National institutional structures for the Convention on the Rights of Persons with Disabilities: Exploring the Implementation of Article 33 in the Arab Region

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**GLOSSARY OF TERMS**

<table>
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<tr>
<th>Term</th>
<th>Definition</th>
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<tr>
<td><strong>Advisory body:</strong></td>
<td>Domestic entity that provides advice and recommendations to the government on disability-related issues.</td>
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<td><strong>Committee on the Rights of Persons with Disabilities (CRPD Committee):</strong></td>
<td>International human rights treaty body tasked with monitoring CRPD implementation by States Parties.</td>
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<td><strong>Coordination mechanism:</strong></td>
<td>National government body that is designated or established under CRPD Article 33 (1) to coordinate government efforts to implement the Convention.</td>
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<tr>
<td><strong>Focal point:</strong></td>
<td>National government entity that is designated or established under CRPD Article 33 (1) to maintain overall responsibility for CRPD implementation.</td>
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<tr>
<td><strong>Independent monitoring framework:</strong></td>
<td>National framework independent from the Executive Branch that is designated or established under CRPD Article 33 (2) to promote, protect and monitor CRPD implementation. The framework must have one or more independent mechanism(s) that complies with the Paris Principles.</td>
</tr>
<tr>
<td><strong>National human rights institution:</strong></td>
<td>State body with a constitutional and/or legislative mandate to protect and promote human rights.</td>
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<tr>
<td><strong>Organizations of persons with disabilities (OPDs):</strong></td>
<td>Representative civil society organizations that are led and controlled by persons with disabilities and aim to collectively act, express, promote, pursue and/or defend a field of common interest.</td>
</tr>
<tr>
<td><strong>Paris Principles:</strong></td>
<td>Minimum standard guidelines for the status and functioning of national human rights institutions.</td>
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In 2006, the United Nations General Assembly adopted the Convention on the Rights of Persons with Disabilities (hereafter referred to as the CRPD or the Convention), representing the first comprehensive human rights treaty of the 21st century. The Convention is a wide-ranging agreement which sets out the main principles to guide public policy processes, as well as government obligations in diverse areas, from access to justice and independent living to education and health care. Ten years on, the CRPD enjoys widespread support, evidenced by the 178 parties who have formally confirmed, acceded to or ratified the convention to date.

The CRPD led to a series of unprecedented changes in the disability field. First, it codified the social and human-rights based model of disability, marking a clear conceptual shift from the traditional medical approach. Under the latter model, the focus had been exclusively on people’s impairments, and persons with disabilities were considered objects of charity or as requiring special care. Following the formalization of the social and human-rights based model, disability is understood as the interaction between people’s impairments and their environments, where a person’s condition is one among many factors causing a disability. Further, the right to equal social, economic and physical accessibility and inclusion should be promoted and protected.

Second, the CRPD set a new standard for participation. Never before had civil society been so highly involved in the drafting of a human rights treaty. As a result of this engagement, the CRPD contains several articles underscoring States Parties’ obligations to ensure the participation of persons with disabilities and their representative organizations in policy-and decision-making processes. The CRPD negotiation process also led to the development of the slogan ‘Nothing about us without us’, which today has become a watchword for the global disability movement and for disability policymaking in general.

A third and very notable change instituted by the Convention relates to the modalities for its implementation and monitoring. In other words, the CRPD not only details what States Parties should do in relation to the rights of persons with disabilities but also how they should go about it. Specifically, Article 33 of the CRPD directs States Parties to: (a) designate focal points, and consider establishing a coordination mechanism for matters relating to CRPD implementation; (b) designate or establish a framework to promote, protect and monitor CRPD implementation; and (c) ensure the full participation of civil society, particularly persons with disabilities, in monitoring processes. An emphasis on process, as seen most clearly in Article 33, is a defining aspect of the Convention. The frameworks created under Article 33 are also relevant to the Convention’s Optional Protocol, which contains guidelines for bringing complaints to the attention of the Committee and for launching inquiries into violations made by State Parties.

