IDA’s Compilation of CRPD Committee’s Concluding Observations

Article 17 CRPD
(Protecting the integrity of the person)

September 2023
Article 17 - Protecting the integrity of the person

Every person with disabilities has a right to respect for his or her physical and mental integrity on an equal basis with others.
ANDORRA (2023)
AUSTRIA (2023)
GERMANY (2023)
ISRAEL (2023)
MALAWI (2023)
MONGOLIA (2023)
ANGOLA (2023)
ARGENTINA (2023)
GEORGIA (2023)
PERU (2023)
TOGO (2023)
TUNISIA (2023)
BANGLADESH (2022)
CHINA (2022)
LAO PEOPLE’S DEMOCRATIC REPUBLIC (2022)
NEW ZEALAND (2022)
SINGAPORE (2022)
HUNGARY (2022)
MEXICO (2022)
SWITZERLAND (2022)
VENEZUELA (2022)
DJIBOUTI (2021)
FRANCE (2021)
ESTONIA (2021)
AUSTRALIA (2019)
ECUADOR (2019)
EL SALVADOR (2019)
INDIA (2019)
KUWAIT (2019)
MYANMAR (2019)
CUBA (2019)
NIGER (2019)
NORWAY (2019)
RWANDA (2019)
SAUDI ARABIA (2019)
SPAIN (2019)
TÜRKIYE (2019)
VANUATU (2019)
POLAND (2018)
PHILIPPINES (2018)
SOUTH AFRICA (2018)
NORTH MACEDONIA (2018)
HAITI (2018)
OMAN (2018)
RUSSIAN FEDERATION (2018)
SUDAN (2018)
LUXEMBOURG (2017)
MONTENEGRO (2017)
MOROCCO (2017)
PANAMA (2017)
UNITED KINGDOM OF GREAT BRITAIN AND NORTHERN IRELAND (2017)
BOSNIA AND HERZEGOVINA (2017)
CANADA (2017)
CYPRUS (2017)
HONDURAS (2017)
IRAN (ISLAMIC REPUBLIC OF) (2017)
JORDAN (2017)
REPUBLIC OF MOLDOVA (2017)
BOLIVIA (2016)
COLOMBIA (2016)
ETHIOPIA (2016)
GUATEMALA (2016)
ITALY (2016)
UNITED ARAB EMIRATES (2016)
URUGUAY (2016)
CHILE (2016)
LITHUANIA (2016)
PORTUGAL (2016)
SERBIA (2016)
SLOVAKIA (2016)
THAILAND (2016)
UGANDA (2016)
BRAZIL (2015)
EUROPEAN UNION (2015)
GABON (2015)
KENYA (2015)
MAURITIUS (2015)
QATAR (2015)
UKRAINE (2015)
COOK ISLANDS (2015)
CROATIA (2015)
CZECH REPUBLIC (2015)
DOMINICAN REPUBLIC (2015)
GERMANY (2015)
MONGOLIA (2015)
TURKMENISTAN (2015)
NEW ZEALAND (2014)
REPUBLIC OF KOREA (2014)
MEXICO (2014)
COSTA RICA (2014)
AUSTRALIA (2013)
EL SALVADOR (2013)
ARGENTINA (2012)
SPAIN (2011)
TUNISIA (2010)

Please note there are no recommendations in the Concluding Observations on art. 17 on Mauritania, Paraguay, Senegal, Algeria, Bulgaria, Malta, Nepal, Seychelles, Slovenia, Latvia, Armenia, Belgium, Denmark, Ecuador, Sweden, Azerbaijan, Austria, Paraguay, China, Peru, Jamaica, Macao, Indonesia, Japan, New Zealand and Republic of Korea.
Andorra (2023)
35. The Committee notes that Act No. 40/2014, article 14, modifies article 116(2) of Act 9/2005 (Criminal Code), sanctioning forced sterilization, and that the discriminatory motive of disability is an aggravating circumstance. It is concerned, however, about the following:
(a) Women and girls with disabilities, in particular, women and girls with intellectual and/or psychosocial disabilities could be subjected to forced sterilization or other forced interventions at the request of third parties, including family members or guardians;
(b) The absence of a monitoring mechanism to prevent cases of forced sterilization and other types of surgery for which consent has not been obtained, in particular, in psychiatric hospitals and institutions.
36. The Committee recommends that the State party:
(a) Adopt legislative and other measures necessary to protect the integrity of persons with disabilities in all settings, ensuring that all medical treatment and interventions are done on the basis of the free and informed consent of the concerned person, as well as prevent and eliminate harmful practices against women and girls with disabilities;
(b) Establish an independent monitoring mechanism to assess the situation of persons with disabilities in institutions to prevent, detect and, where appropriate, punish and provide redress in cases of forced sterilizations, forced abortions, forced contraception or any other forced medical treatment.

Austria (2023)
41. The Committee is concerned about reports stating that:
(a) Sterilizations of women and girls with disabilities without their consent, apparently outside the confines of §§ 253-255 ABGB, have taken place in the State party;
(b) Contraceptives are administered to women and girls with disabilities without their consent or even their knowledge, particularly in institutions.
42. The Committee recommends the State party:
(a) Strictly enforce the prohibition of sterilization in § 255 ABGB, provide accessible information on sexual self-determination, collect data on performed sterilizations in the State party, disaggregated by sex, gender, age, procedure followed and place of the intervention, and train medical personnel on the requirements of the law;
(b) Explicitly ban the use of medical measures to inhibit procreation on persons with disabilities without their personal consent, and enforce it.

Germany (2023)
37. The Committee is concerned about:
(a) The continued occurrence of forced and coerced sterilisation of women and girls with disabilities;
(b) The practice of forced and coerced contraception and associated harmful side-effects and forced and coerced abortions in institutional facilities.
38. The Committee recommends that the State Party take all necessary legislative, administrative and judicial measures to:
(a) Prohibit sterilisation of women and girls with disabilities without their free and informed consent, including sterilisation based on substitute consent or court decisions;
(b) Prohibit all forms of contraception and abortion without the free and informed consent of the individual concerned, including coercive practices.
39. The Committee is concerned that the Act on the Protection of Children with Variations in Sex Development of 2021 does not provide comprehensive protection for all intersex children from invasive or irreversible medical procedures that modify sex characteristics.
40. The Committee recommends that the State Party closely consult and actively involve representative organisations of intersex persons to review and amend the Act on the Protection of Children with Variations in Sex Development 2021 to ensure comprehensive
protection for intersex children from invasive or irreversible medical procedures that modify sex characteristics unless necessary to avoid serious, urgent, and irreparable harm.

Israel (2023)
39. The Committee is concerned about cases of forced sterilization performed on persons with disabilities, and medically unnecessary and irreversible surgery and interventions on intersex children, and the lack of measures to ensure accountability and reparations.
40. The Committee recommends that the State party:
   (a) Prohibit sterilization without the free and informed personal consent of the person concerned;
   (b) Take measures to prohibit medically unnecessary and irreversible surgery and medical interventions on intersex children until they are able to provide personal consent and adopt measures to provide redress and reparations for the physical and psychological harms inflicted.

Malawi (2023)
35. The Committee observes with concern information about forced abortions and that women and girls with disabilities under guardianship may be subjected to forced sterilization based on consent provided by third parties, including family members or guardians. It is also concerned about the absence of objective discussions and awareness-raising campaigns on sterilization and the lack of sexual and reproductive health education for persons with disabilities.
36. The Committee recommends that the State party:
   (a) Prohibit sterilizations of persons with disabilities without their free and informed personal consent, for example those at the request by third parties, including courts, guardians or family members;
   (b) Adopt protocols applicable across all health care services to promote respect of sexual and reproductive rights of persons with disabilities, notably women and girls with disabilities, including the right to retain their fertility, and the provision of related information and services;
   (c) Set up awareness-raising and education campaigns on sexual and reproductive health and rights of persons with disabilities.

Mongolia (2023)
35. The Committee remains concerned at the persistence in law (art. 37 (b) of the Law on Health) and in practice, of measures to “prevent conception in persons with genetic psychosocial or intellectual disorders, or psychosocial or intellectually impaired persons”, without their informed consent. The Committee is also concerned that article 9.2 of the Law on Health authorizes abortions of women with “mental disorder” carried out without the free and informed consent of women and girls with disabilities.
36. The Committee reiterates its previous recommendation (CRPD/C/MNG/CO/1, para. 29) and urges the State party to eliminate legislative provisions of the Law on Health, as well as bylaws and related regulations, restricting sexual and reproductive rights and allowing the forced sterilization of and abortion for women with disabilities, in particular psychosocial and intellectual disabilities, and women with disabilities living in institutions. It also recommends that the State party establish a mechanism for identifying, investigating, and following up on any cases that, despite an explicit prohibition, continue to arise and for providing full redress in those instances, and take measures to provide protection against forced sterilization.
Angola (2023)
29. The Committee is concerned about the prevalence of forced medical treatments and the use of drugs and treatment methods on patients with psychosocial and/or intellectual disabilities without their free and informed consent and forced sterilization of women and girls with disabilities.
30. The Committee recommends that the State party prohibit forced medical treatment and interventions, including forced sterilization of persons with disabilities, including in both public and private institutions, and provide training to all health practitioners, including traditional healers, on their rights.

