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**ALTERNATIVE REPORT ON THE SITUATION OF THE RIGHTS OF PERSONS WITH DISABILITIES WITHIN THE FRAMEWORK OF THE IMPLEMENTATION OF THE 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT IN COLOMBIA**

Bogota, March 2019



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**Alternative report on the situation of the rights of persons with disabilities within the framework of the implementation of the 2030 Agenda for Sustainable Development in Colombia**

**Organizations**

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# Abbreviations

BPND Bases of the National Development Plan

CNPV National Population and Housing Census

CONPES National Council for Economic and Social Policy

CrPD Convention on the Rights of Persons with Disabilities

DANE National Administrative Department of Statistics

DescLAB Laboratory of Economic, Social and Cultural Rights

DNP National Planning Department

FENASCOL National Federation of the Deaf

IDA International Disability Alliance

INCI National Institute for the Blind

INSOR National Institute for the Deaf

OPcD Organizations of persons with disabilities

PAIIS Program of Action for Equality and Social Inclusion

PIAR Individual Plans for Reasonable Adjustments

PND National Development Plan

PPNDIS National Public Policy on Disability and Social Inclusion

RBC Rehabilitation Based in Community

RLCPD Registry for the Location and Characterization of Persons with Disabilities

SDG Sustainable Development Goals

SIMAT Enrollment system of the Ministry of Education

TIC Technology of the information and communication

UN United Nations Organization

# Introduction

In September 2015, the General Assembly of the United Nations Organization (hereinafter UN) approved the 2030 Agenda for Sustainable Development, which adopted the 17 Sustainable Development Goals (hereinafter SDGs). As of March of 2019, 193 member states of the UN have signed this agenda, which builds on the principle of “leaving no one behind”. As an ambitious program to combat poverty and an inspiring strategy aimed at ensuring the rights of all persons from a sustainable development perspective, this agenda defines specific goals for each SDG and outlines a series of indicators for monitoring and evaluating state compliance.

Colombia has been making efforts to comply with the commitments set in the 2030 Agenda. In this process, national, regional, and territorial entities and governments participate, together with civil society organizations, the academia, and private sector actors.

In 2016, the Colombian government elaborated its first national voluntary review to the UN. It revised the following SDGs: 1. “No Poverty”, 3. “Good Health and Well-being”, 8. “Decent Work and Economic Growth”, and 13. “Climate Action” (Sustainable Development Goals, 2016; Gobierno de Colombia, 2016). The Colombian government presented the progress and concerns regarding the implementation of the 2030 Agenda, highlighting the efforts to include SDGs in public policy-making. During the reporting session, the former director of the National Planning Department (hereinafter DNP by its Spanish acronym), Simón Gaviria, announced the creation of the Inter-institutional Commission designed to prepare, monitor, and evaluate Colombia’s implementation of SDGs (UN Web TV, 2016).

In 2018, the Colombian government drafted its second national voluntary review to the UN. It informed the progress made towards achieving the following SDGs: 6. “Clean Water and sanitation”, 7. “Affordable and Clean energy”, 11. “Sustainable Cities and Communities”, 12. “Responsible Production and Consumption”, and 15. “Life on Land”. The Colombian government publicized the development of a website to access up-to-date information on the progress of each of the SDGs. Moreover, it underscored the implementation of a resource monitoring strategy to improve the allocation of funds towards SDGs. Finally, the government presented an initiative directed at promoting the 2030 Agenda in the private sector (Gobierno de Colombia, 2018).

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The 2030 Agenda recognized that persons with disabilities face situations of vulnerability that increase their risk of “being left behind”. Despite this fact, the Colombian government has failed to consider persons with disabilities in its national voluntary reviews. For instance, the 2016 report only mentions persons with disabilities four times in its 74 pages (Gobierno de Colombia, 2016: 28, 35, 51, 72). Similarly, the 2018 report uses the word disability twice in its 136 pages (Gobierno de Colombia, 2018: 111, 120). These references do not grapple with the rights of persons with disabilities; they are merely a verbatim copy of SDG 8.5, 10.2, 11.1, and 17.19.

While Colombia’s national voluntary reviews expose the policies directed at including women, indigenous people, and Afro-Colombians in SDGs policy-making, persons with disabilities remain invisible in Colomba’s 2030 Agenda. For example, the 2016 report discusses women’s inequality in terms of employment and the wage gap (Gobierno de Colombia, 2016: 51). Similarly, the 2018 report describes projects aimed at providing indigenous and Afro-Colombian communities with access to drinking water and sanitation (Gobierno de Colombia, 2018: 110). However, the government does not address the situation of persons with disabilities. In this sense, this initial examination of the national voluntary reviews exposes the urgent need of incorporating a disability lens in Colombia’s SDGs policy design.

Furthermore, the tools that the government has developed to assess the progress towards SDGs lack information on the situation of persons with disabilities. For instance, although the DNP provides data on SDGs compliance,[[1]](#footnote-1) it only disaggregates it by sex, area, and age. That is, the government does not include disability as a variable, making it challenging to examine the situation of persons with disabilities from an SDGs approach. Accordingly, even though SDG 17.19 calls on states to consider disability in the gathering of population statistics, the Colombian government continues to exclude this variable in the construction of monitoring indicators.

Asdown Colombia, the Colombian Autism League, and the Mental Health Node prepared this report to demand the inclusion of persons with disabilities in Colombia’s national voluntary review process and SDGs implementation strategies. The International Disability Alliance (IDA) supported this research project, which seeks to highlight the importance of introducing a disability perspective in the construction of the 2030 Agenda. Moreover, it aims to link the efforts to advance the SDGs to those intended to monitor the implementation of the United Nations Convention on the Rights of Persons with Disabilities (hereafter CRPD). For this purpose, the report discusses the concerns and comments of organizations of persons with disabilities, human rights organizations, researchers and academics, as well as other relevant governmental actors, regarding SDGs policies in Colombia. Mainly, the analysis focuses on two of the 17 goals:

* **Goal 4:** Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.
* **Goal 5:** Achieve gender equality and empower all women and girls.

We limited the study to these goals for three main reasons. First, in the next High-Level Political Forum, states will review the progress made towards achieving Goal 4. Second, in its concluding observations to Colombia’s report, the CRPD Committee has criticized “the low levels of enrolment of persons with disabilities at all levels of education, and the prevalence of publicly funded ‘special classrooms’ located within mainstream schools” (CRPD/C/COL/CO/1/para. 54). It has also expressed its concern with the fact “that discrimination on the basis of disability is one of the main reasons that persons with disabilities are turned away by mainstream schools, particularly in municipalities and local administrations, and that that rejection impacts on families’ access to means-tested poverty-reduction programmes" (CRPD/C/COL/CO/1/para. 54). Furthermore, the CRPD Committee has rejected “lack of teaching and reading materials in accessible formats and modes of communication” (CRPD/C/COL/CO/1/para. 54). Regarding the rights of women with disabilities, it has reprimanded the absence of a disability perspective in gender policies (CRPD/C/COL/CO/1/para 16). Accordingly, the comments made by the CRPD Committee expose the need to include persons with disabilities in the efforts to advance Goals 4 and 5.

Finally, the emphasis in these goals reflects the interests of the Colombian Autism League, Asdown Colombia, and the Mental Health Node, as well as other organizations of persons with disabilities that work to guarantee gender equality and strive to advance towards an inclusive education model for persons with disabilities (Coalición por la Implementación de las Convención de los Derechos de las Personas con Discapacidad, 2016).

Nevertheless, although this report focuses on Goals 4 and 5, it is essential to recognize the different SDGs interact and complement each other. In this sense, the efforts directed at guaranteeing the education of persons with disabilities are one step towards eradicating poverty and promoting decent work. Likewise, gender equality requires the reduction of economic inequalities. For this reason, the report discusses how the articulation of specific goals can contribute to ensuring inclusive education and gender equality for people with disabilities.

This report is structured in three main sections. First, we discuss the methodology for gathering information and elaborating the research. Second, we analyze the situation of persons with disabilities in Colombia, analyzing the central disability norms, data, and policies. Third, we provide a critical assessment concerning the implementation of Goals 4 and 5 from a disability lens.

The section on Goal 4 centers on the access to education of persons with disabilities, the development of policies aimed at strengthening the capacities and knowledge of persons with disabilities, and the resources, means, and environments to guarantee the education of persons with disabilities. The section on Goal 5 examines the discrimination and violence against women with disabilities, the participation of women with disabilities in political, economic and public life, and the sexual and reproductive rights of women with disabilities. The conclusion summarizes the main problems faced by persons with disabilities in Colombia, making a series of recommendations for including them in the implementation of SDGs.

# 1. Methodology

For the elaboration of this report, we combined two methodological strategies. First, we reviewed secondary sources about disability in Colombia. Second, we organized three validation workshops to identify the progress and challenges of the implementation of the 2030 Agenda from the perspective of disability.

##  Literature review

We read more than eighty (80) documents from different sources: government agencies, research centers, international or multilateral agencies, and civil society organizations. This review process served to assess the degree of compliance with Goals 4 and 5 in Colombia from a disability perspective. Some of the documents analyzed predate the promulgation of the 2030 Agenda. However, the investigation of these sources allowed us to pinpoint the progress and obstacles for advancing the rights of persons with disabilities within the SDGs framework.

## 1.2. Validation workshops

We organized three validation workshops, which sought to guarantee equal participation of men and women with disabilities, the representation of different disability associations, and the involvement of people with physical, auditory, visual, psychosocial disabilities, and organizations of families of persons with intellectual and psychosocial disabilities. Furthermore, we also tried to diversify participation by engaging with organizations working in different regions of Colombia, such as the Saldarriaga Concha Foundation, the Productivity Pact, the National Federation of the Deaf, Humanity & Inclusion, the Employment Support Network, and other important actors such as the Human Rights Secretary of the Latin-America Blind Union (See Annex 3).

