access to opportunities on an equal basis with others as guided by the Framework.

Mainstreaming & Monitoring Disability The leadership in the Government of Dubai recognizes that mainstreaming disability across government policies and programs is vital in the effort towards planning for an inclusive society. As such, the Dubai Disability Strategy is not a stand-alone strategy; instead, it is fully mainstreamed across the strategic aims and the monitoring framework of the 2021 Dubai Strategic Plan (DP2021). Concerted efforts of late have attempted to align the DDS with the global agenda on the one hand (SDGs and UNCRPD) and the local national agenda on the other (DP2021) by becoming an integrated part of the larger Dubai Plan’s programmatic and policy choices, organizational values and working practices, and monitoring framework. The DDS is based on a rights-based approach that is reflected in its emphasis on universal design, inclusive education for all, and access to health and rehabilitation services. This means that the methodology used to gather baseline information for planning and monitoring must be also rooted in the same principles. For this reason, the WHO’s Model Disability Survey (MDS) was adopted and customized as the data collection strategy for establishing empirically sound baseline information that will enable the monitoring of the DDS and Dubai’s progress on achieving the SDGs, now entitled the Dubai Survey on Community Inclusion. Effective policy-making derived from the DDS requires reliable, detailed data on all aspects of disability - impairments, activity limitations, participation restrictions, related health conditions, environmental factors - information that is currently limited as there is no standardized instrument for data collection on disability that provides comprehensive and systematic documentation of all aspects of functioning in a population. The customized WHO survey will now aid in overcoming one of the challenges in attaining essential baseline information for monitoring progress and providing a basis from which policy decisions can be made and concrete actions planned, all in line with the SDGs. The MDS implemented, as a population-based survey with an estimated sample of 2,500, will produce comparable, benchmarked, longitudinal evidence on disability adopted for the monitoring of the DDS/SDG indicators and designed in accordance with the UNCRPD articles. Only with such evidence in hand, we can know whether we are achieving the vision of building an inclusive community.

# Viet Nam

Seventeen global SDGs have been nationalized into 115 Viet Nam SDG (VSDG) targets in our “National Action Plan for Implementation of the 2030 Agenda for Sustainable Development”, based on Viet Nam’s development context and priorities, and building on the successful implementation of the Millennium Development Goals (MDGs).[[51]](#footnote-51) The National Action Plan emphasizes the importance of partnerships and clearly assigns tasks and responsibilities to respective stakeholders at both central and local levels in SDG implementation. In addition, Viet Nam has paid particular attention to vulnerable groups such as the poor, people with disabilities, women, children and ethnic minorities through a number of policies aimed at promoting social equality to ensure that no one is left behind. Accordingly, the National Council for Sustainable Development and Competitiveness Improvement, established in 2005, plays an advisory and consultative role to the Prime Minister in the implementation of sustainable development initiatives.

The VNR development process was driven by the intensive and extensive involvement of the National Assembly, ministries and related agencies, socio-political organizations such as the Women’s Union and Youth Union, socio-professional organizations, UN system in Viet Nam, development partners, local and international NGOs, representatives from the business community, research institutes and scientists. The process also received comments from vulnerable groups (women, ethnic minority people, people with disabilities) on matters related to sustainable development following the principle that no one is left behind.

The UN SDG Technical Working Group was formed to cooperate with the GOVN in implementing the 2030 Agenda. In addition, the network of local and international NGOs, socio-political and socio-professional organizations as well as an Association of Persons with Disabilities has conducted activities to implement SDGs and made direct contributions to the VNR.

Monthly social support for beneficiaries of social protection has been provided in nearly 60 provinces/ cities. A grassroots network of social support has been planned and developed nationwide, with 418 social support establishments, including 195 public establishments and 223 non-public establishments (33 elderly care centres, 74 establishments taking care of persons with disabilities, 144 establishments taking care of children, 102 combined establishments, 31 establishments taking care of persons with mental illness, and 34 social centres).[[52]](#footnote-52) There are specific provisions on support, allowances for people with disabilities and other vulnerable groups. Social support is provided monthly for 896,644 persons with serious and very serious disabilities.