Argentina (2023)
35. El Comité observa con preocupación lo siguiente:
a) La persistencia de esterilizaciones y abortos forzados, que afectan especialmente a las mujeres y niñas con discapacidad intelectual y/o psicosocial;
b) La Ley 27.610 establece que si la sentencia judicial de restricción a la capacidad impide prestar el consentimiento para interrumpir el embarazo, o la persona ha sido declarada incapaz judicialmente, deberá prestar su consentimiento con la asistencia de su representante legal, o a falta de este, una persona allegada.
36. El Comité recomienda al Estado parte:
a) Iniciar procesos de investigación administrativa y penal a las autoridades judiciales y sanitarias y a las instituciones que recomienden, autorizan o aplican esterilizaciones o abortos forzados a niñas y mujeres con discapacidad, y garantizar el acceso a la justicia y reparaciones para las víctimas;
b) Revisar la legislación, incluyendo la Ley 27.610 (artículo 9), su reglamentación y su Protocolo, para garantizar que todas las mujeres con discapacidad, puedan otorgar de manera autónoma su consentimiento previo e informado para la interrupción voluntaria de un embarazo, en igualdad con otras mujeres.

Georgia (2023)
35. The Committee observes with concern information about forced or involuntary abortion, sterilisation, contraception, and the use of sexuality suppression medication against persons with disabilities.
36. The Committee recommends that the State party explicitly prohibit abortion, sterilisation, contraception and the use of sexuality suppression medication, on the basis of the authorization of a third party, and that it develops public programmes to raise awareness and inform persons with disabilities, targeting young persons with disabilities and women and girls with disabilities, about their sexual and reproductive rights.

Peru (2023)
34. El Comité observa con preocupación que:
a) Las mujeres y niñas con discapacidad que han sido esterilizadas sin su consentimiento, incluso en instituciones psiquiátricas y de asistencia social, no han sido incluidas en el Registro de Víctimas de Esterilizaciones Forzadas – REVIESFO, ni en las causas penales para abordar la esterilización forzada de mujeres;
b) La Norma Técnica de Planificación Familiar Actualizada afirme que el consentimiento para la esterilización femenina no es aplicable a las mujeres con discapacidad psicosocial.
35. El Comité recomienda al Estado parte que:
a) Desarrollar medidas para garantizar que las mujeres con discapacidad supervivientes de esterilizaciones forzadas reciban medidas de resarcimiento y reparación y que se procese a los autores, incluidos los responsables de instituciones psiquiátricas y de asistencia social;
b) Incorpore a la Norma Técnica de Planificación Familiar Actualizada las medidas específicas, incluyendo la provisión de ajustes razonables, apoyos y otros medios de verificación, que garanticen el consentimiento informado de las mujeres con discapacidad psicosocial para que puedan tomar sus propias decisiones relacionadas con su cuerpo y sexualidad, así como con su salud reproductiva.

**Togo (2023)**

35. The Committee notes that the national legislation prohibits forced sterilization of women with disabilities. However, it is concerned about the lack of monitoring mechanisms of psychiatric hospitals and other segregation centres to prevent possible cases of forced sterilizations and other types of surgeries for which the consent has not been obtained.

36. **The Committee recommends the establishment of independent monitoring to assess the situation of women and girls with disabilities in institutions to prevent, detect and, where appropriate, punish and provide redress in cases of forced sterilizations, abortions or any other type of surgery.**

**Tunisia (2023)**

29. The Committee is deeply concerned about women with disabilities who are under guardianship and who could allegedly be subjected to forced sterilization at the request of third parties, including trusted persons, family members or guardians without their free will or informed consent. The Committee is further concerned about the lack of public and objective debate on the issue and the absence of awareness campaigns to raise understanding that persons with disabilities should have access to sexual and reproductive health training and make their own decisions.

30. **The Committee recommends that the State party:**

(a) Take immediate measures, including legislative measures, to prohibit and eliminate forced sterilizations, especially of women with disabilities;

(b) Establish awareness campaigns on the rights of persons with disabilities to sexual and reproductive health, directed to medical personnel involved in sexual and reproductive health and to persons with disabilities, particularly women with disabilities.

**Bangladesh (2022)**

35. The Committee is concerned about:

(a) Forced abortion and forced sterilisation perpetrated against women with disabilities in institutions, particularly women with intellectual and/or psychosocial disabilities, as well as forced medical and/or psychiatric interventions and involuntary psychiatric admissions;

(b) Lack of statistical data, disaggregated by sex, age and type of impairment, on persons with disabilities subjected to forced sterilization and forced abortions, as well as forced medical and/or psychiatric interventions and involuntary psychiatric admissions;

(c) Harmful practices against women and girls with disabilities, particularly forced marriages, remain common.

36. **The Committee recommends that the state party:**

(a) Take concrete measures to prohibit forced abortion and forced sterilization against women with disabilities, particularly against women with intellectual and/or psychosocial disabilities, including abolishing forced medical, psychiatric interventions and involuntary psychiatric admissions and establish mechanisms of supported decision-making to enable persons with disabilities to express prior and informed consent in relation to such interventions and treatment;
(b) Collect statistical data, disaggregated by sex, age and type of impairment, on persons with disabilities subjected to forced sterilization, forced abortions, as well as forced medical and/or psychiatric interventions and involuntary psychiatric admissions;
(c) Take strong measures to prevent harmful practices such as forced marriages.

**China (2022)**
38. The Committee is concerned about the legal exceptions to free and informed consent to compulsory hospitalization and medical interventions.
39. The Committee recommends that the State party remove legal exceptions to the requirement of free and informed consent of all persons with disabilities to medical interventions, including hospitalization, and ensure adherence to the requirement of free and informed consent with regard to all persons with disabilities.

**Macao**
84. The Committee is concerned about the legal exceptions to free and informed consent to compulsory hospitalization and medical interventions.
85. The Committee recommends that Macao SAR, China remove legal exceptions to the requirement of free and informed consent of all persons with disabilities to medical interventions, including hospitalization, and ensure adherence to the requirement of free and informed consent with regard to all persons with disabilities.

**Lao People’s Democratic Republic (2022)**
30. The Committee is concerned about the lack of information on concrete measures taken to protect persons with disabilities, especially persons with intellectual and/or psychosocial disabilities against forced medical procedures and interventions, including sterilization.
31. The Committee recommends that the State party strengthen the legal and policy frameworks to ensure that all medical and psychiatric treatment and interventions are done on the basis of own free and informed consent. It also recommends that the State party take all measures necessary to eliminate the forced sterilization of persons with disabilities, especially persons with psychosocial and/or intellectual disabilities, and those still deprived of their legal capacity.

**New Zealand (2022)**
35. The Committee is seriously concerned about:
(a) The lack of action by the State party, in response to the Committee’s 2014 concluding observations, to address the fact that parents can consent to sterilization of their children with disabilities and to also address laws that allow for the use of sterilization, contraception and abortion procedures with regard to women and girls with disabilities without their personal consent;
(b) The lack of a prohibition on non-urgent, intrusive and irreversible medical interventions or the imposition of hormones on intersex infants and children before an age at which they can provide informed consent;
(c) The lack of legislative provisions to prohibit Ashley Treatment or growth attenuation treatment for children with disabilities, including to prohibit accessing these procedures outside New Zealand;
(d) The lack of data in relation to sterilization and abortion procedures performed on persons with disabilities without their personal consent, non-urgent medical interventions on intersex children without their consent and growth attenuation treatment.
36. The Committee urges the State party to:
(a) Immediately place a moratorium on sterilization, contraception and abortion procedures performed without personal consent, and take urgent action to adopt uniform legislation prohibiting such procedures on women and girls with disabilities;

(b) Adopt clear legislative provisions that explicitly prohibit the performance of unnecessary, invasive and irreversible medical interventions, including surgical, hormonal or other medical procedures on intersex children before an age at which they can provide informed consent;

(c) Recalling previous recommendations made by the Committee on the Rights of the Child, develop and implement a child rights-based health-care protocol for intersex children, setting the procedures and steps to be followed by health teams, ensuring that no one is subjected to unnecessary medical or surgical treatment during infancy or childhood, guaranteeing the rights of children to bodily integrity, autonomy and self-determination, and provide families with intersex children with adequate counselling and support;

(d) Adopt legislative provisions to prohibit growth attenuation treatment (Ashley Treatment), including a prohibition on procedures sought outside New Zealand;

(e) Adopt legal provisions to provide legal remedies and holistic redress to victims of medical interventions performed without personal consent, including access to support and recovery services and adequate compensation;

(f) Develop measures to ensure reporting and data collection on sterilization, contraception and abortion procedures performed without personal consent, on non-urgent medical interventions performed on intersex children and on growth attenuation treatment.