The workshops had two central purposes. On the one hand, they allowed the discussion on Goals 4 and 5 with different actors. In this sense, the workshops were an opportunity to disseminate the 2030 Agenda among organizations of persons with disabilities. On the other hand, these encounters served to gather information regarding the barriers and obstacles faced by persons with disabilities in Colombia.

The first validation workshop was held on 18 December 2018. Twenty-three leaders of organizations of persons with disabilities and their families from various cities of Colombia participated in this workshop. On 22 January 2019, we discussed Goals 4 and 5 with twenty-two experts and professionals from human rights organizations, the academia, and other entities responsible for promoting and guaranteeing the rights of persons with disabilities. Finally, after sharing a draft of the report with the different stakeholders, on 21 March 2019, we held a validation workshop, in which we discussed the report and responded to their comments.

# 2. The situation of persons with disabilities in Colombia

## 2.1. General data

In 2018, the Colombian government launched the National Population and Housing Census. According to the former director of the National Administrative Department of Statistics (hereinafter DANE by its Spanish acronym), Mauricio Perfetti Del Corral, this census will serve to trace the living conditions, educational levels, income, and household characteristics of the Colombian population (Departamento Administrativo Nacional de Estadística, 2018).

Initially, the government reduced the number of inquiries concerning disability in this census, claiming that the lack of resources prevented it from adding more questions. However, as Lucas Correa points out, organizations of persons with disabilities mobilized and succeeded in pressuring the government to reverse its decision (Dinero, 2018). Although the government introduced questions of disability in the census, this episode shows another case in which Colombian institutions have failed to consider disability as a fundamental variable for data gathering and monitoring.

Despite the completion of the census on 30 June 2018, at the time of developing this report, the DANE was still in the process of systematizing the information. However, a preliminary report indicates that 3,276,000 persons with disabilities live in Colombia (see table 1). That is, 7.2% of the Colombian population admits having some “difficulty in carrying out activities of their daily life” (Fundación Saldarriaga Concha, 2018).

**Table 1: People with difficulties for daily life activities Census 2018**

|  |  |  |
| --- | --- | --- |
| **Difficulty** | **Number** | **%** |
| Move the body, go up or down the stairs | 18.018.000 | 39,6% |
| See up close, from far or around | 8.508.500 | 18,7% |
| Hearing difficulties | 5.141.500 | 11,3% |
| Understand, learn, remember or make decisions for yourself | 4.959.500 | 10,9% |
| Do daily activities without presenting heart or respiratory problems | 4.413.500 | 9,7% |
| Grab or move objects with your hands | 2.320.500 | 5,1% |
| Talk | 2.047.500 | 4,5% |
| Interact with people | 682.500 | 1,5% |
| Eat, dress or bathe on your own | 591.500 | 1,3% |

Source: Elaborated by authors based on the information of Saldarriaga Concha Foundation, 2018

The DANE is not the only public institution that gathers information on persons with disabilities. Institutions such as the National Institute for the Blind (hereinafter INCI by its Spanish acronym) and the National Institute for the Deaf (hereinafter INSOR by its Spanish acronym) have programs for people with auditory and visual disabilities. For example, the INSOR compiles information and monitors the situation of deaf persons. However, for some disabilities, such as psychosocial, intellectual disability and autism, there is no government institution responsible for collecting data.

The Registry for the Location and Characterization of Persons with Disabilities (hereinafter RLCPD by its Spanish acronym) also collects data on persons with disabilities. According to the Ministry of Health and Social Protection (2018), the RLCPD has the following characteristics:

* It is voluntary.
* Depends on the self-recognition of disability
* It is free.
* Requires an identification document to be registered.
* The person must be present at the time of registration.
* The completion of the electronic form takes approximately 40 minutes.

As of 30 June 2018, the RLCPD registers 1,418,065 persons with disabilities. More than 40% of those registered in the RLCPD are over 60 years old, and only 6.76% of them are under 14 years old. Furthermore, as evidenced in Table 2, the majority of those registered are in the poorest socioeconomic strata. In this sense, eight out of ten people in the registry declare that they receive less than 500,000 pesos (160 dollars) per month.

**Table 2: Income of persons with disabilities**

|  |
| --- |
| **Persons with disabilities by income in the RLCPD** |
| No income | 900.317 | 64,12 |
| Less than $500.000 | 299.520 | 21,33 |
| $500.000 - 1.000.000 | 48.094 | 3,4 |
| $1.000.000 - $.1.500.000 | 6.955 | 0,5 |
| $1.500.000 - $.2.000.000 | 3.329 | 0,24 |
| $.2.000.000 - $.2.500.000 | 1.589 | 0,11 |
| More than $2.000.001 | 3.671 | 0,26 |

However, although the RLCPD is a useful tool for monitoring the situation of persons with disabilities, some studies have found that its coverage only reaches 30% of the population with disabilities (Osorio Vega, 2016). As acknowledged by the Ministry of Health and Social Protection (2017), the government does not know the exact number of persons with disabilities in Colombia. It only has the data from the 2005 census, in which 2,624,898 people (6.1% of the population) registered as having a disability.

Lastly, according to an investigation carried out by the Program of Action for Equality and Social Inclusion (hereinafter PAIIS by its Spanish acronym) (2018), state entities do not systematically include disability as a variable. In summary, the government lacks indicators to assess the situation of persons with disabilities accurately. For this reason, we recommend that it compiles and updates the information on the situation of persons with disabilities (SDG 17.18).

# 2.2. Legal framework

In Colombia, there is a robust regulatory framework to guarantee the rights of persons with disabilities. Table 3 shows the central norms regarding disability. These norms move away from the medical model of disability and recognize persons with disabilities as subjects of rights. Furthermore, through the constitutionality block, the CRPD is normatively integrated into Colombia’s Constitution.

|  |  |
| --- | --- |
| **Normativity** | **Description** |
| 1991 Constitution | The Political Constitution enshrines: “All people are born free and equal before the law, receive the same protection and treatment from the authorities and enjoy the same rights, freedoms and opportunities without any discrimination (...)”. It states that “the State will promote the conditions for equality to be real and effective and will adopt measures in favor of discriminated or marginalized groups” and “will protect especially those persons who due to their economic, physical or mental condition, are in a circumstance of manifest weakness (...)” ( Article 13). It states: “International treaties and conventions ratified by Congress, which recognize human rights and prohibit their limitation in states of exception, prevail in the internal order” (Article 93). For this reason, the CRPD is part of the constitution. |
| Law 1145 of 2007 | Creates the National Disability Committee and the departmental and municipal disability committees as instances of articulation and coordination between organizations of persons with disabilities and government entities. |
| Law 1346 2009 | Incorporates the CRPD into Colombia’s constitutional order.  |
| Law 1618 of 2013 | It seeks to guarantee and ensure the effective exercise of the rights of persons with disabilities, through the adoption of measures of inclusion, affirmative action, and reasonable accommodation, eliminating all forms of discrimination based on disability (Article 1). |
| Resolution 2003 of 2014 | It states that health providers must guarantee the access of persons with disabilities. |
| Law 1751 of 2015 | It characterizes persons with disabilities as subjects of special protection, and it forces health institutions to “define intersectoral and interdisciplinary care processes that guarantee the best care conditions” (Article 11). |
| Resolution 1904 of 2017 | Its purpose is to guarantee that persons with disabilities have access to adequate and sufficient information about their sexual rights and reproductive rights. |
| Decree 1421 of 2017 | It establishes the guidelines for the implementation of inclusive educational models for persons with disabilities. |
| Decree 2011 of 2017 | It establishes a quota to promote the access of persons with disabilities to public employment. |
| Decree 1350 of 2018 | It regulates organizations of persons with disabilities, whose purpose is to represent persons with disabilities before local, municipal or district, departmental, national and international bodies, establishing the requirements that such organizations must meet in the framework of their representativeness. |

Source: Elaborated by authors

Despite normative advances, specialists and activists on issues of rights of persons with disabilities in Colombia agree that one of the biggest obstacles is the lack of implementation of legal consecrations[[2]](#footnote-2). In the absence of monitoring and oversight mechanisms, regulatory advances do not translate into clear public policies and government actions[[3]](#footnote-3). In the words of Dean Lermen, Secretary of Human Rights of the Latin American Union of the Blind, “[Colombia] seems to lack a kind of auditor, a monitoring system” [[4]](#footnote-4).

## 2.3. Public Policies

### 2.3.1. The National Public Policy on Disability and Social Inclusion 2013 - 2022

The National Public Policy on Disability and Social Inclusion 2013 - 2022 (hereinafter PPNDIS by its Spanish acronym) mandates that public institutions must implement four approaches in the design of policies directed at persons with disabilities:

1. *A rights approach:* It recognizes people with disabilities as rights holders, enshrining the principles of human dignity, equality, freedom, and non-discrimination.
2. *A population approach:* It includes demographic considerations in policy-making to attend to stakeholders’ needs and interests.
3. *A territorial approach:* It generates a multidimensional and multisectoral vision of regional policies to promote democratic participation and decentralization.
4. *Intersectoriality:* It promotes coordination among state institutions and entities.

The PPNDIS formulates two specific approaches aimed at recognizing diversity in the needs of persons with disabilities:

1. A *differential approach:* It identifies the need to adapt and adjust public policies to the particular characteristics of a given population. This approach recognizes gender, age, ethnicity, disability, family structure, proximity to the armed conflict, and natural disasters as conditions that increase situations of risk and vulnerability.
2. *A human development and capacity approach:* It recognizes persons with disabilities as agents of progress and change and as beneficiaries of development.