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1 This paper was written by Alexandra Heinsjø Jackson and Angela Zettler, Associate Social Affairs Officers, Inclusive Social Development Section (ISDS), Social Development Division (SDD), with substantive additions made by Madeleine Cravens and Zeina Azar, based on research and an initial draft prepared by Soumya Shastri. It was prepared under the direct supervision of Gisela Nauk, Chief of ISDS. The views expressed in this report are those of the authors and do not necessarily reflect the views of the United Nations.

2 E.g., non-discrimination and respect for inherent dignity.

3 As of 20 May 2019.


The inclusion of Article 33 is significant for many reasons. For one, international treaty bodies to whom States Parties report tend to be far removed from national realities on the ground, and often have limited human and financial resources.\(^6\) This is especially the case for the Committee on the Rights of Persons with Disabilities (hereafter referred to as the CRPD Committee), which faces a monumental task in monitoring such a high number of countries that ratified the Convention in very quick succession. National institutions thus play an important role in filling the gap between the international and country levels. Secondly, the CRPD is a wide-reaching and cross-cutting document, requiring interventions from most if not all government agencies. Solid institutional frameworks thus help to ensure that implementation and monitoring take place in an effective and coherent manner, rather than through fragmented or isolated measures, which have dominated disability policymaking in the past.\(^7\) Finally, Article 33 is quite groundbreaking as it is the first time an international human rights treaty includes directives on domestic implementation and monitoring frameworks, with the partial exception of the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (OP-CAT).\(^8\)

Due to the unprecedented nature of Article 33, States Parties find themselves in unexplored waters when translating its provisions from paper into practice. Policymakers and experts are still unpacking the article and debating its concrete obligations on the ground. Meanwhile, governments are looking for innovative ways to adapt the requirements of Article 33 to their specific state structures and national contexts, with few guidelines or past experiences to draw from. With the adoption of the 2030 Agenda for Sustainable Development in 2015, States Parties must now also ensure that their institutional frameworks are fit-for-purpose to support the inclusion of persons with disabilities as they work to achieve the Sustainable Development Goals (SDGs). Taken altogether, the implementation of Article 33 represents an essential but challenging task.

This paper aims to shed light on this complex issue by contextualizing the implementation of Article 33 in the Arab region. Using academic literature, UN reports, States Parties’ reports to the CRPD Committee and data collected from disability experts working in Arab governments, it will clarify the requirements and options available to States when developing or strengthening their institutional frameworks and explore how these fit in the Arab regional context. It will also analyze the current institutional setups of Arab governments and look into ways how governments can further improve these setups in line with Article 33.

This study is divided into four sections. The first reviews the three main provisions of Article 33 by outlining the structure, composition and functions of the main institutional frameworks for implementing and monitoring the Convention. Where possible, examples from other countries around the globe are provided to illustrate the implementation of Article 33 in practice. The second section reviews the current state of implementation of Article 33 in the Arab region. The authors use information collected from a questionnaire sent to member States of the Economic and Social Commission for Western Asia (ESCWA) to illustrate key regional trends regarding Arab countries’ institutional setups in relation to Article 33. Finally, the paper outlines potential opportunities and challenges for Arab States in

\(^6\) de Beco and Hoefmans, 2013, p. 19.
\(^7\) De Beco and Hoefmans, 2013, p. 20.
\(^8\) OP-CAT requires States Parties to establish national preventive mechanisms, but the scope of these mechanisms are more limited in comparison to the frameworks set out in CRPD Article 33. See: Thematic Study by the Office of the High Commissioner for Human Rights on the structure and role of national mechanisms for the implementation and monitoring of the Convention on the Rights of Persons with Disabilities (A/HRC/13/29), p. 5.
implementing Article 33 and concludes with some recommendations for further improving government compliance with the Convention.