Singapore (2022)
35. The Committee is concerned that the Voluntary Sterilization Act allows for the sterilization of persons with disabilities based on a court order declaring that it is necessary and in the best interest of the person concerned.

36. The Committee recommends that the State party repeal the Voluntary Sterilization Act and expressly and effectively protect women and girls with disabilities from sterilization without their free and informed personal consent.

Hungary (2022)
35. The Committee observes with concern that women and girls with disabilities, especially those placed under substitute decision-making regimes and those still in institutions can be subject to sterilization and abortion without their consent. The Committee is particularly concerned that women and girls with intellectual and psychosocial disabilities and autistic women and girls are subjected to contraception without their consent in residential institutions, including in group homes, and face discriminatory legal restrictions on their right to have a child.

36. The Committee recommends that the State party abolish all legal provisions, including the provisions of the Health Act (187/B) that allows for women and girls with disabilities to be sterilized and abortions carried out on them on the basis of third-party requests, including from guardians. The Committee also recommends that the State party adopt protocols on respect for the sexual and reproductive health rights of women and girls with disabilities, in particular women and girls with intellectual disabilities, and include the duty to provide them with accessible information and services concerning their sexual and reproductive health rights. The Committee further recommends that the State party ensure that the use of contraception by all women and girls with disabilities in all settings is based on free and informed consent, respecting the dignity and autonomy of women and girls with disabilities.
**Mexico (2022)**

45. The Committee is concerned about continuing practices of forced sterilization, contraception and abortion, particularly affecting women and girls with intellectual or psychosocial disabilities both inside and outside of institutions and indigenous women and girls. The Committee has received very disturbing reports of forced sterilization in Casa Hogar Esperanza.

46. The Committee reiterates the recommendations made in paragraph 38 of its previous concluding observations urging the State party to launch administrative and criminal investigations into the judicial and health authorities and institutions that recommend, authorize or perform forced sterilizations, contraception and abortion on girls, adolescents and women with disabilities and to guarantee access to justice and reparation for victims.

47. The Committee further recommends that the State party implement training programmes for professionals in the public and private health sectors on sexual and reproductive health rights of women and girls with disabilities that include training on respect for their preferences and on dismantling prevalent stereotypes of the sexuality of women and girls with disabilities.

**Switzerland (2022)**

35. The Committee notes with concern:

(a) That persons over 16 years of age deemed “incapable of discernment” can be sterilized under legal provisions that authorize sterilisation procedures; and the lack of data on and redress for such procedures;

(b) The lack of uniform cantonal protection against the practice of “packing” that is applied to autistic children, whereby the child is wrapped in cold, wet sheets;

(c) That intersex persons can be subjected to unnecessary and irreversible medical and/or surgical interventions, including during infancy or childhood; and that there is a lack of ongoing health care, psychosocial support and social reintegration for intersex persons who have been subjected to intersex genital mutilation and a lack of access to redress.

36. The Committee recommends that the State party:

(a) Prohibit the sterilization of persons with disabilities without their consent, repeal legal provisions that allow substituted consent by third parties for sterilization procedures, collect disaggregated data on sterilization procedures, and take measures to provide redress and support to persons with disabilities who are victims of forced sterilization;

(b) Prohibit in all cantons the practice of “packing” children, and take measures ensure the recovery of and redress for children who have been subjected to such treatment;

(c) Adopt clear legislative provisions that explicitly prohibit the performance of unnecessary and irreversible medical interventions, including surgical, hormonal or other medical procedures, on intersex infants and children; provide adequate counselling and support for families of intersex children; extend the statute of limitations to enable criminal and civil remedies; and provide health care and psychosocial support to intersex persons who have been subjected to intersex genital mutilation.

**Venezuela (2022)**

32. The Committee is concerned about the persistence of involuntary confinement and treatment and non-consensual medical practices in respect of persons with disabilities, including the forced sterilization of women and girls with psychosocial or intellectual disabilities.

33. The Committee recommends that the State party repeal all legal provisions that permit involuntary treatment, and prohibit involuntary treatment and restraint and the forced sterilization of persons with disabilities.
**Djibouti (2021)**
29. The Committee is concerned about the lack of effective frameworks and policies to protect the integrity of persons with disabilities, especially persons with psychosocial or intellectual disabilities, particularly in mental health institutions, including forced medical treatment and the use of drugs and treatment methods without free and informed consent.

30. The Committee recommends that the State party adopt and implement legislative and policies measures to establish safeguards to ensure the protection of the integrity of persons with disabilities, especially persons with psychosocial or intellectual disabilities in all situations and to move towards mental health services in the community and to ensure the respect of the free and informed consent of persons with disabilities regarding medical treatment and interventions.

**France (2021)**
36. The Committee observes with concern that:
(a) Women with disabilities subject to guardianship can be subjected to abortion or sterilization under The Public Health Code art. L2123-2 without their consent, or with consent provided by third parties, including trusted persons, family members or guardians;
(b) Autistic children are subjected to treatments with objective "render them non-autistic", disrespecting their identity, and the practices of packing, despite public declarations prohibiting this practice;
(c) Non-consensual medical interventions of intersex persons.

37. The Committee recommends that the State party:
(a) Prohibit involuntary sterilization and abortion of women with disabilities, including by request of family members, guardians and trusted persons or with the consent of third parties;
(b) Eliminate normalising treatments on autistic children, and adopt measures to redress the rights of children and adults with disabilities who have been subjected to these treatments, including through reparations and compensations for the impact of these treatments on their physical and mental integrity;
(c) Prohibit the practice of non-consensual medical interventions on intersex persons.

**Estonia (2021)**
34. The Committee observes with concern that women with disabilities under guardianship can be subjected to sterilization or abortion without their consent.

35. The Committee recommends that the State party:
(a) Prohibit the forced sterilization and the termination of pregnancies of women with disabilities based on third-party requests, including from guardians or tutors, and raise awareness about the legal prohibition;
(b) Adopt protocols promoting respect for the sexual and reproductive rights of persons with disabilities, particularly women and girls with disabilities, and include in such protocols the duty to provide persons with disabilities with accessible information and services concerning their right to retain their fertility.

**Australia (2019)**
33. The Committee is seriously concerned about:
(a) The ongoing practice of forced sterilization, forced abortion and forced contraception among persons with disabilities, particularly women and girls, which remains legal;
(b) The unregulated use of involuntary surgery on infants and children born with variations in sex characteristics and of other intrusive and irreversible medical interventions without the free and informed consent of those undergoing such interventions or without evidence of the need to carry them out.
34. The Committee urges the State party to:
(a) Review and amend laws, including the section of the Family Law Rules 2004 relating to applications for medical procedures, in line with the Convention and adopt uniform legislation prohibiting, in the absence of free and informed consent, the sterilization of adults and children, the administration of contraception and the imposition of abortion procedures on women and girls with disabilities;
(b) Adopt clear legislative provisions that explicitly prohibit the performance of unnecessary, invasive and irreversible medical interventions, including surgical, hormonal or other medical procedures on intersex children before they reach the legal age of consent; also provide adequate counselling and support for the families of intersex children and redress to intersex persons having undergone such medical procedures;
(c) Prohibit the use of non-consensual electroconvulsive therapy on the basis of any form of impairment.

Ecuador (2019)
33. The Committee is concerned at:
(a) The fact that the Organic Act on the Health System is not in line with the Convention since it is not based on the human rights model of disability;
(b) That no explicit provision is made for the rights of persons with psychosocial and intellectual disabilities to request or reject treatments of any type on their own volition, including those dealing with sexual and reproductive health, on the basis of their informed consent and supported decision-making in the exercise of their legal capacity;
(c) The fact that forced sterilization is not expressly prohibited.
34. The Committee recommends that the State party amend the Organic Act on the Health System to incorporate a human rights approach to disability and to expressly prohibit forced sterilization and the non-consensual interruption of pregnancies. The Committee also recommends that the State party guarantee the integrity and autonomy of persons with disabilities based on free and informed consent and supported decision-making in requesting or rejecting treatments relating to all relevant procedures. It also recommends that a mechanism be established for identifying, investigating and following up on any cases that, despite an explicit prohibition, continue to arise and for providing full redress in those instances.