The PPNDIS establishes five strategic objectives to guarantee the rights of persons with disabilities:

1. To collect quality of information on persons with disabilities.
2. To guarantee the access of persons with disabilities to justice, recognizing their legal capacity.
3. To strengthen the participation of persons with disabilities in public affairs.
4. To generate and strengthen mechanisms for access to education, healthcare, employment, tourism, recreation and sports, culture and social protection services.
5. To advance towards an inclusive society that respects difference, equality, and universal accessibility.

The National Disability Council and the regional disability committees support the promotion of these objectives. In general, the PPNDIS is a valuable instrument for the inclusion of persons with disabilities.

### 2.3.2. National development plan 2014-2018

In 2014, President Juan Manuel Santos (2010 – 2018) published the National Development Plan of 2014-2018, “All for a new country”. This plan adopted a differential approach to guarantee the rights of ethnic communities, women, children, the elderly, and people with disabilities. In this sense, it framed disability as a condition that required special attention regarding healthcare, recreation, sports and culture, mobility, employment, and citizen participation. In terms of education, this plan proposed intersectoral strategies in line with the CRPD for the expansion of the coverage of quality education at the regional level, with emphasis on early childhood development and technologies of education.

### 2.3.3. Regional development plans 2016 - 2020

As evidenced in Annex 4, in Colombia, disability has been included in regional development plans of 2016–2020. Most of these plans consider persons with disabilities within the differential approach framework, recognizing disability with other categories such as gender, ethnicity, sexual orientation, and age. As part of the differential approach, specific groups, including persons with disabilities, have a higher risk of facing discrimination, poverty, deficiencies in healthcare and rehabilitation, exclusion from educational systems, and lack of opportunities in the labor market, among others. Furthermore, regional development plans focus mainly on improving access to health services and generating inclusive spaces for people with disabilities.

However, there is no clear articulation between the PPNDIS and the different regional development plans. This disarticulation is especially evident in the lack of strategies and goals regarding access to education for children with disabilities and aimed at guaranteeing gender equality for women with disabilities. As such, none of the plans incorporate an intersectional lens that recognizes the interaction of disability with other forms of discrimination. For this reason, the incorporation of a disability lens in the policies directed at implementing Goals 4 and 5 requires further government action.

### 2.3.4. Bases of the National Development Plan 2018-2022

In 2019, President Ivan Duque (2018 – present) promulgated the Bases of the National Development Plan 2018-2022 (hereinafter BPND by its Spanish acronym), which set the foundations of the government’s policies for the coming years. Although the Colombian Congress has not approved the BPND, this document outlines the direction that the current government wants to set during Duque’s presidency. Moreover, the analysis of the differences between the BPND and the law that the government passed to Congress regarding its national development plan serves to expose how the obligations towards persons with disabilities tend to lack concrete implementation strategies.

The BPND refer to persons with disabilities 211 times. In most cases, the inclusion of people with disabilities occurs as part of the differential approach, which considers the impact of public policies on specific population groups. For example, the BPND foresee the creation of differentiated justice models, which incorporate an ethnic, gender, rural, and disability perspective (BPND 2019: 50). Likewise, this document recognizes the need to remove the barriers that impede access to education, healthcare, essential social services, and employment, considering circumstances such as geographic location, ethnicity, sex, disability, and age, among others (See: BPND 2019:179; 302 ). In this sense, the inclusion of persons with disabilities operates through an additive logic, in which the government generates a list of “vulnerable” groups that require special protection.

Furthermore, as part of the BPND, Duque’s government seeks to improve the accessibility to voting stations (BPND, 2019: 94). It also recognizes the “weak social inclusion of children with disabilities” (BPND, 2019: 184) and insists on the implementation of “an intersectoral program for the comprehensive care of children with disabilities” (BPND, 2019: 198). To generate inclusive evaluation processes, the BPND establish that the government must eliminate all access barriers to public exams and review the strategies of inclusive education (BPND, 2019: 246).

The BPND include a chapter titled “Pact for the inclusion of all persons with disabilities”, in which the government emphasizes the need to articulate disability policies with the SDGs.

It is highlighted that this pact for the inclusion of all persons with disabilities is in line with the 2030 Agenda and its Sustainable Development Goals (SDG). In particular, this pact will contribute to the fulfillment of SDG 1: No Poverty; SDG 3: Good Health and Well-being; SDG 4: Quality Education; SDG 8: Decent Work and Economic Growth; SDG 9: Industry, Innovation and Infrastructure; SDG 10: Reduced Inequality; SDG 11: Sustainable Cities and Communities; SDG 16: Peace and Justice Strong Institutions, and SDG 17: Partnerships to achieve the Goal (BPND, 2019: 812).

In the BPND, the government recognizes “the absence or insufficient information about the situation of the persons with disabilities, and the lack of understanding of the conditions and situations that determine their lives” (BPND, 2019: 813). Likewise, according to the BPND, of the 167,729 people are registered in the RLCPCD, 80% do not have a job (BPND, 2019: 816). Accordingly, the government recognizes the precariousness of employment of persons with disabilities.

To improve the national disability system, the “Pact for the inclusion of all persons with disabilities” establishes the following objectives:

1. “Update and implement the actions of the PPDIS, to ensure the social and productive inclusion of persons with disabilities, based on affirmative actions and reasonable adjustments, and eliminating all forms of discrimination;
2. Implement inclusive education programs aimed at the social and productive inclusion of persons with disabilities;
3. Implement mechanisms of productive inclusion for the generation of income and the economic security of persons with disabilities, their families and caretakers;
4. Create and implement a national accessibility plan that ensures the participation of persons with disabilities in equal conditions, in the physical environment, transport, information, and communications, including ICTs, both in urban and rural areas;
5. Adopt measures to guarantee the full recognition of rights and legal capacity of persons with disabilities;
6. Strengthen the existing offer, especially in assistance and social protection programs, and articulate it within the framework defined by the BPND in the Equality Pact for Women” (BPND, 2019: 820).

However, on some occasions, the construction of these objectives is not clear about the difference between inclusive education and special education, proposing measures that seem more akin to the former rather than the latter. In this sense, there is a tension between the BPND and the CRPD, which calls on states to abandon “special education” models. Furthermore, the government’s plan does not incorporate an intersectional perspective that recognizes the multiple forms of discrimination that persons with disabilities may be subject to because of their sex, gender, sexual orientation, race, ethnicity or socioeconomic status.

Additionally, when comparing the BPND with the articles that made their way to the Colombian Congress, one finds that the obligations towards persons with disabilities become marginal. That is, the law that seeks to enact the BPND does not articulate any clear cut commitments to guarantee the rights of persons with disabilities. In summary, although the BPND are still in their preliminary stages, a series of challenges begin to materialize in the government's plans to include persons with disabilities. Furthermore, persons with disabilities have encountered a series of obstacles for participating in the drafting of the BPND and the debates in Congress.

# 3. Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

## 3.1. Ensure the equal access of persons with disabilities to all levels of education and vocational raining

Colombia’s 1991 Constitution consecrates three fundamental principles that have served to protect the right to education of persons with disabilities. First, the Constitution guarantees equal rights, freedoms, and opportunities for all Colombians and prohibits all forms of discrimination (Article 13). Second, it recognizes education as “an individual right and a public service that has a social function” (Article 67). Finally, the Constitution determines that the state must eradicate “illiteracy and the education of individuals with physical or mental limitations or with exceptional capabilities” (Article 68). In this sense, it establishes that the state must advance towards the integration of persons with disabilities in society (Article 47).

Under this constitutional framework, the Colombian state has made significant progress in guaranteeing the access of persons with disabilities to education. However, these advances have not been the result of systematic and homogeneous processes. On the contrary, they have depended on short-term social programs that in most occasions lack participatory platforms and long-term planning strategies. The Constitutional Court and other governmental bodies have played a fundamental role in challenging the discrimination of persons with disabilities in Colombia’s educational institutions (See, for example, Constitutional Court sentences T-429-92, T-036-93, T-298-94, T-329-97, T-513-99, and T-792-07). Likewise, civil society organizations have made great efforts to advance towards an inclusive educational model (Comité de los Derechos de las Personas con Discapacidad 2015; Coalición Colombiana para la implementación de la convención Ministerio de Educación Nacional 2017; Naciones Unidas 2016). Despite these efforts, persons with disabilities continue to face various obstacles in accessing an inclusive, equitable and quality education.

Multiple sources claim that the government’s disability policies have developed in a disjointed manner, do not reach most regions of the country, and fail to be sustainable over time (Comité de los Derechos de las Personas con Discapacidad, 2016; Equipo País de Naciones Unidas en Colombia, 2016; Martínez, Uribe, and Velásquez, 2015). Furthermore, according to the United Nations, only 1.92% of the students enrolled in the regular education system are students with disabilities (Naciones Unidas 2016, para. 16). Likewise, the DANE (2012) has revealed that about 80% of children with disabilities between five and nine do not have any level of education, and 47.1% of those 10 to 17 do not have any level of education. Accordingly, Colombia has one of the highest illiteracy rates for persons with disabilities, compared to the index for the general population (Naciones Unidas 2016). These conditions increase the risk for persons with disabilities of facing situations of poverty and vulnerability (Fundación Saldarriaga Concha, 2011; Comité de los Derechos de las Personas con Discapacidad, 2016).