ARTICLE 33

Article 33 provides three specific requirements for Governments as they implement and monitor the Convention. Article 33 (1) calls for the designation of focal points and coordination mechanisms for the implementation of the Convention. Article 33 (2) addresses the creation of independent monitoring frameworks. Article 33 (3) requires the broad involvement of civil society in monitoring efforts. Taken together, these components aim to address gaps between the Convention’s goals and its implementation, ensuring that the international human rights standards it sets forth are met across varying domestic political contexts.

ARTICLE 33 (1): INSTITUTIONAL FRAMEWORKS FOR CRPD IMPLEMENTATION

FOCAL POINTS

Article 33 (1)

States Parties, in accordance with their system of organization, shall designate one or more focal points within government for matters relating to the implementation of the present Convention...

Article 33(1) requires governments to designate at least one focal point to maintain overall responsibility for the country’s implementation of the Convention. In other words, the focal point represents the central actor within government to ensure the full, effective and coordinated implementation of the Convention’s various provisions.

Selecting focal points

States Parties are recommended to designate their focal points at the highest level of government, such that they have sufficient authority and political clout to effectively coordinate and ensure CRPD implementation.\(^9\) In many countries, focal points were already established under the UN Standard Rules on Equalization of Opportunities for Persons with Disabilities adopted in 1993,\(^10\) in which case States Parties were invited to redesign their existing focal point structures rather than to create new ones.

\(^9\)Thematic Study by the Office of the High Commissioner for Human Rights on the structure and role of national mechanisms for the implementation and monitoring of the Convention on the Rights of Persons with Disabilities (A/HRC/13/29), p. 7; UN Department of Economic and Social Affairs (DESA) et al., 2007, p. 84; Mental Disability Advocacy Center, 2011, p. 28; and de Beco and Hoefmans, 2013, p. 24.

States Parties have significant freedom in selecting which person or entity will be their focal point(s): “Focal points could be a section or a person within a ministry or cluster of ministries, an institution such as a disability commission, or a particular ministry, such as a ministry for human rights or a ministry for persons with disabilities, or a combination of the three.” Ministries of social affairs are most commonly selected as focal points, which is in part a reflection of the expertise of these ministries in relation to disability issues. They also often maintain strong relationships with relevant institutions and civil society organizations and have usually led the CRPD ratification process at the national level.

According to some experts, ministries with responsibility for justice and human rights may represent more appropriate CRPD focal points. From this perspective, the designation of ministries of social affairs reflects a more traditional, care-based approach to disability, whereas ministries of justice and human rights represent a clearer reflection of the CRPD’s broader human rights focus. Despite this recommendation, however, “not a single State has […] designated its ministry of justice [as focal point], not even in addition to its ministry of social affairs.”

Another option available to States Parties is to assign the focal point role to the Office of the President or Prime Minister, or to establish a State Secretary portfolio on disability. This option has the added advantages of both seniority and centrality within the government, making it particularly well-placed to coordinate government actions. In these cases, sufficient human resources and technical expertise are needed to ensure that the focal point is well-equipped to fulfill all of the requirements outlined in Article 33 (1).

In cases where only one focal point is designated, their roles and responsibilities are quite clear. However, some States Parties choose to nominate several focal points, which can be distributed horizontally (i.e. across government bodies and institutions), vertically (i.e. at regional and local levels) or both. Lithuania, for example, designated ten different focal points across its various ministries. Austria has focal points in all of its federal nine states, in addition to its national-level focal point (the Federal Ministry of Labour, Social Affairs and Consumer Protection). These types of multi-focal point set-ups can be advantageous as they enable States to pool the mandates, resources and expertise of different actors. At the same time, a clear division of labour and responsibilities is essential, which can be achieved through, for example, the designation of a lead focal point that ensures general coordination, oversight and promotion with respect to CRPD implementation.

Functions

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11 DESA et al., 2007, p. 94.
12 De Beco, 2015, p. 16.
15 De Beco, 2015, p. 17.
Under their overall mission of spearheading national CRPD implementation, the work of focal points can cover a variety of different functions (see Box 1). Focal points are responsible for coordinating the government’s overall implementation of the CRPD, including the actions of relevant ministries. Given the weight of this task, however, many governments choose to appoint a coordination mechanism as well, which will be explored in depth in the next section.