El Salvador (2019)
34. The Committee is concerned that women and girls with disabilities continue to be subjected to forced sterilization and abortion, without their consent, and that the Counsel-General’s Office issues opinions to hospitals on medical treatment including forced sterilization without the consent of the person concerned but with the consent of a third party. It is also concerned that no cases of forced sterilization were reported by hospitals.
35. The Committee urges the State party to:
(a) Repeal article 147 (3) of the Criminal Code and abolish the practice of forced sterilization of women and girls with disabilities, and ensure that decisions regarding medical procedures are taken with the free and informed consent of the person with disability and not as per the opinions issued by the Counsel-General’s Office;
(b) Establish an independent mechanism to monitor, register and investigate cases of forced sterilization in hospitals and private clinics.

India (2019)
36. The Committee is concerned about:
(a) Continuing lawful practices of forced sterilization, forced contraception and forced abortion, particularly affecting women with intellectual or psychosocial disabilities in institutions;

(b) Harmful practices against women with disabilities, particularly forced marriages, dowry payments from families, and national schemes to promote financial incentives for marriage with a woman with disabilities or to prompt marriage among persons with disabilities;

(c) Sex-assignment or “sex-normalizing” surgery on intersex children, stigmatization and bullying against intersex children and their restricted access to community services.

37. The Committee recommends that the State party:

(a) Repeal section 92 (f) of the Rights of Persons with Disabilities Act on the exception to the requirement of consent to abortion in women with “severe” disabilities and legislation authorizing medical treatment on the basis of third-party consent, and provide all persons with disabilities with supported decision-making mechanisms for expressing prior and informed consent to medical treatment;

(b) Redouble its efforts to enforce the legal prohibition of harmful practices such as dowry payments and forced marriages, in relation to women and girls with disabilities, and end harmful practices. The State party should ensure actual implementation of the recommendations issued by the Special Rapporteur on violence against women, its causes and consequences (A/HRC/26/38/Add.1, para. 80 (b)) on designing and launching targeted awareness-raising campaigns at the community level on harmful practices;

(c) Adopt measures to prevent sex-assignment or “sex-normalizing” surgery, stigmatization and bullying against intersex children and ensure their right to respect for their physical and mental integrity.

Kuwait (2019)

34. The Committee is concerned about the lack of information on whether certain medical interventions, including the sterilization of persons with disabilities, especially women and girls with psychosocial or intellectual disabilities, are being carried out without the free and informed consent of the person concerned.

35. The Committee recommends that the State party protect persons with disabilities, especially women and girls with psychosocial or intellectual disabilities, from forced sterilization, in law and in practice, and that it ensure that the right to free and informed consent prior to all interventions and treatments is upheld and that supported decision-making mechanisms and strengthened safeguards are provided.

Myanmar (2019)

33. The Committee is concerned about the lack of information on concrete measures taken to protect persons with disabilities, especially persons with intellectual or psychosocial disabilities against forced medical procedures and interventions, including sterilisation and castration.

34. The Committee recommends that the State party strengthen the legal and policy provisions to ensure that all medical and psychiatric treatment and interventions are done on the basis of their own free and informed consent. It also recommends that the State party take all measures necessary to eliminate practices of forced sterilisation and castration on persons with disabilities, especially persons with psychosocial or intellectual disabilities, and those still deprived of their legal capacity.

Cuba (2019)

33. The Committee is concerned about the risks posed by article 18 of the Public Health Act, which exempts ‘disabled persons’ from the requirement of prior consent with regard to medical interventions. The Committee is therefore concerned that a legal guardian may
authorise medical interventions with regard to persons with disabilities, including forced institutionalisation and sterilization.

34. The Committee recommends that the State party adopt effective measures to ensure respect for the right of persons with disabilities to provide free and informed consent prior to medical treatment, institutionalization and sterilization, and provide efficient support mechanisms for decision-making in the State party.

**Niger (2019)**

29. The Committee is concerned about:
(a) Sterilization of persons with disabilities without their free and informed consent especially women and girls with disabilities, and persons with psychosocial or intellectual disabilities, in health centres and hospitals, and through traditional healers;
(b) The lack of protection of persons with disabilities, especially those with psychosocial or intellectual disabilities, against forced medical treatments; and the use of drugs and treatment methods on patients with psychosocial or intellectual disabilities without their free and informed consent.

30. The Committee recommends that the State party:
(a) Strengthen legal and policy provisions protecting persons with disabilities from forced sterilization, especially women and girls with disabilities, persons with psychosocial or intellectual disabilities, and those deprived of their legal capacity; prosecute and sanction the perpetrators, and provide remedies to victims;
(b) Adopt necessary legislative and policy measures to ensure all medical treatment and interventions are done on the basis of the free and informed consent of persons with disabilities;
(c) Provide training to all health practitioners, including traditional healers, on the rights of persons with disabilities.

**Norway (2019)**

29. The Committee is concerned that persons with disabilities, including women and children, reportedly continue to be subjected to involuntary medical treatment, including forced abortion and sterilization.

30. The Committee recommends that the State party adopt effective measures to ensure respect for the right of persons with disabilities, particularly women and children, to provide informed and prior consent to medical treatment, including abortion and sterilization, regardless of the severity and type of impairment and to provide efficient support mechanisms for decision-making.

**Rwanda (2019)**

31. The Committee notes with concern the lack of prevention and protection measures to fully ensure the integrity of persons with disabilities, in particular against forced treatment and forced sterilization of persons with disabilities, particularly those with psychosocial disabilities and women and girls with disabilities.

32. The Committee recommends that the State party adopt legislative and other measures necessary to protect the integrity of persons with disabilities in all settings, including institutional settings where persons with psychosocial disabilities are still placed, and to prevent and stop forced treatment and forced sterilization of persons with disabilities, particularly those with psychosocial disabilities and women and girls with disabilities.
**Saudi Arabia (2019)**
31. The Committee is concerned at the forced sterilization of persons with disabilities, especially women and girls with psychosocial or intellectual disabilities.
32. The Committee urges the State party to protect persons with disabilities, especially women and girls and those with psychosocial or intellectual disabilities, from forced sterilization, in law and in practice, and ensure that perpetrators are prosecuted and sanctioned, and that remedies are available for persons subjected to forced sterilization.

**Spain (2019)**
33. The Committee is deeply concerned that women and girls with disabilities continue to be subjected to forced sterilization and abortion. The Committee is further concerned that medical treatments without the free and informed consent by the person are practiced in the State party.
34. The Committee reiterates its previous recommendation (CRPD/C/ESP/CO/1, para. 8) and further urges the State party to repeal article 156 of the Organic Law 10/1995 to fully abolish the administration of sterilization, medical treatment and research on all persons with disabilities, without the full and informed consent of the person.

**Türkiye (2019)**
36. The Committee is concerned about reports of forced sterilization and forced abortion performed on women and girls with intellectual or psychosocial disabilities. It is also concerned about the lack of information about procedures to safeguard the physical and mental integrity of persons with disabilities, in cases where guardians or other third parties request or authorise medical interventions without their consent.
37. The Committee recommends that the State party:
(a) Revise current legislation and prohibit the practice of medical interventions based on third party’s consent acting as guardians or tutors of persons with disabilities deprived of their legal capacity, and that it develop supported decision-making mechanisms for persons with disabilities that respect will and preferences of the person and protect their dignity and individual autonomy;
(b) Adopt measures to ensure the prohibition of forced abortions and forced sterilizations and raise awareness of forced medical interventions as harmful practices and ensure that the prior and informed consent of persons with disabilities is given for any medical and surgical treatment;
(c) Ensure patient rights’ brochures, social media posts and guidebooks are in accessible formats such as Easy Read and plain language and known by persons with disabilities, doctors and health personnel in all health care facilities;
(d) Provide sufficient remedies, including compensation, reparation and rehabilitation to persons with disabilities who have been subjected to any forced medical intervention, ensuring that information retrieved by the Human Rights and Equality Institution is expeditiously processed and that victims are assisted.