The education of persons with disabilities varies in the different regions of the country. For example, based on the RLCPD, Antioquia, Risaralda, Boyacá, Quindío, and Caldas report that they provide education to 70% of the children with disabilities, while departments such as Guainía, Vaupés, Vichada, Chocó, and Córdoba do not reach a 50% coverage.

Moreover, some organizations have expressed their concern with the gender disparities in education, underscoring the high rate of unschooling of girls and adolescents with disabilities. Other organizations have commented on the disparities in the education of children with specific disabilities (Colectiva Polimorfas, 2008)[[5]](#footnote-5). For instance, parents of children and youth with psychosocial and intellectual disabilities are frequently forced to demand legal protection to guarantee their children’s education[[6]](#footnote-6).

**Table 4: Enrollment by educational level 2014-2016**

|  |  |  |  |
| --- | --- | --- | --- |
| **EDUCATION LEVEL** | **2014** | **2015** | **2016** |
| Kindergarten  | 715 | 735 | 1.141 |
| Transition | 5.220 | 6.287 | 6.247 |
| Primary school | 83.306 | 91.364 | 95.405 |
| Middle school  | 13.644 | 14.980 | 17.058 |
| High school | 53.145 | 58.019 | 63.352 |
| Total general | 156.030 | 171.385 | 183.203 |

Source: Author’s elaboration based on information from Registration System of the Ministry of Education (SIMAT), 2014-2016

**Table 5: Education of persons with disabilities registered in the RLCPD 2018**

|  |  |  |
| --- | --- | --- |
| **Category** | **Number of people** | **%** |
| Population in school age between the ages of 5 to 24 | 244.943 |  |
| Population with education between the ages of 5 to 24 | 136.755 | 55.8% |
| Population without education | 101.111 | 41,20% |
| Others (did not register education)  | 7.077 | 3% |

Source: Elaborated by authors based on the information of the RLCPD, 2018

The disparities on education also depend on the educational level. For example, there are low enrolment numbers of children with disabilities in kindergarten and high school, when compared to the number of children in primary school (Table 4). Furthermore, as shown in table 5, only 55% of the persons with disabilities between 5 and 24 (244,943 people) registered in the RLCPD attend school or university. That is, 101,111 (41.2%) of the persons with disabilities in this age range do not attend school or university. Furthermore, three out of ten people with disabilities do not have any level of schooling, and only four out of ten have primary school education. Additionally, the RLCPD reports that 367,633 people over 24 are illiterate (See table 6).

**Table 6: Percentage of persons with disabilities aged 24 by approved level of schooling**

|  |  |  |
| --- | --- | --- |
| Level | # | % |
| Primary school | 22.977 | 2% |
| Middle school | 482.518 | 42% |
| High school | 229.770 | 20% |
| Technological education | 22.890 | 1,99% |
| University education | 23.002 | 3% |
| Postgraduate | 11.582 | 2% |
| None | 356.114 | 31º% |
| Total | 1.148.853 | 100% |

Source: Elaborated by authors based on the information of the RLCPD, 2018

Furthermore, the data on schooling in the RLCPD and the SIMAT are very different (see graph 1). This discrepancy reveals the lack of homogeneity in the categorization of disability in information systems. For example, as evidenced in Annex 5, SIMAT uses thirteen different categories, and the RLCPD uses seven, making it difficult to compare data between different information systems.

**Graph 1: Persons with disabilities in SIMAT and the RLCPD**

On another note, in Colombia, most persons with disabilities report that their disability is the main reason for not going to school (See table 7). In this sense, disability continues to be a source of marginalization and discrimination.

**Table 7: Reasons why persons with disabilties do not study**

|  |  |
| --- | --- |
| **Reasons** | **#** |
| Disability  | 65.873  |
| Other reason  | 15.454  |
| Because you're finished or you think you're not of school age | 5.860  |
| Costs or lack of money  | 5.099  |
| There is no educational center nearby | 2.040  |
| Does not like or is not interested in studying | 1.977  |
| Lack of slots  | 1.516  |
| Needs to work | 793  |
| Your family does not want you to study | 774  |
| Lack of time  | 691  |
| Was expelled | 359  |
| Did not pass the entrance exam | 330  |

Source: Elaborated by authors based on the information of the RLCPD, 2018

Lastly, moving towards an inclusive education model is not limited to issues of access. It is also necessary to analyze the permanence and graduation of people with disabilities in the educational system[[7]](#footnote-7). Nevertheless, there is a lack of data regarding the number of students with disabilities who withdraw or do not complete their education[[8]](#footnote-8). However, according to several international studies, young people with disabilities are much less likely to graduate from school than youth without disabilities (Shandra and Hogan, 2009). For this reason, the current educational indicators are insufficient to monitor the academic situation of persons with disabilities[[9]](#footnote-9).

## 3.2. Development of policies aimed at strengthening the capacities and knowledge of persons with disabilities

The exclusion of persons with disabilities from the education system has generated low levels of qualification that prevents them from having access to employment (Castro and Correa, 2016). This situation reduces their possibilities of obtaining good quality jobs and decreases their ability to generate income (Martínez, Uribe y Velázquez, 2015; Asamblea General, 2016; CONPES, 2013). As the CRPD Committee (2016) points out in Observation No. 4., the lack of educational opportunities for persons with disabilities increases their marginalization and hinders their independent living.

During the workshops, the leaders and experts pointed out that thinking about development means strenthening inclusive education programs, eliminating exclusion and discrimination, and empowering persons with disabilities[[10]](#footnote-10). In this sense, the lack of education constitutes a barrier to the autonomy, independence, and participation of persons with disabilities in society.

For José Leal and Henry Mejía of the National Federation of the Deaf (FENASCOL), a system of inclusive education requires integrating sign language into school curricula[[11]](#footnote-11). For Jorge Muñoz, National Councilor for Disability, inclusion should also occur in virtual learning environments through the creation of accessible digital tools[[12]](#footnote-12). Finally, for Betty Roncancio, Director of the League of Autism and Mónica Cortés, Director of Asdown Colombia, persons with intellectual and psychosocial disabilities are usually referred to the health system, which leaves them out of inclusive education processes[[13]](#footnote-13). In this sense, the development of policies aimed at strengthening the capacities and knowledge must adopt reasonable adjustments that consider the different types of disabilities and learning spaces.

However, these reasonable adjustments do not consist of creating exceptions. For example, in Colombia, the government claims that it is providing reasonable adjustments when it allows blind students to be exempt from the English test in public examinations. Under this logic, schools exclude blind students from English classes and ask to discharge persons with disabilities from state tests, in order “to secure that their institutional ranking is not affected” and “ensure reasonable accommodations”[[14]](#footnote-14).

According to José Leal, in Colombia, disability continues to be associated with incapacity[[15]](#footnote-15). These social representations materialize as an obstacle for the development of skills and knowledge of persons with disabilities. In this sense, people still conceive disability as a medical condition. This understanding obstructs the inclusion of persons with disabilities and perpetuates collective imaginaries that associate disability with incompetence and incapacity[[16]](#footnote-16).

The development of policies aimed at strengthening the capacities and knowledge of persons with disabilities must also consider other social actors[[17]](#footnote-17). The education of public officials, teachers, health professionals, families, and other members of society is fundamental for the incorporation of the social disability model[[18]](#footnote-18). Otherwise, these actors will continue to replicate stereotypes and stigmas that exclude persons with disabilities and violate their fundamental rights[[19]](#footnote-19).

In sum, although the government has developed policies aimed at strengthening the capacities and knowledge, persons with disabilities continue to face a series of obstacles to guarantee their right to education. Therefore, greater efforts are required to achieve Goal 4 and ensure an inclusive, equitable and quality education for persons with disabilities.

## 3.3. Resources, means, and environments to guarantee the education of persons with disabilities

In Colombia, as reported by the CRPD Committee (2016, para. 21-22), public and private education campaigns tend to adopt a charitable model of disability. This approach replicates the negative stereotypes, which serve to exclude persons with disabilities from educational programs. Likewise, the CRPD Committee (2016, paragraphs 31-32) has expressed its concern about the persistence of restrictions on the exercise of persons with disabilities, which prevents them from making decisions about their education. In this regard, the Committee has urged the state to adopt “Adopt a national plan to transform the system into one that provides inclusive and quality education for all persons with disabilities, at all levels, and prohibits discrimination on grounds of disability; "(CRPD, 2016, para 55a). Similarly, it has insisted that laws be enacted that guarantee the right to inclusive education, insisting that the state must adopt policies to raise the enrollment rate of persons with disabilities, generate reasonable accommodations and accessible environments for students with disabilities, and make inclusive education a core component of teacher training programs (CRPD, 2016, para 55b, 55c, 55d). Finally, the Committee has recommended that the state “Be guided by article 24 of the Convention in pursuing targets 4.1, 4.5 and 4.a of the Sustainable Development Goals” (CRPD, 2016, for 55e). In this way, the Committee positions the CRPD as the basis for compliance with SDG 4.

Although both the state and civil society organizations have played an active role in training and advising professionals to care for students with disabilities, one of the main obstacles to guaranteeing the education of persons with disabilities continues to be the lack of trained teachers to advance inclusive pedagogical processes (Castro and Correa, 2016; Programa de las Naciones Unidas para el Desarrollo, 2016; Defensoría del Pueblo de Colombia, 2016; Ministerio de Salud y Protección Social, 2018). Most schools maintain a segregated vision of education that considers that professionals in special education should conduct the learning processes of children with disabilities. For this reason, inclusive education training programs remain scarce (Comité de los Derechos de las Personas con Discapacidad, 2016).