Model of early childhood disability detection and intervention (ECDDI) for children from 0 to 6 years old The Sustainable Health Development Center (VietHealth), a Vietnamese NGO, works in medical and public health areas, especially in sexual and reproductive health care, primary health care, mother and child health care, detection and rehabilitation, special education intervention for children with disabilities. In implementing its mission, since 2012, VietHealth has been utilizing the model of Early Childhood Disabilities Detection and Intervention for children under six-year-old in 100 per-cent communes of 25 selected districts in some provinces including Vinh Long, Thua Thien Hue, Bac Giang, Phu Tho, Yen Bai, Da Nang, Tay Ninh, Dong Nai and Binh Phuoc. Within five years, about 100,000 children under six years old have received physical and development screening at communities. According to local statistics, there are about 1,5 1.7% of children with disabilities in every 10,000 children being screened, of which the number of intellectually disabled children Interventions for inclusive education and specialized education account for about 65-70% and the number of children with mobility disabilities requiring interventions for surgery and rehabilitation is about 30-35%. Children with disabilities will be identified and classified according to mobility impairments, intellectual disability or multiple disabilities in four levels from mild to very severe as well as development of fish intervention plans for each case. VietHealth conducts trainings for preschool teachers on special education interventions and trainings for parents to implement interventions for children with disabilities identified through screening, evaluation and classification of disabilities. By 2018, the greatest success of VietHealth is the Early Detection and Early Intervention model supported by People’s Committees of provinces and cities and incorporated in the provincial plan of supporting people with disabilities and allocating resources to implement. The early detection and intervention in the localities implementing the model also brought practical results with 84,774 children being screened for the first time, 5,155 children were screened for the second time and 1,122 children were intervened. With the achievements, early in 2018, the Ministry of Health and Viethealth signed a cooperation agreement to support VietHealth to implement the model in localities and coordinate in mobilizing resources for replication of the model.

## Review of policies related to SDG 4

The Government has agreed to grant an exemption from tuition fees for five-year-old children in socio-economically disadvantaged areas from 2018. In addition, people with disabilities have also received attention via the promulgation of the National Law on Persons with Disabilities 2012 and the Inclusive Education Guidelines for Persons with Disabilities 2006.

For five-year-olds entering the first grade, the enrolment rate increased from 72 per-cent in school year of 2000-2001 to 98 per-cent in 2016-2017. At present, children with disabilities are also provided with access to care and access to education. In particular, the Inclusive Education Support and Development Centres in localities have supported intervention for children with disabilities and professional support for education of children with disabilities in preschools.[[53]](#footnote-53)

However, there remain difficulties and constraints in access to education among children from poor households in remote and mountainous areas. There are still five-year-old children, at primary school age (6-10 years) and especially lower secondary school age (11-14-year-olds) who have never attended school or have dropped out in rural, mountainous, remote and isolated areas, as well as poor children, migrant children, children with disabilities, ethnic minority children, and especially ethnic minority girls.

With the effort to eradicate illiteracy and to achieve universal education, the literacy rate of the population from 15 years old and over nationwide has increased remarkably over the past decades and by 2016 had reached 95 per-cent, an increase of over 7 per-cent as compared to 1989. This indicates a positive shift in the implementation of literacy programs and the improvement of gender equality in access to education services. In 2016, the literacy rate of men is estimated to be 96.6 per-cent, while the rate for women has risen to 93.5 per-cent and it is expected that by 2030 the gap will be narrowed. According to CEMA (2015) statistics, only 72 per-cent of ethnic minority people can read and write Vietnamese language, which is lower than the national average27. However, at present, due to the lack of regular and adequate statistics, it is not possible to thoroughly assess the progress towards equal access for vulnerable groups including persons with disabilities, ethnic minorities and children in vulnerable situations.

However, the policies related to SDG 5 still have some gaps and discrepancies that need to be improved. Those policies on training, re-training, appointment and nomination of candidates remain general and not synchronized with the Law on Gender Equality. There is a lack of specific policy integration in the Law on Marriage and the Family 2014 to ensure equal rights of people with disabilities, especially women with disabilities’ right to equality in marriage and in decisions to have children, in accordance with the spirit of the Convention on the Rights of Persons with Disabilities (CRPD) as well as the Law on Persons with Disabilities of Viet Nam. The Government has not promulgated some policies stipulated in the Law on Gender Equality in a timely manner.

Viet Nam is focusing on socialization mechanisms and policies for public hygiene services, while it is also studying architectural models and planning orientations for public toilets in big cities and provinces, including norms and architectural models for public toilets supporting persons with disabilities. Pilot projects for such public toilets are being rolled out before being replicated on a wider scale. By the end of 2016, as many as 17,000 people with disabilities had received vocational training and jobs. There are 15,000 disabled workers working in 400 enterprises, some of which owned by people with disabilities and 16,000 people working in household-based enterprises or being self-employed

Viet Nam ratified the United Nations Convention on Persons with Disabilities (CRPD) in February 2015 and promulgated the Plan for the Implementation of the Convention and the Disability Support Program for the period 2012-203071. Viet Nam has paid special attention to and implemented many projects and policies to72 narrow the socio-economic gaps between ethnic groups.