**Vanuatu (2019)**
30. The Committee is concerned that persons with disabilities, especially women with psychosocial or intellectual disabilities, are subjected to forced sterilization without their consent.
31. The Committee recommends that the State party prevent and prohibit all forms of coercive medical treatment, including forced sterilization, on persons with disabilities without their free and informed consent and ensure that no women or girls with psychosocial or intellectual disabilities are subject to forced sterilization.
Poland (2018)
30. The Committee is concerned about the reported forced sterilization of women and girls with disabilities, deprived of their legal capacity, placed under guardianship and living in institutions. It is also concerned by reports of so called “conversion therapy” being performed on LGBT+ persons without consent, by public and private health entities, and based upon the presumed or actual psychosocial disability of a person. 
31. The Committee recommends ensuring that women and girls with disabilities have access to support to make important life decisions for themselves and are not subjected to sterilization without their full, free and informed consent. It also urges to put an end to the use of conversion therapy and offer support for persons with psychosocial disability which respects the gender identity and sexual orientation of a person.

Philippines (2018)
32. The Committee is concerned about the reported incidents of forced sterilization of women with intellectual disabilities.
33. The Committee recommends that the State party takes measures to protect women with intellectual disabilities from involuntary sterilization, and ensure that force sterilization will not happen in practice in the future.

South Africa (2018)
32. The Committee notes with concern:
(a) That forced sterilisation and forced abortion of persons with disabilities, especially women with disabilities, and in particular those with psychosocial and/or intellectual disabilities, occur unabated;
(b) The lack of protection of persons with disabilities, especially those with psychosocial and/or intellectual disabilities, against the use of menstrual suppression drugs, including the use of experimental or new drugs and treatment without free and informed consent, which is also a condition of admission into some special education schools.
33. The Committee recommends that the State Party:
(a) Revise the South African Sterilisation Act No. 44, 1998, and Choice on Termination of Pregnancy Act No. 92, 1996, and remove provisions allowing for sterilisation and termination of pregnancy under substitute decision-making regime, and bring them in line with general comment No. 1 (2014) on supported decision-making;
(b) Adopt legislative and policy measures to prevent and prohibit forced sterilization and non-consensual abortions, ensuring, without exception, that persons with disabilities, especially women and girls with disabilities, and in particular persons with psychosocial and/or intellectual disabilities, including those deprived of their legal capacity, enjoy their right to free and informed consent;
(c) Abolish the use of menstrual suppression drugs, including the use of experimental or new drugs and treatment as a condition of admission into special education schools, notably schools for learners with intellectual disabilities and autism.

North Macedonia (2018)
32. The Committee is concerned that a legal guardian can authorize medical interventions, including abortion and sterilization, without free and informed consent of the person with disabilities.
33. The Committee urges the State party to adopt effective measures to ensure respect for the right to provide free, informed and prior consent of the person with disabilities to medical treatment, including sterilization and abortion, and to provide efficient support mechanisms for decision-making in the State party.
Haiti (2018)

32. The Committee is concerned that persons with disabilities, particularly women with intellectual disabilities are subject to contraceptive methods without their consent, but with the consent of third persons. The Committee is concerned that there is no structure of control or oversight of the implementation of the prohibition of medical or scientific experiments without the actual consent of the person as foreseen in the Act on the Inclusion of Persons with Disabilities (2012).

33. The Committee recommends that the State party take the necessary measures to ensure that all medical procedures and treatments concerning persons with disabilities are contingent on their free and informed consent. It also recommends that the State party monitor the respect of laws prohibiting forced and medical or scientific experiments without the actual consent of the person.

Oman (2018)

33. The Committee is concerned about:
(a) The forced sterilization of persons with disabilities, especially women and girls, and in particular those with psychosocial and/or intellectual disabilities;
(b) Insufficient protection of persons with disabilities, especially those with psychosocial and/or intellectual disabilities, against medical and scientific experimentation, including the use of experimental or new drugs and treatment methods related to the care of patients with psychosocial and/or intellectual disabilities without their free and informed consent.

34. The Committee urges the State party to:
(a) Ensure that both in law and in practice that persons with disabilities are not subjected to forced sterilization, especially women and girls, and in particular persons with psychosocial and/or intellectual disabilities, including those deprived of their legal capacity; and that perpetrators are prosecuted and sanctioned, as necessary, and provide remedies to persons subjected to forced sterilization;
(b) Undertake all necessary measures, both in law and in practice, to protect all persons with disabilities, in particular those with psychosocial and/or intellectual disabilities, against medical and scientific experimentation, including the use of experimental or new drugs and treatment methods, without their free and informed consent.

Russian Federation (2018)

38. The Committee is concerned about the reported instances of forced sterilization of persons with disabilities, especially women and girls with intellectual and/or psycho-social disabilities and autistic persons, including when consent is given by the guardian of the person subjected to sterilization.

39. The Committee recommends that the State party take appropriate measures to prevent any forced sterilization of persons with disabilities, including women and girls with intellectual and/or psycho-social disabilities without that individual’s free and informed consent with effective safeguards available for the concerned persons.

Sudan (2018)

35. The Committee is concerned that sterilization without the free and informed consent of women and girls with disabilities is not explicitly prohibited.

36. The Committee recommends that the State party explicitly prohibit the forced sterilization of persons with disabilities, in particular women and girls, and criminalize such practice.
Luxembourg (2017)
34. The Committee is concerned about reports of the forced administration of contraceptives to women with disabilities of reproductive age, particularly of women and girls with disabilities with intellectual disabilities still living in State-funded institutions. It is also concerned that persons with disabilities are still subject to medical treatments without their free and informed consent, particularly persons still under guardianship.
35. The Committee recommends that the State party adopt all legislative and other measures necessary to prevent and stop non-consensual contraception measures or medical treatment, including when consent is given by a third party.

Montenegro (2017)
34. The Committee notes with concern that, pursuant to article 24 of the Protection and Exercise of the Rights of the Mentally Ill Act, biomedical research may under certain circumstances be carried out on persons with intellectual and/or psychosocial disabilities without their prior, informed and fully voluntarily given consent.
35. The Committee urges the State party to expedite all necessary legal amendments to ensure that any form of medical or other scientific research may not be carried out on persons with disabilities without their prior, informed and fully voluntarily given consent. The Committee reminds the State party that such consent cannot be given via substituted decision-making.

Morocco (2017)
36. The Committee notes with concern that persons with disabilities in the State party, particularly intersex persons with disabilities, are subjected to corrective surgeries and to the practice of forced sterilization, including forced chemical castration.
37. The Committee recommends that the State party prohibit and criminalize the practice of corrective surgeries on intersex persons with disabilities, in the absence of prior and informed consent, and the practice of forced sterilization, including forced chemical castration. It also recommends that the State party raise awareness of such practices as harmful and strengthen mechanisms aimed at ensuring that the informed consent of persons with disabilities is given for any medical and surgical treatment.

Panama (2017)
40. The Committee is concerned by the regulations being adopted regarding mental health care. It is also concerned at the lack of information on forced sterilization and forced abortion.
41. The Committee urges the State party to prevent and prohibit forced sterilization and non-consensual abortions, ensuring, without exception, that persons with disabilities, including those whose legal capacity has been revoked, enjoy their right to free and informed consent. In addition, the Committee requests the State party to compile and publish clear statistics on the number of persons with disabilities subjected to forced sterilization or non-consensual abortion.

United Kingdom of Great Britain and Northern Ireland (2017)
40. The Committee is concerned that persons with disabilities, including women, intersex persons, girls and boys, reportedly continue to be subjected to involuntary medical treatment, including forced sterilization and conversion surgeries.
41. The Committee recommends that the State party repeal all types of legislation, regulations and practices allowing any form of forced intervention or surgery, and ensure that the right to free, prior and informed consent to treatment is upheld and that supported
decision-making mechanisms and strengthened safeguards are provided, paying particular attention to women, intersex persons, girls and boys.

**Bosnia and Herzegovina (2017)**
32. The Committee is concerned that a legal guardian may authorize medical interventions, without the free and informed consent of the person with disabilities.
33. The Committee urges the State party to adopt effective measures to ensure respect for the right of free, informed and prior consent by persons with disabilities for medical treatment, and to provide efficient support mechanisms for decision-making in the State party.

**Canada (2017)**
35. The Committee notes with concern that although forced or compulsory sterilization is illegal in Canada, people with disabilities, particularly people with intellectual and/or psychosocial disabilities, still experience involuntary sterilization through the manipulation of their consent.
36. The Committee recommends that the State party work with provinces and territories to ensure that health-care and substitute decision-making practices prevent involuntary sterilization, including in situations where persons with disabilities are deemed to lack legal capacity to consent. The State party should ensure the development of human rights education and training programmes for health-care providers to prevent non-consensual sterilization and/or manipulated consent of people with disabilities.