The promulgation of Decree 1421 of 2017 marked a benchmark in the struggle for the education of persons with disabilities. This decree regulated the attention of students with disabilities in public schools. In this sense, it endorsed the creation of reasonable adjustments to guarantee inclusive processes of education. Notably, through the formulation of Individual Plans for Reasonable Adjustments (PIAR), this decree created strategies and alternatives for accompanying students in their training processes. Despite these advances, schools continue to dismiss the guidelines set in the decree, especially in remote rural areas[[20]](#footnote-20).

Salam Gómez, National Councilor for Disability, claims that there is no clarity about the Decree [1421 of 2017], and teachers do not have the tools or adequate training in inclusive education[[21]](#footnote-21). Likewise, Alejandra León, director of the business program of labor promotion for persons with disabilities, highlights that the high level of rotation of instructors makes it challenging to implement inclusive education processes[[22]](#footnote-22). As a result, even when training spaces are provided, the variation of the teaching staff becomes a barrier to the continuity of inclusive education programs.

However, for Dean Lermen, Secretary of Human Rights of the Latin American Union of the Blind, the argument of the lack of teachers and training has become an excuse to justify the exclusion of children with disabilities from learning institutions[[23]](#footnote-23). Likewise, Anderson Henao of Humanity & Inclusion Colombia argues that the professionalization of inclusive education has become an obstacle in itself. In this sense, although the schools are aware of the prerogatives and legal obligations, they do not implement the norm, citing the lack of capabilities, training, and resources[[24]](#footnote-24). They reject students with disabilities by claiming that they do not want “to incur in a pedagogical error” [[25]](#footnote-25). For this reason, the notion of inclusive education as a specific area of knowledge is a setback in the rights of persons with disabilities. As such, this expertise logic tends towards the exclusion of people with disabilities.

In summary, the misinterpretations of the CRPD, the tendency towards the specialization of inclusive education, the absence of the state in some areas of the national territory, the confusion between disability and incapacity materialize as obstacles for advancing the education of persons with disabilities.

# 4. Goal 5: Achieve gender equality and empower all women and girls.

## 4.1. Discrimination and violence against women with disabilities

Historically, women and girls have faced multiple forms of discrimination. In Colombia, this situation is accentuated for Afro-Colombian, Raizal, indigenous, lesbian, gay, bisexual, transgender women with disabilities and those living in rural and remote areas (Consejo de Derechos Humanos, 2016).

When analyzing the information on women with disabilities, five themes reappear throughout the documents. First, studies highlight the low levels of enrollment in primary education of girls with disabilities. Second, international agencies underscore the obstacles to decent and quality employment and the high unemployment rates of women with disabilities. Third, the recurrent discrimination of women with disabilities because of the sexual division comes up frequently in the documents analyzed. Fourth, the research finds that women with disabilities face situations of poverty and do not have access to social protection programs. Lastly, women with disabilities encounter political, social, and economic barriers that prevent them from occupying positions of leadership and participating in decision-making processes.

In Colombia, women are more likely to experience cases of gender-based violence. This risk is more acute for women with disabilities (see graph 2).

**Graph 2: Cases of violence against persons with disabilities in 2017**

Violence against women with disabilities occurs in the private and public spheres (Comité de los Derechos de las Personas con Discapacidad, 2016; Castro and Correa, 2016). In the private sphere, women with disabilities are more vulnerable to physical, psychological and sexual violence and abuse. In the majority of cases, a family member or acquaintance is responsible for these violations (see graph 3) (Equipo País de Naciones Unidas en Colombia, 2016). In the public sphere, women with disabilities can be victims of forced recruitment, torture, disappearance, trafficking, sexual exploitation, and displacement (Constitutional Court, Auto 009 of 2015).

**Graph 3: Cases of violence against persons with disabilities according to the aggessor**

In 2016, the CRPD Committee expressed its concern regarding the impact of the armed conflict on women and girls with disabilities. It recommended the government to “investigate and initiate proceedings in civilian courts to determine the criminal liability of the military and self-defense groups in cases of sexual violence against women and girls with disabilities during the armed conflict and in the period of transition towards peace” (Comité de los Derechos de las Personas con Discapacidad, 2016, para. 45b). Furthermore, the CRPD Committee asked the government to “give priority to programmes for preventing, eliminating and recovering from violence against women and girls with disabilities in conflict areas, as well as the return of displaced populations” (Comité de los Derechos de las Personas con Discapacidad, 2016, para. 45b).

The CRPD Committee (2016, paragraph 16) also criticized the lack of a disability perspective in gender policies in the policies aimed at combating discrimination and violence. For this reason, the Committee recommended: “Be guided by article 6 of the Convention in pursuing targets 5.1, 5.2 and 5.5 of the Sustainable Development Goals” (Committee on the Rights of Persons with Disabilities, 2016, paragraph 16c). In doing so, it linked compliance with the Convention to the implementation of SDGs.

Despite these recommendations, when analyzing the reports of the Presidential High Council for the Equality of Women, one finds the absence of a disability perspective. None of the annual reports from 2015 to 2018 mentions women with disabilities. Moreover, as Adriana Pulido puts it, the campaigns against gender violence are not accessible to all persons with disabilities[[26]](#footnote-26). Similarly, an investigation carried out by the PAIIS found that the Office of the Attorney General of the Nation, the Ombudsman, and the Institute National Legal Medicine and Forensic Sciences register cases of violence against persons with disabilities in a disjointed manner. More precisely, these agencies tend to use different definitions and categories, and, in some cases, do not include this variable in the follow-up of cases of violence. Hence, the government has not formulated an intersectional perspective to attend to the situations of women with disabilities, making the lack of data on gender-based violence one fundamental barrier for monitoring the advances made towards Goal 5. Specially, it shows that the government has not included disability in the construction of the following indicators:

* + 5.2.1. Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months, by form of violence and by age group
	+ 5.2.2. Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the previous 12 months, by age and place of occurrence.

The interdiction of persons with disabilities can trigger situations of risk, particularly for persons with cognitive, intellectual, and psychosocial disabilities. In Colombia, between March 2015 and February 2018, 5,959 people were subject to interdiction (PAIIS, 2018). This measure deprives persons with disabilities from their legal capacity, making it more challenging for women with disabilities to gain protection in events of harassment and sexual violence (Colectiva Polimorfas 2008). Furthermore, in some cases, legal guardians can authorize the surgical sterilization of women with disabilities or abortion without their consent, violating the rights enshrined in the CRPD (Coalición de los Derechos de las Personas con Discapacidad, 2019).

Lastly, according to the Human Rights Council (2019), women with intellectual or psychosocial disabilities are subjected to processes of involuntary placement in mental health centers in which forced medicalization practices, or other interventions take place. In Colombia, women with disabilities can sometimes face situations of physical and sexual violence in these mental health institutions (Coalición de los Derechos de las Personas con Discapacidad, 2019). Furthermore, some of these health centers lack reasonable adjustments, which can make it difficult for persons with disabilities to communicate. For instance, some of these institutions do not have interpreters for death persons[[27]](#footnote-27).

## 4.2. Women with disabilities’ participation in the social, economic, and political life

SDG establish the following indicators for monitoring women’s participation:

* 5.5.1 Proportion of seats held by women in national parliaments and local governments
* 5.5.2 Proportion of women in managerial positions

However, as we will show in this section, the government has not included a disability perspective in the policies aimed at strengthening women’s participation.

Since 2004, the Administrative Department of the Public Function has been publishing annual reports on the participation of women in public service. These documents analyze how public entities comply with Law 581 of 2001, which mandates a 30% gender quota in government positions. The reports of 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2017, and 2018 incorporate a one-dimensional approach. That is, they examine the advances in terms of women’s participation without breaking down the information according to other categories, such as disability, age, and education, among others.

The 2014 report only mentions women with disabilities once. It reads, “In terms of participation, it is also evident that poor women, as well as peasant women, Afro-Colombians, blacks, raizales, palenqueras, Rom, and indigenous women, women with disabilities, and women with sexual orientations different from the heterosexual, have greater difficulty in being elected” (Departamento Administrativo de la Función Pública, 2014: 14). As such, the report recognizes the absence of women with disabilities in the Congress of the Republic and in high levels of the Judicial and Executive Branch.

Only two reports consider disability as a variable for gathering data. On the one hand, the 2015 report indicates that only two women with disabilities occupy decision-making positions in public agencies (Departamento Administrativo de la Función Pública, 2015). On the other hand, the 2016 report shows that only eleven of the 251 public entities reported having women with disabilities in decision-making positions (Departamento Administrativo de la Función Pública, 2016). In this sense, 96% of the entities indicated that they did not have women with disabilities in decision-making posts. Likewise, 248 entities reported that they did not have women with disabilities serving in any of its public offices.

Furthermore, some experts have criticized the way the government included the variable disability in the 2015 and 2016 reports. For instance, in the verification workshops, Dean Lerner, Secretary of Human Rights of the Latin American Union of the Blind, claimed that in these reports public entities used a limited conceptualization of disability[[28]](#footnote-28). Some of them even included the women in medical leave in their disability count. Thus, the reports of the Administrative Department of Public Function that did include the variable of disability present problems of systematization and validity.

The 2018 report returned to the one-dimensional approach to the monitoring of the Quota Law. It did not analyze the participation of women with disabilities in decision-making positions. In this sense, although in this document the government incorporates guidelines for the implementation of the SDGs and establishes the goal of achieving parity between men and women in the management positions of the Colombian state, it fails to consider disability in its monitoring efforts.

Finally, it is necessary to mention that the participation of women with disabilities in civil society organizations is low. In this sense, women face multiple obstacles to partake in the National and municipal disability councils[[29]](#footnote-29). Furthermore, feminist organizations often fail to include women with disabilities in their proyects and advocacy strategies. In summary, the state has failed to protect the rights and promote the participation of women with disabilities.