However, policies related to SDG 10 still have some shortcomings that need to be addressed: including lack of policies for addressing inequalities and promoting equitable access to quality basic services for ethnic minorities, people with disabilities, single elderly people and migrants. In particular, there is a lack of comprehensive policies for social security, expansion of social insurance schemes, unemployment insurance and health insurance for informal groups. The GOVN should work to achieve the goal of expanding social protection coverage to 50 per cent by 2020 and eliminate gender discrimination in retirement age, pension calculation formulas and social protection policies for the elderly.

## Viet Nam’s efforts to support disadvantaged groups in society

As one of the nation’s heavily affected by climate change, with a rapid industrialization and urbanization, Viet Nam has a large number of people in need of social assistance across the country over 25 percent of the population.

Over the years, Viet Nam has made continuous efforts to develop a social security system and social assistance to support vulnerable groups. The national welfare system has developed a lifelong approach to addressing risks that come with aging, disability, childhood and unemployment. A network of social assistance facilities has been established and developed in 63 provinces/cities with 418 public and non-public social support facilities, including 195 public facilities and 223 non-public facilities.

Relating to social subsidies for social protection beneficiaries, Viet Nam has provided monthly social subsidies and issued health insurance cards to 2,783,474 people, including 30,292 orphans or abandoned children; 1,524,192 elderly people; 1,126,126 people with disabilities entitled to social subsidies; 5,006 people living with HIV/AIDS in poor households; 97,858 single parents raising their children in poor households.

As many as 1,524,192 elderly people are receiving monthly social allowances and about 10,000 elderly people are being cared for in social protection centres. As of June 2017, the number of people with disabilities receiving monthly social allowances is 913,262. Moreover, people with disabilities have access to health, education and vocational training.

Viet Nam has made significant progress in early childhood development and education. There is no gender difference in the enrolment rate at any level. All children under the age of 6 in Viet Nam are entitled to free medical examination and treatment at public health facilities. Viet Nam is implementing a project on community-based care for disadvantaged children, a pilot model of vocational training associated with job creation for children in especially difficult circumstances, and a pilot model of families and individuals adopting children in, especially difficult circumstances.

Viet Nam has policies to encourage the development and use of public passenger transport in urban areas, instead of private transport, towards sustainable and environmental-friendly transport systems. Given the significantly improved traffic systems recently, people are travelling more easily, thanks to better access to all means of transport. The number of passengers during 2011-2015 increased by 9.6 percent/year, including the aviation industry with the highest growth rate of 14.7 per-cent during the time, 11.2 per-cent in 2015 and 9.3 per-cent in 2016. Transportation infrastructure ensures accessibility for people with disabilities and as much as 65 percent of its capacity is qualified and meets the demands of all customers. Some 30 per-cent of inter-provincial, 70 per-cent of inter-city bus stops and 100 per-cent of buses have priority seats, all railway stations have priority doors and 57.6 per-cent of national railway stations have convenient shuttle services for people with disabilities who use wheelchairs. However, land area for urban transport (especially in big cities) has not met relevant national standards. Traffic in Viet Nam is not yet safe, accessible nor sustainable. The main means of transport for Vietnamese people is still motorbikes. Public transport vehicles are not prevailing and convenient, mainly bus system other than multiple means of transport. Logistics services are limited in terms of deployment and connection.