**Cyprus (2017)**
41. The Committee is concerned that, according to relevant legislation, persons with disabilities may be subjected to intrusive therapy and other medical treatments without their free and informed consent, including free and informed consent based on supported decision-making. It is also concerned about the insufficiency of safeguards to ensure full access to and respect of persons with disabilities’ sexual and reproductive health and rights, in particular those of women and girls, including by enabling them to retain their fertility under all circumstances.
42. The Committee recommends that the State party take immediate steps to abolish all forms of guardianship and ensure, including through supported decision-making and adequate counselling, that any subjection to intrusive medical or surgical treatment without the individual, prior and fully free and informed consent, is prevented, and that personal integrity, autonomy and self-determination of persons with disabilities is guaranteed in accordance with general comment No. 1 (2014), with a particular focus on women and girls with disabilities. It furthermore recommends that the State party adopt appropriate safeguards in order to ensure that persons with disabilities enjoy full autonomy with respect to their sexual and reproductive rights, on an equal basis with others, including by enabling them to retain their fertility, and that awareness of that issue be promoted among health professionals and the general public.

**Honduras (2017)**
43. Al Comité le preocupa que las personas con discapacidad, especialmente mujeres y niñas, sean objeto de esterilizaciones forzadas y otras formas de tratamientos anticonceptivos no consentidos.
44. El Comité recomienda que se adopten todas las medidas necesarias para asegurar la abolición de todas las prácticas de esterilizaciones forzadas y abortos coercitivos de mujeres y niñas con discapacidad, así como que se garantice el consentimiento libre e
informado de todas las personas con discapacidad para cualquier intervención o tratamiento médico.

Iran (Islamic Republic of) (2017)
36. The Committee notes with concern that persons with psychosocial and/or intellectual disabilities could be subjected to forced sterilization at the request of third parties, including guardians.
37. The Committee recommends that the State party repeal legislation that allows for sterilization of persons with intellectual and/or psychosocial disabilities upon request of guardians and establish a mechanism of supported decision-making about sexual and reproductive health and rights. It also recommends that the State party ensure that free and informed consent is provided prior to any form of medical treatment.

Jordan (2017)
35. The Committee is deeply concerned about the practice of subjecting persons with disabilities, especially women and girls with intellectual and psychosocial disabilities, to sterilization, despite its prohibition in the fatwa issued in Decision No. 194-02 of 2014.
36. The Committee urges the State party to:
(a) Cease the practice of sterilization in the absence of the individual’s free and informed consent;
(b) Adopt the proposed amendments to the Criminal Code, prohibiting forced sterilization, ensure that perpetrators are prosecuted and sanctioned, as necessary, and provide remedies to persons subjected to forced sterilization, including adequate compensation and rehabilitation.

Republic of Moldova (2017)
34. The Committee is concerned about discriminatory Ministry of Health regulations that specify “mental disability” as a criterion for sterilization. It is also concerned about reports of forced contraceptive measures, including forced sterilization and abortion, particularly involving women with psychosocial and/or intellectual disabilities, especially those still in residential institutions.
35. The Committee urges the State party to repeal and amend any legislation and regulations permitting the forced or involuntary sterilization of persons with disabilities, and to prevent and stop the use of non-consensual contraceptive measures, including cases where consent is given by a third party.

Bolivia (2016)
43. The Committee is concerned that sterilization and other surgical procedures are performed without the free and informed consent of persons with disabilities, and with no other authorization than that of the guardian or legal representative, or by court order.
44. The Committee urges the State party to abolish the practice of sterilization of persons with disabilities without their free and informed consent and/or by decision of a third party, and recommends the adoption of protocols to regulate such consent in all surgical, psychiatric and other invasive procedures.
45. The Committee deplores the acts of violence committed against the physical and psychosocial integrity of persons with disabilities as they exercised their legitimate right to demonstrate in public. It is also concerned at reports of excessive use of force, intimidation and physical and verbal violence by police officers, resulting in physical injury to demonstrators, including women and children with disabilities.
46. The Committee urges the State party to launch an impartial and independent investigation to determine responsibility for the acts of repression and the use of violence during demonstrations by persons with disabilities, with the aim of bringing the perpetrators to justice and providing physical and psychosocial redress for those concerned.

**Colombia (2016)**

46. The Committee is concerned that the sterilization of persons with disabilities without their consent, and with the authorization of a judge, is a legal practice, and has been confirmed by decisions of the Constitutional Court (C-182 of 13 April 2016 and T-303 of 2016), including the ordering of exceptions to Act No. 1412 of 2010 to authorize the sterilization of children with cognitive and psychosocial disabilities (C-131 of 2014).

47. The Committee urges the State party to take the necessary steps to abolish the sterilization of persons with disabilities without their free and informed consent, including the repeal of article 6 of Act No. 1412 of 2010. It recommends immediately reviewing the decisions of the Constitutional Court, with a view to maintaining the prohibition, without exception, of sterilization of persons with disabilities, particularly children, without their free and informed consent, and taking measures, including the training of judges and prosecutors, with the involvement of organizations of persons with disabilities, on the rights of persons with disabilities and the international obligations of the State party, mainly those relating to non-discrimination on grounds of disability and the personal integrity of children with disabilities.

**Ethiopia (2016)**

37. The Committee is concerned that forced treatment on the basis of impairment still exist, especially based on third-party consent. It is also concerned that medical personnel working with persons with disabilities are not adequately trained on the rights of persons with disabilities, especially the right to free, prior and informed consent.

38. The Committee recommends that the State party ensure that forced treatment on the grounds of disability is fully prohibited. It also recommends that the State party train medical personnel working with persons with disabilities on the Convention, particularly on the right to free, prior and informed consent, in line with the Committee’s general comment No. 1.

39. The Committee is concerned at the existence of harmful practices, such as female genital mutilation, which include women and girls with disabilities.

40. The Committee recommends that the State party effectively address female genital mutilation both in law and in practice, including women and girls with disabilities. It also recommends that the State party take into account article 17 of the Convention while implementing target 5.3 of the Sustainable Development Goals.

**Guatemala (2016)**

49. The Committee is concerned that persons with disabilities, especially women and girls who have been sexually abused, deprived of their legal capacity and/or institutionalized, are subject to sterilization, abortion and other contraceptive treatments without their consent.

50. The Committee recommends that the State party adopt all possible measures to ensure that no women or girls with disabilities are subject to forced sterilization or abortion and that all medical procedures and treatments concerning persons with disabilities are contingent on their free and informed consent.

**Italy (2016)**

45. The Committee is concerned that children are subjected to irreversible surgery for intersex variation and other medical treatments without their free and informed consent.
46. The Committee recommends that the State party ensure that no one is subjected to scientific undocumented medical or surgical treatment during infancy or childhood; that it guarantee bodily integrity, autonomy and self-determination to the children concerned; and that it provide families with intersex children with adequate counselling and support.

**United Arab Emirates (2016)**

33. The Committee is concerned that the national legislation, including article 13 of Federal Act No. 10 of 2008, permits the involuntary or forced sterilization of persons with disabilities, and allows sterilization when consent is given by a third party.

34. The Committee recommends that the State party repeal article 13 of Federal Act No. 10 of 2008 and review its legislation to explicitly prohibit involuntary or forced sterilization of persons with disabilities, including sterilization when consent is given by a third party.

**Uruguay (2016)**

43. Preocupa al Comité que en el Estado parte se siga aplicando la Ley 9581, de 1936, sobre atención de enfermos siquiátricos y las reglamentaciones que en materia de atención a la salud mental dicte el Ministerio de Salud Pública.

44. El Comité recomienda al Estado parte que revise la Ley 9581 de 1936 y las reglamentaciones que en materia de atención a la salud mental dicte el Ministerio de Salud, garantizando sin excepción el consentimiento libre e informado de personas con discapacidad, incluyendo a aquellas declaradas interdictas, como requisito indispensable para toda intervención quirúrgica o tratamiento médico, particularmente los de carácter invasivo y aquéllos con efectos irreversibles tales como la esterilización y las cirugías a niños y niñas intersex.

**Chile (2016)**

41. Preocupa al Comité que en el Estado parte se sigan practicando esterilizaciones sin consentimiento libre e informado a personas con discapacidad, en su mayoría mujeres y niñas, con tan solo una solicitud de familiar o tutor, así como las evidencias de que esta es una práctica frecuente entre personas con discapacidad psicosocial ingresadas en los centros psiquiátricos.