## 4.3. The sexual and reproductive rights of persons with disabilities

Persons with disabilities face multiple barriers to guarantee their sexual and reproductive rights. The insufficiency of educational programs, the lack of knowledge of the reproductive rights of women with disabilities, and the inadequate coverage of sexual health services, among others, are some of the factors that undermine the sexual and reproductive rights of persons with disabilities (Profamilia, 2017). The existence of a discriminatory legal framework that reinforces gender stereotypes and assumes that persons with disabilities are asexual beings who cannot exercise their right to autonomy and privacy correctly aggravates this situation of vulnerability (Comité de los Derechos de las Personas con Discapacidad, 2016).

According to Catalina Salazar Troconis, director of RECA COLOMBIA, the possibility of an unwanted pregnancy for women with disabilities tends to accentuate overprotective behaviors[[30]](#footnote-30). In this sense, schools and companies refuse to accept women with intellectual and psychosocial disabilities, arguing that they do not have the means to protect them from an unwanted pregnancy[[31]](#footnote-31). Besides, some families impose greater limitations on women and girls with disabilities for fear of being sexually abused. As highlighted by María C. Monroy and Felipe Jaramillo Ruiz (2017), women with disabilities face more significant limitations to their mobility and autonomy because of an agglomeration of perils and structures that increase the risk of violence and insecurity. In this sense, the mobility of women with disabilities becomes restricted to particular spaces and schedules.

Women with disabilities encounter multiple challenges for guaranteeing their sexual and reproductive rights. Families, schools, health professionals, and society tend to reject the erotic expressions of women with disabilities and prohibit them from having intimate relationships. Furthermore, on some occasions, women with disabilities lose custody of their children[[32]](#footnote-32).

In some cases, the logic of protection has been used to promote the forced sterilization of women with disabilities[[33]](#footnote-33). According to the Ministry of Health and Social Protection, between 2012 and 2018 (partial) there were 4,324 cases of sterilization of women with disabilities in Colombia (Coalición de los Derechos de las Personas con Discapacidad, 2019). However, in the absence of reliable data, it is not possible to establish whether women with disabilities consented to these procedures.

In 2016, the Constitutional Court ordered the Ministry of Health and Social Protection to issue a regulation to guarantee that persons with disabilities have access to adequate and sufficient information about their sexual and reproductive rights. In response to this request, Resolution 1904 of 2017 was issued, which expressly prohibited the performance of medical treatments, including sterilization procedures, without the consent of the person with a disability. However, health providers have not implemented the resolution and continue to recommend the sterilization of women with disabilities to “protect” them from the “risk” of pregnancy.

Colectiva Polimorfas, the Red de Familias, the Colombian Autism League, Asdown Colombia, PAIIS, Profamilia, and other organizations have developed projects to raise awareness among society and families about the sexual and reproductive rights of persons with disabilities. These efforts are valuable if we take into account that the National Policy on Sexuality, Sexual Rights and Reproductive Rights (2014) incorporates a medical model for addressing the sexual and reproductive rights of persons with disabilities.

The CRPD Committee has called on the Colombian government “to take legal and administrative measures to provide the necessary support to persons with disabilities to fully exercise this right and to take decisions in such areas as health, sexuality and education, while fully respecting their will and preferences” (CRPD/C/COL/CO/1/para.31). In this sense, the Colombian government must guarantee the sexual and reproductive rights of persons with disabilities.

# Conclusion

One of the purposes of the 2030 Agenda is to guarantee the rights of everyone, including persons with disabilities. Understanding and assessing the exercise of the rights of persons with disabilities in the perspective of the SDGs means renewing ways of understanding and assuming the situation of those who live this condition. This requires us to create innovative research strategies and methodological tools that allow us to monitor SDG compliance from a disability perspective. In this sense, it is essential to move towards the implementation of the CRPD together with the efforts to achieve SDGs so that persons with disabilities can fully exercise their rights.

This report materializes as a first step towards making persons with disabilities visible in the 2030 Agenda, and it seeks to encourage the Colombian government and other social actors to guarantee the exercise and enjoyment of the rights of persons with disabilities. The challenges, barriers, and obstacles outlined in this report require specific actions by government authorities. This research identifies seven fundamental obstructions that prevent persons with disabilities from being included in the actions aimed at achieving the SDGs:

1. The exclusion of persons with disabilities from Colombia’s national voluntary reviews and from the actions developed to comply with the objectives of the 2030 Agenda.
2. The disarticulation between the implementation of the SDGs and the CRPD in Colombia.
3. The precariousness of the systems of information on persons with disabilities and the lack of indicators that allow crossing the variables of disability, income, sex, gender, sexual orientation, age, race, ethnic origin, migratory status, and geographical location.
4. The deficiency of monitoring and evaluation mechanisms concerning the situation of persons with disabilities.
5. The lack of prompt and lasting actions that efficiently implement disability plans, programs, policies, and laws.
6. The high rates of illiteracy and de-schooling for persons with disabilities at different educational levels.
7. The discrimination and violence against women with disabilities and their incipient participation in political, economic and public life.

# Recommendations

We develop the following recommendations to include a disability lens in Colombia’s efforts to advance the SDGs:

1. Report the progress made towards the inclusion of people with disabilities in the national voluntary reviews of Colombia in the High-Level Political Forum.
2. Generate strategies to include persons with disabilities in the different programs and actions aimed at the development of the 2030 Agenda.
3. Articulate the principles, strategies, and indicators of the municipal and departmental development plans and the national development plan with the CRPD and with the 2030 Agenda, in order to give continuity to the policies guaranteeing the rights of persons with disabilities.
4. Promote and guarantee the participation of persons with disabilities and their organizations in the design and implementation of policies, plans, and programs aimed at advancing the 2030 Agenda in Colombia.
5. Include the variable of disability in the collection, management, and dissemination of information by public entities.
6. Incorporate the international monitoring and follow-up criteria and standards, in order to simplify typologies that allow formulating indicators according to variables of disability, income, sex, gender, sexual orientation, education, age, race, ethnic origin, migratory status, and geographic location.
7. Include and systematize the variable disability in the registration of cases of violence against women by the National Police, the Institute of Legal Medicine, the General Prosecutor’s Office, as well as by all instances of investigation and judicial processing.
8. Ensure that the National Population Census and other sociodemographic information systems include, apply and process indicators related to the situation of persons with disabilities.
9. Strengthen economically and operationally the agencies responsible for compiling information on persons with disabilities.
10. Promote and prioritize inclusive educational programs, through the flexibilization and adaptation of the admission, teaching and evaluation policies, as well as through the generation of plans to overcome the forms of segregated education.
11. Strengthen and give continuity to the policies of inclusive education, through processes that guarantee support to schools and teachers, promote reasonable adjustments, and ensure the right to education for persons with disabilities.
12. Create and promote inclusive education programs to support and strengthen the transformation of school institutions and teaching practices.
13. Guarantee the rights of women with disabilities and their participation in policies, programs, and plans aimed at protecting their rights.
14. Incorporate a disability perspective in the projects, programs, and policies of the High Presidential Council for the Equity of Women.
15. Develop empowerment programs for women with disabilities.

For civil society and organizations of persons with disabilities, we recommend the following:

1. Promote actions and processes for the appropriation of the 2030 Agenda by persons with disabilities and their organizations.
2. Introduce the 2030 Agenda in the advocacy strategies of the organizations of persons with disabilities.
3. Monitor compliance with the different SDGs in Colombia through a disability lens.
4. Press for the establishment of the Independent Mechanism according to the CRPD, Law 1618, and the 2030 Agenda in Colombia.
5. Promote in the National Disability Council and the different territorial committees the articulation of the 2030 Agenda and the CRPD.
6. Promote coordination between the disability group and the SDG Center for Latin America to generate joint actions for persons with disabilities to be included in the 2030 Agenda.

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# Annexes

## Annex 1. Targets and indicators from SDG 4

|  |
| --- |
| **SDG 4. Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all)** |
| **Target** | **Indicator** |
| 4.1. By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes. | 4.1.1 Proportion of children and young people: (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics, by sex |
| 4.2. By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre- primary education so that they are ready for primary education. | 4.2.l Proportion of children under 5 years of age who are developmentally on track in health, learning and psychosocial well-being, by sex |
| 4.2.2 Participation rate in organized learning (one year before the official primary entry age), by sex |
| 4.3. By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university | 4.3.1 Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex |
| 4.4. By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship | 4.4.1 Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill |
| 4.5. By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations. | 4.5.1 Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous people and conflict-affected as data become available) |
| 4.6. By 2030, ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy. | 4.6.1 Percentage of population in a given age group achieving at least a fixed level of proficiency in functional (a) literacy and (b) numeracy skills, by sex |
| 4.7. By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development.  | 4.7.1. Extent to which (i) global citizenship education and (ii) education for sustainable development, including gender equality and human rights, are mainstreamed at all levels in (a) national education policies (b) curricula (c) teacher education and (d) student assessment |
| 4.a. Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all. | 4.a.1. Proportion of schools with access to: (a) electricity; (b) the Internet for pedagogical purposes; (c) computers for pedagogical purposes; (d) adapted infrastructure and materials for students with disabilities; (e) basic drinking water; (f) single sex basic sanitation facilities; and (g) basic hand washing facilities (as per the Water, Sanitation and Hygiene for All (WASH) indicator definitions) |
| 4.b. By 2020, substantially expand globally the number of scholarships available to developing countries, in particular least developed countries, small island developing States and African countries, for enrolment in higher education, including vocational training and information and communications technology, technical, engineering and scientific programs, in developed countries and other developing countries. | 4.b.1 Volume of official development assistance flows for scholarships by sector and type of study |
| 4.c By 2030, substantially increase the supply of qualified teachers, including through international cooperation for teacher training in developing countries, especially least developed countries and small island developing States | 4.c.1. Proportion of teachers in: (a) pre-primary; (b) primary; (c) lower secondary; and (d) upper secondary education who have received at least the minimum organized teacher training (e.g. pedagogical training) pre-service or in-service required for teaching at the relevant level in a given country |