# Annex 1 – Tally of references in country reports & presentations

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| --- | --- | --- | --- |
|   | Short Report | Long Report | Oral Presentation |
| Country  | Disab | Vuln | Marg  | LNOB | Risk | Disab | Vuln | Marg | LNOB | Risk | Disab | Vuln | Marg | LNOB | Risk |
| Albania | 0 | 0 | 0 | 1 | 1 | 43 | 9 | 6 | 7 | 23 |   |   |   |   |   |
| Andorra |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Armenia | 0 | 0 | 0 | 1 | 0 | 31 | 9 | 0 | 5 | 26 |   |   |   |   |   |
| Australia  | 0 | 0 | 0 | 1 | 1 | 69 | 20 | 0 | 19 | 47 |   |  |   |   |   |
| Bahamas | 0 | 2 | 2 | 2 | 1 |   |   |   |   |   |   |   |   |   |   |
| Bahrain | 2 | 0 | 0 | 1 | 0 | 3 | 0 | 0 | 17 | 10 |   |   |   |   |   |
| Benin |   |   |   |   |   | 1 | 22 | 0 |   | 22 |   |   |   |   |   |
| Bhutan | 1 | 4 | 0 | 1 | 0 | 16 | 35 | 1 | 16 | 22 |   |   |   |   |   |
| Cabo Verde | 0 | 3 | 0 | 4 | 0 | 13 | 35 (vulnerable to or?? | 0 | 25 | 16 |   |   |   |   |   |
| Canada | 1 | 0 | 0 | 3 | 0 |   |   |   |   |   |   |   |   |   |   |
| Columbia |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Dominican Republic | 0 | 1 | 0 | 0 | 1 |   |   |   |   |   |   |   |   |   |   |
| Ecuador |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Egypt | 0 | 1 | 0 | 1 | 0 | 28 | 15 | 1 | 6 | 11 |   |   |   |   |   |
| Greece | 0 | 1 | 0 | 1 | 0 | 16 | 31 | 0 | 4 | 28 |   |   |   |   |   |
| Guinea |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hungary | 0 | 0 | 0 | 1 | 0 |   |   |   |   |   |   |   |   |   |   |
| Ireland | 0 | 0 | 0 | 2 | 0 | 27 | 37 | 15 | 7 | 73 |   |   |   |   |   |
| Jamaica | 0 | 1 | 0 | 1 | 0 | 59 | 70 | 6 | 48 | 77 |   |   |   |   |   |
| Kiribati | 0 | 0 | 0 | 1 | 0 |   |   |   |   |   |   |   |   |   |   |
| Lao PDR | 0 | 0 | 0 | 2 | 0 | 12 | 0 | 1 | 11 | 18 |   |   |   |   |   |
| Latvia | 0 | 0 | 0 | 0 | 1 | 7 | 3 | 0 | 3 | 30 |   |   |   |   |   |
| Lebanon | 0 | 1 | 0 | 0 | 0 | 6 | 31 | 3 | 6 | 13 |   |   |   |   |   |
| Lithuania | 0 | 0 | 0 | 0 | 1 | 26 | 4 | 1 | 1 | 38 |   |   |   |   |   |
| Mali |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Malta |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mexico |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Namibia | 1 | 1 | 2 | 1 | 0 | 7 | 15 | 7 | 4 | 12 |   |   |   |   |   |
| Niger |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Paraguay |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Poland | 0 | 0 | 0 | 0 | 0 | 17 | 6 | 6 | 8 | 24 |   |   |   |   |   |
| Qatar | 1 | 0 | 0 | 0 | 0 | 6 | 5 | 3 | 0 | 6 |   |   |   |   |   |
| Republic of Congo |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Romania | 0 | 0 | 0 | 1 | 0 |   | 23 | 1 | 5 | 36 |   |   |   |   |   |
| Saudi Arabia |   |   |   |   |   |   | 5 | 0 | 0 | 6 |   |   |   |   |   |
| Senegal |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Singapore | 0 | 0 | 0 | 0 | 0 | 19 | 30 | 2 | 8 | 23 |   |   |   |   |   |
| Slovakia |   | 1 |   | 1 | 0 |   |   |   |   |   |   |   |   |   |   |
| Spain |   |   |   |   |   | 38 | 31 | 1 | 17 | 104 |   |   |   |   |   |
| Sri Lanka | 0 | 1 | 0 | 0 | 0 | 11 | 26 | 12 | 16 | 20 |   |   |   |   |   |
| State of Palestine | 0 | 0 | 0 | 1 | 0 | 83 | 39 | 16 | 8 | 25 |   |   |   |   |   |
| Sudan | 0 | 0 | 0 | 2 | 0 |   |   |   |   |   |   |   |   |   |   |
| Switzerland | 1 | 0 | 0 | 1 | 0 | 7 | 3 | 0 | 3 | 11 |   |   |   |   |   |
| Togo |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| UAE | 0 | 0 | 0 | 0 | 0 | 69 | 9 | 2 | 3 | 8 |   |   |   |   |   |
| Uruguay |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Viet Nam | 1 | 2 | 0 | 2 | 0 | 61 | 21 | 1 | 10 | 19 |   |   |   |   |   |
|  Total  | 8 |   |   |   |   | 675 |   |   |   |   |   |   |   |   |   |

# Annex 2 – Infographic illustrating HLPF2018 in Numbers



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