While their exact functions will differ between countries, it is advisable that focal points (especially lead focal points) do not engage directly in service provision:

“the mandate of the focal point should clearly focus on developing and coordinating a coherent national policy on the Convention. As such, the focal point should promote, guide, inform and advise government on matters related to the implementation of the Convention but arguably not implement it by delivering disability support services.”

In other words, focal points should avoid blurring their mandates and leave service provision up to implementing ministries. However, this line obviously becomes very difficult to draw where a country’s focal point is de facto an implementing ministry, such as a ministry of social affairs. In these cases, States must devise strategies to clarify a division of labour, such that the focal point can effectively execute its mandate.

Box 1. List of potential functions for Article 33 (1) focal points

1. Serve as the CRPD contact point for relevant actors (government ministries and departments; local and regional government bodies; persons with disabilities and their representative organizations; other civil society organizations; frameworks established under Article 33 (2) of the Convention; and international organizations and bodies such as the CRPD Committee).

2. Coordinate human rights and disability activities of various ministries and departments and at different levels of Government (national, regional, local, etc.).

3. Build capacities within the Government on disability-related issues and CRPD implementation.

4. Advise government officials on the development of policies, laws, programmes and projects with respect to their impact on persons with disabilities.

5. Revise strategies and policies to ensure that the rights of persons with disabilities are respected.

6. Draft, revise or amend relevant legislation.

7. Raise awareness about the CRPD and its Optional Protocol within the Government and among the public.

8. Ensure that the CRPD and its Optional Protocol are translated into local languages and issued in accessible formats.

9. Establish an action plan for ratifying and/or implementing the CRPD and monitor the implementation of such an action plan.

10. Coordinate the preparation of the State’s initial and periodic reports to the CRPD Committee.

11. Ensure and coordinate the collection of data and statistics.

12. Ensure the participation of persons with disabilities in the development of policies and laws that affect them, including by establishing a permanent discussion or consultation forum.

13. Promote the participation of persons with disabilities in civil society and encourage the creation of organizations of persons with disabilities.

Compiled by the author based on: DESA et al., 2007, pp. 95-96; Mental Disability Advocacy Center, 2011, p. 26.

COORDINATION MECHANISMS

Article 33 (1)

States Parties [...] shall give due consideration to the establishment or designation of a coordination mechanism within government to facilitate related action in different sectors and at different levels.

The second part of Article 33 (1) requests States Parties to consider setting up a coordination mechanism to facilitate CRPD implementation. While not a requirement, this provision can make a significant contribution towards mainstreaming disability across government institutions and ensuring a coordinated and coherent approach to CRPD implementation. As with the focal points, Article 33 does not prescribe the composition or mandate of coordination mechanisms, so they may take many different forms and have many different functions.

Structure and composition

Coordination mechanisms are often conceived of as councils or committees, composed of representatives of various ministries and other government bodies. In some cases, representatives of organizations of persons with disabilities (OPDs) and other civil society organizations are also members of the mechanism. Coordination mechanisms often have a secretariat, which in many instances is located in ministries of social affairs. A number of coordination mechanisms have sub-committees that coordinate CRPD efforts either in certain thematic areas or at the state, provincial or regional levels. For example, this is the case in Mauritius, where the National Committee on the Implementation and Monitoring of the Convention has a number of sub-committees that focus on issues such as education, training, employment and accessibility.

Ideally, coordination mechanisms should have wide ministerial representation, including not only those more traditionally linked to disability (such as ministries of social affairs, education and health), but also others that play a major role in public policymaking (like ministries of finance, planning and culture). It is equally crucial that representatives appointed to the coordination mechanism have sufficient technical expertise on disability issues, are of high enough level to promote change within their respective ministries and have some form of continuous appointment to the mechanism. These conditions are especially applicable to the chair of the coordination mechanism, given that they must actively coordinate the work of the coordination mechanism and the actions of various ministries.