## Annex 2. Targets and indicators from SDG 4

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| **SDG 5. Achieve gender equality and empower all women and girls** |
| 5.1. End all forms of discrimination against all women and girls everywhere. | 5.1.1 Whether or not legal frameworks are in place to promote, enforce and monitor equality and non-discrimination on the basis of sex |
| 5.2. Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation. | 5.2.1 Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the last 12 months, by form of violence and by age group |
| 5.2.2 Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the previous 12 months, by age and place of occurrence |
| 5.3. Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation. | 5.3.1 Proportion of women aged 20-24 years who were married or in a union before age 15 and before age 18 |
| 5.3.2 Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age |
| 5.4. Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate. | 5.4.1 Proportion of time spent on unpaid domestic and care work, by sex, age and location |
| 5.5. Ensure women's full and effective participation and equal opportunities for leadership at all levels of decision-making in political, economic and public life. | 5.5.1 Proportion of seats held by women in national parliaments and local governments |
| 5.5.2 Proportion of women in managerial positions |
| 5.6. Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Program of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences. | 5.6.1 Proportion of women aged 15-49 years who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care |
| 5.6.2 Number of countries with laws and regulations that guarantee women aged 15 -49 years access to sexual and reproductive health care, information and education |
| 5.a. Undertake reforms to give women equal rights to economic resources, as well as access to ownership and control over land and other forms of property, financial services, inheritance and natural resources, in accordance with national laws.  | 5.a.1 Proportion of countries where the legal framework (including customary law) guarantees women's equal rights to land ownership and/or control  |
| 5.b. Enhance the use of enabling technology, in particular information and communications technology, to promote the empowerment of women.  | 5.b.1 Proportion of individuals who own a mobile telephone, by sex  |
| 5.c. Adopt and strengthen sound policies and enforceable legislation for the promotion of gender equality and the empowerment of all women and girls at all levels.  | 5.c.1 Proportion of countries with systems to track and make public allocations for gender equality and women’s empowerment  |

## Annex 3: Table of validation workshop assistants

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| **Name** | **Organization** |
| Adriana Pulido | Person with visual disability |
| Alejandra León | Pacto de productividad |
| Ana Irene Rodriguez Sierra | Red de Mujeres Boyacá |
| Anderson Henao | H & I (Humanity & Inclusion) |
| Arleth Cuello | Corporación FD - Sincelejo |
| Brenda Hernandez | ASDOWN COLOMBIA |
| Catalina Salazar Troconis | RECA COLOMBIA |
| Claudia Páez  | Asociación Colombiana de Bipolares |
| Claudia Zapata | Asobime– Medellín |
| DeanLermen | Human Rights Secretary - Unión Latinoamericana de Ciegos  |
| Diana Garavito | Person with physical disability |
| Dully Magnolia González Hoyos | Asociación de personas con Esquizofrenia y sus familias |
| Federico Isaza | PAIIS – Universidad de los Andes |
| Gabriel Mora | H & I (Humanity&Inclusion) |
| Gloria Nieto | ACPEF |
| Graciela Ibañez | Fundación Raudal |
| Henry Mejía | Federación Nacional de Sordos - FENASCOL |
| JesusAristizabal | Red Familias LICA - Ibagué |
| Jorge Muñoz | Consejero Nacional de Discapacidad |
| José Leal | Federación Nacional de Sordos - FENASCOL |
| Juan Camilo Celemín | Fundación Saldarriaga Concha |
| Juan Ruba | DESCLAB |
| Magda Susana Romero | Abriendo Puertas - Medellín |
| Martha Claudia Sepúlveda Castaño | Familias DOWN - Cali |
| Martha Inés Robles Escárraga | Fundown Caribe - Barranquilla |
| Maryury Medina | Fundamental Colombia |
| Mauricio Quiroz | Asociación colombiana de Bipolares |
| Natalia Moreno | Colectivas POLIFORMAS |
| Nubia Suta | Funcionaria Pública |
| Salam Gómez | Consejero Nacional de Discapacidad |