42. El Comité solicita al Estado Parte que revise la Ley núm. 20584 y el Decreto570, garantizando sin excepción el consentimiento libre e informado de personas con discapacidad, incluyendo de aquellas declaradas interdictas, como requisito indispensable para toda intervención quirúrgica o tratamiento médico, particularmente los de carácter invasivo y aquéllos con efectos irreversibles tales como la esterilización y las cirugías a niños y niñas intersex.

**Lithuania (2016)**

37. The Committee is concerned about the provision of the Civil Code of 2000 that makes it possible for persons with disabilities who have been deprived of legal capacity to undergo, without their consent, surgical operations, including castrations, sterilizations, abortions and operations for the removal of organs, upon authorization by a court. It is also concerned at the lack of investigation of and data on the forced sterilization of persons with disabilities.

38. The Committee recommends that the State party:

(a) Abolish all practices of forced treatment, including non-consensual castrations, sterilizations and abortions, and eliminate the possibility for third parties such as guardians, doctors and the courts to approve such practices, in accordance with article 12 and the Committee’s general comment No. 1;
(b) Provide training for judges and health-care workers on recognition of the legal capacity of persons with disabilities and the mechanisms of supported decision-making;
(c) Collect disaggregated, reliable data on the forced sterilization of persons with disabilities.

**Portugal (2016)**
36. The Committee is concerned that persons with disabilities, and especially those who have been declared legally incapacitated, continue to be subjected against their will to termination of pregnancy, sterilisation, scientific research, electroconvulsive therapy, and psychosurgical intervention.
37. The Committee recommends that the State party adopt all possible measures to ensure respect for the right to provide free, informed and prior consent to medical treatment and to provide support mechanisms for decision making in the State party.

**Serbia (2016)**
33. The Committee is concerned that a legal guardian can authorise medical interventions, including sterilization, without the free and informed consent of a person with disability.
34. The Committee recommends the State Party prohibit medical interventions without the prior consent of persons with disabilities and provide sufficient remedies and compensation to those subjected to such procedures.
35. The Committee is deeply concerned at reports indicating regular use of physical restraint, isolation, and excessive antipsychotic therapy, including for children.
36. The Committee recommends the State party investigate all cases of forced interventions without the free and informed consent of the person, provide protection and redress mechanisms and apply sanctions already available.
37. The Committee is concerned that persons with disabilities, especially those who have been declared legally incapacitated, are still subject against their will to contraceptive treatments, abortion, sterilization, scientific research, electroconvulsive therapy or psychosurgical interventions.
38. The Committee recommends that the State party take all necessary measures to ensure that the right to free, prior and informed consent for any kind of treatment that may affect a person with a disability, regardless of her/his legal capacity. It also recommends that support for decision making regimes for persons with disabilities are provided when necessary.

**Slovakia (2016)**
49. The Committee is concerned that persons with disabilities are subjected to involuntary commitment and treatment procedures without their free and informed consent.
50. The Committee recommends that the State party amend legislation and policies to ensure that all persons with disabilities provide their free and informed consent to admission procedures and all forms of treatment.
51. The Committee is concerned that the Health Care Act authorizes guardians to make decisions for women, whose legal capacity has been restricted, on their sterilization and use of contraception. The Committee is also concerned about the lack of investigations and provisions of redress for cases of forced sterilization.
52. The Committee recommends that the State party abolish all forms of guardianship and replace them with supported decision-making regimes, as well as investigate and provide redress for historical cases of forced sterilization, including for Roma women with disabilities.
Thailand (2016)
35. The Committee is concerned that persons with disabilities, including women, girls and boys with disabilities, continue to be subjected to involuntary medical treatment, including forced sterilization and abortion.
36. The Committee recommends that the State party take efficient measures to protect persons with disabilities, including women, girls and boys, from forced interventions, especially sterilization and abortion, and ensure that the individual’s right to free, prior and informed consent to treatment is upheld and supported decision-making mechanisms are provided.

Uganda (2016)
32. The Committee observes with concern that harmful practices and sexual abuse of women with disabilities are based on harmful stereotypes that consider women with disabilities asexual and pure and that suggest that having sexual intercourse with them might cure HIV/AIDS.
33. The Committee calls upon the State party to:
(a) Adopt measures including a clear public statement and campaigns to end harmful practices against women with disabilities, and prosecute perpetrators;
(b) Adopt a strategy that includes community associations and organizations of women with disabilities to raise awareness about their rights and dignity and inform victims about available protection mechanisms.
34. The Committee is concerned about laws that allow forced medical treatment for persons with disabilities and suchlike practices. Furthermore, the Committee is concerned about the prevalence of female genital mutilation.
35. The Committee recommends that the State party repeal all laws and practices allowing or perpetuating forced treatment of persons with disabilities. It recommends that the State party develop alternative modes of medical treatment that respect the dignity, will and preferences of persons with disabilities in consultation with organizations of persons with disabilities. It also recommends that the State party criminalize the practice of female genital mutilation.

Brazil (2015)
34. The Committee is deeply concerned that children and adults with disabilities whose legal capacity is restricted through interdiction can be sterilized without their free and informed consent, pursuant to Law No. 9263/1996. It is also concerned that the Statute of Persons with Disabilities (Lei Brasileira de Inclusão da Pessoa com Deficiência), authorizes surgical treatment on persons with disabilities under curatela, in absence of free, prior and informed consent on an unequal basis with others.
35. The Committee recommends that the State party take measures to:
(a) immediately revise Law No. 9263/1996 and explicitly and unconditionally prohibit the sterilization of persons with disabilities in the absence of their individual prior, fully informed and free consent;
(b) ensure that persons with disabilities are provided with support to make informed choices and decisions regarding medical procedures and interventions; and
(c) conduct campaigns to raise awareness among families, guardians, medical professionals and managers of institutions of the rights of persons with disabilities, particularly women and girls with disabilities, under article 17 of the Convention.

European Union (2015)
46. The Committee is concerned that persons with disabilities are exposed to involuntary treatment in European Union Member States, including forced sterilisation and abortion.
47. The Committee recommends that the European Union take possible measures to ensure the individual right to free and informed consent to treatment is upheld and supporting decision-making mechanisms are provided in EU Member States.

**Gabon (2015)**

40. The Committee is concerned that, according to information provided by the State party delegation, the practice of female genital mutilation “only affects women and girls with disabilities who are foreigners”, considering this a “cultural issue”.

41. **The Committee recommends that the State party adopt all appropriate legal and administrative measures to eradicate female genital mutilation, for all women and girls, including women and girls with disabilities, whatever their country of origin, in accordance to the Committee on the Elimination of Discrimination against Women’s General Recommendation No. 14 (1990).**

**Kenya (2015)**

33. The Committee observes with concern that women with disabilities have been victims of forced sterilization and that genital mutilation affects women and girls with disabilities, although is a practice prohibited by law.

34. **The Committee calls the State party to:**

   (a) Establish mechanisms to monitor health care facilities and adopt measures to prohibit forced sterilization and ensure that adequate information is provided in accessible formats for all women and girls with disabilities concerning their sexual and reproductive rights; and

   (b) Implement the recommendations issued by the Committee on the Elimination of Discrimination against Women in 2011 (CEDAW/C/KEN/CO/7) relevant to female genital mutilation, and ensure that the action plan of the Anti-FGM Board includes compilation of information on women and girls subjected to such a practice and mechanisms for their reparation and redress.

**Mauritius (2015)**

29. The Committee is concerned about the absence of safeguards to prevent forced treatment of persons with disabilities in hospitals and institutions, especially women and girls with disabilities from forced sterilization.

30. **The Committee recommends that the State party unambiguously prohibit forced treatment of persons with disabilities, as well as the forced sterilization women and girls with disabilities, in the absence of the individual’s free and informed consent.**

**Qatar (2015)**

33. The Committee is concerned about the lack of information indicating whether or not persons with disabilities, particularly persons with intellectual and/or psychosocial disabilities, can be subjected to medical interventions, notably to involuntary or coerced sterilization against their will.

34. **The Committee recommends that the State party ensure that no medical treatment, in particular involuntary and coerced sterilization, is administered without the full and informed consent of the person concerned and requests that information in this regard is included in the next periodic report.**

**Ukraine (2015)**

34. The Committee notes with concern that under article 281 of the Civil Code the guardian of a person recognized as legally incapable is authorized to give consent to the sterilization of
the person concerned, thus subjecting that person to forced sterilization without his/ her free and informed consent.

35. The Committee urges the State party to abolish the practice of sterilization without free and informed consent of the person with disability, and to abolish article 281 of the Civil Code accordingly. The Committee also calls upon the State party to provide remedies to the victims of forced sterilization.

**Cook Islands (2015)**

35. The Committee is concerned that current legislation does not protect women and girls with disabilities from forced sexual and reproductive health procedures nor does it provide sexual and reproductive health education.

36. The Committee recommends that the State party:
   (a) Revise the Criminal Code and any other relevant laws to protect women and girls with disabilities from coerced sterilization, contraception and other forced medication without the individual’s free and informed consent;
   (b) Introduce accessible sexual and reproductive health education programmes in schools and the community that are inclusive of young persons with disabilities, including women and girls.

**Croatia (2015)**

27. The Committee is deeply concerned that children and adults with disabilities can be sterilized without their free and informed consent pursuant to the Health Act, in cases where their parents or guardians have so requested. It is further concerned about frequent use of forced medical treatment of persons with disabilities.

28. The Committee recommends that:
   (a) the Health Act be urgently amended to unconditionally prohibit the sterilization of boys and girls with disabilities, and of adults with disabilities in the absence of their individual prior, fully informed and free consent;
   (b) persons with disabilities are provided with support to make informed choices and decisions regarding medical procedures and interventions, and
   (c) medical professionals are trained in accessible and alternative communication techniques in order to communicate with persons with intellectual, psycho-social and sensory impairments.

**Czech Republic (2015)**

36. The Committee notes with concern that under the Civil Code and the Health Care Act the guardian of person with disability is authorized to give consent to the sterilization of the person concerned, thus subjecting that person to forced sterilization without his/ her free and informed consent.

37. The Committee urges the State party to abolish the practice of sterilization without free and informed consent of the person with disability, and to amend the Civil Code and the Health Care Act accordingly. The Committee also calls upon the State party to provide remedies to the victims of forced sterilization in accordance with the recommendations made by the Human Rights Committee (CCPR/C/CZE/CO/3) and the Committee on the Elimination of Discrimination against Women (CEDAW/C/CZE/CO/5).

**Dominican Republic (2015)**

34. The Committee is concerned about the practice of the forced sterilization of women and girls with disabilities, who are declared “legally incompetent”.

35. The Committee recommends that the State party prohibit the forced sterilization of women and girls with disabilities and that it have cases of sterilization reviewed by an independent authority, that it conduct investigations and punish perpetrators, and that it adopt measures for the compensation and reparation of victims. It also recommends that a mechanism be established to oversee cases of sterilization to ensure that persons with disabilities can give free and informed consent.

**Germany (2015)**
37. The Committee is concerned about: a) the lack of available data of involuntary placement and treatment; b) the practice of forced sterilisation and coercive abortions by substituted consent of adults with disabilities; c) the lack of implementation of the 2011 recommendations CAT/C/DEU/CO/5, para. 20, regarding upholding bodily integrity of intersex children.
38. The Committee recommends that the State party take the necessary measures, including of a legislative nature to:
   (a) Repeal section 1905 of the German Civil Code and explicitly prohibit in law sterilisation without the full and informed consent of the individual concerned, eliminating all exceptions including by substituted consent or upon court approval;
   (b) Ensure that all psychiatric treatments and services are always delivered with the free and informed consent of the individual concerned;
   (c) Investigate human rights violations in psychiatric and older persons care settings in all Länder;
   (d) Implement all the recommendations of CAT/C/DEU/CO/5, para. 20 relevant to intersex children.

**Mongolia (2015)**
29. The Committee is concerned with the measures taken by the State party “to prevent conception in persons with genetically psychosocial or intellectual disorders, or psychosocial or intellectually impaired persons” without informed consent as specified in Article 37(b) of the Law on Health.
30. The Committee urges the State party to eliminate the legislative provisions from the Law on Health, bylaws and related regulations restricting sexual and reproductive rights, and that allow forced sterilisation, and abortion for women with disabilities, in particular psychosocial and intellectual disabilities.

**Turkmenistan (2015)**
35. The Committee is concerned that termination of pregnancy and sterilization as a method of contraception may be performed based on “medical necessity” only, without the person with disability’s individual free and informed consent.
36. The Committee recommends that the State party review its legislation in order to introduce safeguards and ensure that termination of pregnancy and sterilization are only carried out with the prior, free and informed consent of the person concerned with safeguards.

**New Zealand (2014)**
37. The Committee is concerned that parents may give consent for the sterilization of their disabled children, and that courts may order that adults undergo sterilization without the individual’s consent.
38. The Committee recommends that the State party enact legislation prohibiting the use of sterilization on boys and girls with disabilities, and on adults with disabilities, in the absence of their prior, fully informed and free consent.

Republic of Korea (2014)
33. The Committee is concerned about cases of forced sterilization of women with disabilities despite legal provisions prohibiting the practice. It is also concerned about the absence of information on investigations undertaken by the State party on this matter.
34. The Committee urges the State party to take measures to eradicate the practice of forced sterilization, including by raising awareness of the rights of women and girls with disabilities among their families, in communities and within institutions, and by ensuring that mechanisms providing protection against forced sterilization are effective and accessible. The Committee recommends that the State party carry out investigations into recent and current cases of forced sterilization.

Mexico (2014)
37. The Committee is concerned that persons with disabilities are being sterilized without their free and informed consent in institutions such as Casa Hogar Esperanza, where, according to reports received by the Committee, forced or coerced sterilization is recommended to, authorized or performed on girls, adolescents and women with disabilities.
38. The Committee urges the State party to launch administrative and criminal investigations into the judicial and health authorities and institutions that recommend, authorize or perform forced sterilizations on girls, adolescents and women with disabilities and to guarantee access to justice and reparation for victims.

Costa Rica (2014)
37. The Committee is deeply concerned at the practice of forcing women and girls with disabilities to undergo sterilization.
38. The Committee urges the State party to take steps to eradicate the practice of forced sterilization, to raise awareness of the rights of women and girls with disabilities within their families and among managers of the institutions in which they are interned, and to guarantee full respect for their personal, physical and mental integrity by ensuring that mechanisms providing protection against forced sterilization are effective and accessible.

Australia (2013)
39. The Committee is deeply concerned that the Senate Inquiry Report into the Involuntary or Coerced Sterilisation of Persons with Disabilities, released in July 2013, presents recommendations, which would allow this practice to continue. The Committee further regrets the failure of Australia to implement the recommendations from the Committee on the Rights of the Child (CRC/C/15/Add.268; CRC/C/AUS/C0/4), the Human Rights Council (A/HRC/17/10), and the Report of the UN Special Rapporteur on Torture (A/HRC/22/53), which addresses concerns regarding sterilisation of children and adults with disabilities.
40. The Committee urges the State party to adopt national uniform legislation prohibiting the use of sterilisation of boys and girls with disabilities, and of adults with disability in the absence of their prior, fully informed and free consent.

El Salvador (2013)
37. The Committee is concerned at the fact that the law permits the forced sterilization of women with disabilities and the abortion of pregnancies often resulting from sexual abuse, as well as the paucity of information about how the use of physical and pharmaceutical restraint
and similar treatments in psychiatric facilities undermines the integrity of the person and about cases brought before the Office of the Human Rights Advocate.

38. The Committee recommends that the State party repeal provisions permitting the forced sterilization of women with disabilities and that it prevent and investigate the practice of aborting pregnancies resulting from sexual abuse. It also recommends that the State party ensure that the administrative authorities provide the information needed to monitor the situation of persons with disabilities in psychiatric hospitals.

**Argentina (2012)**

31. The Committee regrets that, in cases where a woman with disabilities is under guardianship, her legal representative may give consent for a legal abortion on her behalf. It is likewise concerned that persons with disabilities are being sterilized without their free and informed consent.

32. The Committee recommends that the State party amend article 86 of its Criminal Code and article 3 of Contraceptive Surgery Act No. 26.130 so that they will be in accordance with the Convention and take steps to provide the necessary support to women under guardianship or trusteeship to ensure that the women themselves are the ones who give their informed consent for a legal abortion or for sterilization.

**Spain (2011)**

37. The Committee is concerned that persons with disabilities whose legal capacity is not recognized may be subjected to sterilization without their free and informed consent.

38. The Committee urges the State party to abolish the administration of medical treatment, in particular sterilization, without the full and informed consent of the patient; and ensure that national law especially respects women’s rights under articles 23 and 25 of the Convention.

**Tunisia (2010)**

28. The Committee is concerned about the lack of clarity concerning the scope of legislation to protect persons with disabilities from being subjected to treatment without their free and informed consent, including forced treatment in mental health services.

29. The Committee recommends that the State party incorporate into the law the abolition of surgery and treatment without the full and informed consent of the patient, and ensure that national law especially respects women’s rights under article 23 and 25 of the Convention.