## Annex 4: Disability on the Regional Development Plan

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| **Department** | **Document** | **General goal in disability** | **Disability references** |
| Amazonas | Departmental Development Plan 2016-2019 *“Gestión y ejecución para el bienestar, la conservación ambiental y la paz”* | It establishes goals to promote the inclusion and guarantee the rights of people with disability, as a minority population in the Department. The lines of action focus mainly on access to health and rehabilitation, the strengthening of the RLCPD, the coverage of information and communication technology education and training and the link to the labor market. | 69 |
| Antioquia | Development Plan of Antioquia *"Pensando en Grande 2016-2019"* | Through the implementation of the Public Policy on Disability and the extension of coverage of the RLCPD, the Department proposes to guarantee health care, ensure inclusive education and promote participation in sports activities and cultural settings for PwD. | 47 |
| Arauca | Development Plan for the Department of Arauca *“Humanizando el Desarrollo”* 2016-2019 | Based on a rights approach and the principle of equality and non-discrimination, actions in health and comprehensive care, education and training for work, housing, culture, recreation and sport for PWD are included as part of the program for the priority population in the department. | 29 |
| Atlántico | Development Plan 2016- 2019 *“Atlántico Líder”* | The department seeks to guarantee the effective exercise of the rights of the population in conditions of vulnerability. So it seeks that the PwD access goods and services under equal conditions. In particular, goals are formulated in education, sports, employability, infrastructure and accessibility. | 47 |
| Bogotá | Economic, Social, Environmental and Public Works Development Plan for Bogotá D.C. 2016-2020 *“Bogotá Mejor para Todos”* | Strategies were formulated for the comprehensive care of children, youth and adolescents with disabilities, conditions for the generation of employment, adequate accessibility and mobility of the PwD in the district. | 7 |
| Bolívar | Development Plan 2016-2019 *“Bolívar Sí Avanza, Gobierno de Resultados”* | Within the framework of the Public Policy for people with disabilities of the Department, it is sought to guarantee the rights of the PwD through the implementation of the Community-Based Rehabilitation Strategy (CBR), labor inclusion in the public and private sector, the promotion of sports and accessibility to sports and recreational venues and the formation and functioning of the Disability Committee at the municipal and departmental levels. | 96 |
| Boyacá | Departmental Development Plan of Boyaca *“Creemos en Boyacá, tierra de Paz y Libertad”* 2016 - 2019 | The Department seeks to guarantee the inclusion of PwD as a population group of special interest. In this sense, the population with disabilities has been integrated transversally in sectors such as health, education, ICT, productivity and agricultural development, infrastructure, sports and recreation, culture and citizen participation. Additionally, actions are directed to families and caregivers of PwD. | 101 |
| Caldas | Departmental Development Plan 2016- 2019 *“Caldas Territorio de Oportunidades”* | Based on the Public Policy on Disability of the Department, actions are established with a differential focus for the PwD regarding health care routes, the implementation of productive projects, the improvement of the quality of education and the promotion of sports. | 19 |
| Caquetá | Departmental Development Plan *“Con Usted Hacemos más por el Caquetá”* 2016-2019 | It establishes actions and goals to achieve equity in access to services for vulnerable population groups. In this sense, programs are formulated for health care and the prevention of disability, labor linkage, ICT training, sports practice and the promotion of recreational spaces aimed at PwD. | 43 |
| Casanare | Departmental Development Plan 2016-2019 *“Casanare con Paso Firme”* | From a rights-based approach, we seek to generate actions that favor the social inclusion of PwD in the labor and educational sphere; in sport, recreation and culture scenarios; and through accessibility and food security programs. | 21 |
| Cauca | Development Plan 2016-2019 *“Cauca Territorio de Paz”* | Formulated from a population perspective, strategies aimed at people with diverse abilities and disabilities are included around ensuring comprehensive care, improving the quality of education and fostering inclusive school environments, promoting income generation and encouraging participation in cultural activities. It is considered important to update the RLCPD and generate information about disability. | 48 |
| Cesar | Development Plan Cesar Department 2016-2019 *“El camino del desarrollo y la paz”* | Based on a population approach, goals are set for the social, labor and educational inclusion of PwD in the Department through community-based rehabilitation processes, housing solutions, training for employment, product projects and social innovation initiatives, participation in recreational, cultural and sports activities. | 116 |
| Chocó | Departmental Development Plan of Chocó 2016-2019 | Strategies were formulated to reduce gaps in accessibility and access to information and communications in order to guarantee adaptation to the social environment of PwD. Likewise, it seeks to improve the quality of life of the population by reducing morbidity and mortality rates and avoiding disabilities. | 23 |
| Córdoba | Development Plan *“Unidos por Córdoba 2016-2019”* | Based on a differential approach, the construction and implementation of a Departmental Public Policy on Disability and the establishment of Municipal Disability Technical Committees for the implementation of strategies in educational inclusion, health care and social protection, labor inclusion, participation in cultural, sports and recreational activities, equality and non-discrimination against people with disabilities. | 203 |
| Cundinamarca | Departmental Development Plan 2016-2020 *“Unidos Podemos Más”* | An inclusion route is established to ensure that PwD have access to education, labor, social, cultural and citizen participation, sports, health, nutrition, care and protection programs. The above from a differential approach and under the principle of equality and non-discrimination against PwD, especially women with disabilities. | 82 |
| Guainía | Departmental Development Plan *“Vamos Pa’ Lante Guainía”* 2016-2019 | Formulates programs for the social and productive inclusion of the vulnerable population of the Department with goals for the expansion of health coverage, labor training and the development of productive processes for the generation of income, improvement in educational attention and accessibility, the participation in sporting and artistic cultural meetings of the PwD. | 49 |
| Guaviare | Departmental Development Plan 2016-2019 *“Guaviare: Paz y Desarrollo Social”* | Based on the principle of equality and non-discrimination and guarantee of rights, it seeks to comply with the goals in coverage of the education system, labor training, citizen participation and comprehensive health care with a differential approach for the population of special protection. | 169 |
| Huila | Departmental Development Plan *“El camino es la educación”* 2016-2019 | It establishes actions to improve the quality of the processes of education, health, sports, recreation and social inclusion with a differential focus. Formulates goals to expand and strengthen the RLCPD in the Department. | 77 |
| La Guajira | Development Plan 2016-2019 *“Oportunidad para Todos y Propósito de País”* | Through the formulation and implementation of a Departmental Public Policy and the strengthening of the characterization and information on disability, the Department seeks to guarantee access to health, education, work and culture services with a differential approach. Additionally, it formulates goals around the reduction of avoidable mortality and disability. | 120 |
| Magdalena | Development Plan 2016- 2019 *“Magdalena social es la vía”* | Development of initiatives for differential management of vulnerable populations from a rights-based approach, to guarantee the social and economic inclusion of PwD and access to health, education, work and sports goods and services. | 41 |
| Meta | Departmental Development Plan 2016- 2019 *“El META, Tierra de Oportunidades, Inclusión, Reconciliación y Equidad”* | The Department seeks inclusion and full enjoyment of the rights of the population with disabilities by promoting development opportunities in education for students with disabilities, exceptional abilities and talents, access to technology, promotion of sports and recreation activities, and implementation of programs of integral attention. | 35 |
| Nariño | Participatory Departmental Development Plan *“Nariño, Corazón del Mundo”* 2016- 2019 | Through the implementation, monitoring and evaluation of the Departmental Public Policy on Disability and Social Inclusion and the strengthening of the RLCPD, it seeks to guarantee the rights of the PwD to an inclusive education and better programs of attention in health and nutrition to ensure their inclusion Social. | 52 |
| Norte de Santander | Development Plan for Norte de Santander 2016-2019 *“Un Norte Productivo para Todos”* | Clear goals are established to guarantee comprehensive care at the labor, educational, health, culture and sports levels of PwD, as well as access to social services and adequate infrastructure. Improvements are made to expand the coverage of the RLCPD. | 77 |
| Putumayo | Departmental Development Plan 2016-2019 *“Putumayo, Territorio de Paz, Biodiverso y Ancestral. Juntos Podemos Transformar”* | Through the formulation and implementation of a Departmental Public Policy on Disability seeks to ensure the inclusion of PwD in the Department and meet the goals around health care and the exercise of sexual and reproductive rights, citizen participation, labor inclusion and participation in sports and recreation spaces. | 39 |
| Quindío | Departmental Development Plan 2016- 2019 *“En defensa del bien común”* | From a focus on guaranteeing and promoting the rights of vulnerable and differentiated populations, strategies are formulated to improve access to education, inclusive work, comprehensive quality care, participation in political and public life, transportation and leisure-sports activities | 51 |
| Risaralda | Development Plan 2016- 2019 *“Risaralda: Verde y Emprendedora”* | It establishes goals for access to education, health, training and training services for women in disability status, social, cultural and labor inclusion of PwD within the framework of the Department's Public Policy. | 27 |
| San Andrés, Providencia y Santa Catalina | Development Plan 2016- 2019 *“Los que soñamos somos más”* | From a rights perspective and a cross-cutting perspective, the aim is to guarantee the access of the PwD to basic quality services by formulating actions to improve health care, coverage in education and use of ICT, generation of employment, adaptations in mobility and opportunities on the sport. | 90 |
| Santander | Departmental Development Plan 2016-2019 *“Nos Une Santander”* | Through an update of the Departmental Public Policy, it is proposed to strengthen the incidence in education and training, labor inclusion, specialized health care and mobility for the vulnerable population. In parallel, strategies have been established under the differential approach that includes PwD transversally in the Department's goals for the term. | 71 |
| Sucre | Development Plan 2016-2019 *“Sucre progresa en paz”* | From a population identity approach, programs and projects are focused on the development of PwD in the educational, cultural, labor and social inclusion areas. | 24 |
| Tolima | Development Plan 2016-2019 *“Soluciones que transforman”* | It formulates strategies for the inclusion and the integral development of the PwD, with specific goals in the areas of health, culture, sport and ICT training. | 27 |
| Valle del Cauca | Development Plan of the Valle del Cauca Department 2016-2019 *“El Valle esta en vos”* | Through the formulation and implementation of a Departmental Public Policy on Disability, added to the actions formulated in health, work, education and mobility, social inclusion and the development of PwD in the Department are sought. | 41 |
| Vaupés | Departmental Development Plan 2016-2019 *“Vaupés, un compromiso de todos”* | Application of the differential approach with the disabled population for comprehensive health care and rehabilitation, access to housing, use of ICT, participation in sports and cultural venues. | 111 |
| Vichada | Development Plan 2016-2019 *“Construyamos Vichada”* | It establishes strategies to guarantee the integral attention of people with disabilities in education and teacher training, health care and citizen participation. | 31 |

## Annex 5: Types of disability in RLCPD and SIMAT

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| --- | --- |
| **Mechanism** | **Type of disability** |
| Registro para la Localización y Caracterización de las Personas con Discapacidad (RLCPD) | Physical disability |
| Hearing impairment |
| Visual disability |
| Deaf blindness |
| Intellectual disability |
| Mental disability |
| Multiple disability |
| Sistema Integrado de Matrícula (SIMAT) | Sensory visual – Low vision |
| Sensory visual – Blindness |
| Autism Spectrum Disorder  |
| Intellectual disability – Cognitive |
| Multiple disability |
| Auditory sensorial – User of LSC |
| Sensorial auditory – User of Castilian  |
| Deaf blindness |
| Physical limitation |
| Systemic |
| Psychosocial |
| Voice and speech |
| Other disability |

1. The government’s SDGs’ indicators can be found in the following hyperlink: <https://ods.gov.co/> Access date: February 3, 2019. [↑](#footnote-ref-1)
2. Participation of Salam Gómez y Nubia Suta in the workshop [↑](#footnote-ref-2)
3. Participation of José Leal in the workshop [↑](#footnote-ref-3)
4. Participation of Dean Lermen [↑](#footnote-ref-4)
5. Participation of Natalia Moreno in the workshop. [↑](#footnote-ref-5)
6. Participation of Mónica Cortés y Betty Roncancio in the workshops. [↑](#footnote-ref-6)
7. Participation of Diana Garavito in the workshops. [↑](#footnote-ref-7)
8. Participation of Nubia Suta in the workshops. [↑](#footnote-ref-8)
9. Participation of Alejandra León in the workshops. [↑](#footnote-ref-9)
10. Participation of Diana Garavito in the workshops. [↑](#footnote-ref-10)
11. Participation of José Leal and Henry Mejía at the workshops. [↑](#footnote-ref-11)
12. Participation of Jorge Muñoz at the workshops. [↑](#footnote-ref-12)
13. Participation of Betty Roncancio and Mónica Cortés at the workshops. [↑](#footnote-ref-13)
14. Participation of Jorge Muñoz y Anderson Henao at the workshops. [↑](#footnote-ref-14)
15. Participation of José Leal at the workshops. [↑](#footnote-ref-15)
16. Participation of Alejandra León at the workshops. [↑](#footnote-ref-16)
17. Participation of Alejandra León at the workshops. [↑](#footnote-ref-17)
18. Participation of Gloria Nieto at the workshops. [↑](#footnote-ref-18)
19. Participation of Diana Garavito y Nubia Suta at the workshops. [↑](#footnote-ref-19)
20. Participation of Nubia Suta, Anderson Henao, and Salam Gómez at the workshops. [↑](#footnote-ref-20)
21. Participation of Salam Gómez at the workshops. [↑](#footnote-ref-21)
22. Participation of Alejandra León at the workshops. [↑](#footnote-ref-22)
23. Participation of Dean Lermen at the workshops. [↑](#footnote-ref-23)
24. Participation of Anderson Henao at the workshops. [↑](#footnote-ref-24)
25. Participation of Anderson Henao at the workshops. [↑](#footnote-ref-25)
26. Participation of Adriana Pulido at the workshops. [↑](#footnote-ref-26)
27. Participation at the workshops. [↑](#footnote-ref-27)
28. Participation of Dean Lerner at the workshops. [↑](#footnote-ref-28)
29. Participation of Mónica Cortés and Dean Lermen at the workshops. [↑](#footnote-ref-29)
30. Participation of Catalina Salazar Troconis at the workshops. [↑](#footnote-ref-30)
31. Participation of Diana Garavito and Gloria Nieto at the workshops. [↑](#footnote-ref-31)
32. Participation of Betty Roncancio at the workshops. [↑](#footnote-ref-32)
33. For example, Claudia Palacios (2017) argues that sterilizing girls with intellectual disabilities is a way to guarantee the rights of mothers for it “prevents a potential worsening of their situation”. [↑](#footnote-ref-33)