Linking focal points and coordination mechanisms

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20 De Beco, 2015, p. 15.
22 Initial Report of Mauritius on the Implementation of the CRPD (CRPD/C/MUS/1), p. 50
One major question left open by Article 33 (1) relates to the relationship between focal points and coordination mechanisms. While the details vary between countries, States have three broad options in this regard. First, coordination mechanisms and lead focal points can be the same entity (United Kingdom\textsuperscript{23}, Italy\textsuperscript{24}). Second, the two mechanisms can be inter-related; for example, the focal point may chair a coordination mechanism (Denmark\textsuperscript{25}) or a focal point may serve on a country’s coordination mechanism (Thailand\textsuperscript{26}). Finally, some countries may choose to keep the lead focal point and coordination mechanism separate, splitting responsibilities and tasks between the two (Germany\textsuperscript{27}).

Functions

The tasks attributed to a given coordination mechanism will, to a certain extent, depend on its relationship to the lead focal point. If the coordination mechanism is also the country’s lead focal point, then the responsibilities will be combined. While such a centralization of tasks has its advantages, this set-up means that the coordination mechanism will have responsibility for an extensive mandate, which in turn requires significant human, technical and financial resources. On the other hand, if the coordination mechanism and lead focal point are inter-related or separate, States are able to divide the mandates between the two. In these cases, lead focal points act as the “brain” by focusing more on setting and driving the disability policy agenda, while the coordination mechanism acts as the “body” by ensuring that government ministries have a coordinated and coherent approach to CRPD implementation. As stated by de Beco and Hoefmans:

“...in State systems where, overall coordination is not attributed to a lead focal point, a distinct coordination mechanism would not take part in the actual development of disability rights policies and may therefore easily act as a neutral platform to unite the various policy-making factions...The distinction is subtle but important in order to safeguard a clear distinction in roles of the various CRPD mechanisms.”\textsuperscript{28}

Even where there is a clear separation of tasks between the lead focal point and coordination mechanism, it is essential that they have solid channels for cooperation. In particular, the two should work closely together in the preparation of the State’s initial and periodic reports to the CRPD Committee, as well as in other areas such as the collection of data and statistics.

INSTITUTIONAL FRAMEWORKS FOR CRPD PROMOTION, PROTECTION AND MONITORING

INDEPENDENT MONITORING FRAMEWORKS

\textsuperscript{24}Ferri, 2015.
\textsuperscript{25}Initial Report of Denmark on the Implementation of the CRPD (CRPD/C/DNK/1), p. 52.
\textsuperscript{26}Replies of Thailand to the list of issues in relation to the initial report (CRPD/C/THA/Q/Add.1), p.19.
\textsuperscript{27}Initial Report of Germany on the Implementation of the CRPD (CRPD/C/DEU/1), p. 61.
**Article 33 (2)**

*States Parties shall, in accordance with their legal and administrative systems, maintain, strengthen, designate or establish within the State Party, a framework, including one or more independent mechanisms, as appropriate, to promote, protect and monitor implementation of the present Convention. When designating or establishing such a mechanism, States Parties shall take into account the principles relating to the status and functioning of national institutions for protection and promotion of human rights.*

Article 33 (2) requires State Parties to designate or establish, if not already existing, a framework to promote, protect and monitor the implementation of the Convention. For the sake of brevity, this paper uses the term ‘independent monitoring framework’, in line with the language employed by the CRPD Committee.29 These frameworks should be separate from the focal point appointed under Article 33 (1) – in other words, the focal point or coordination mechanism cannot be assigned to act as the independent monitoring framework.30 Article 33 (2) also stipulates that monitoring frameworks must include one or more mechanisms that satisfy the Paris Principles’ standards and thus are entirely independent of the work of Governments, most commonly national human rights institutions (NHRIs). NHRIs and similar institutions are a critical aspect of Article 33 (2) frameworks: while independent monitoring frameworks may involve bodies with close ties to Governments in their work, such as bodies concerned with statistics or policy advisory, the actual act of monitoring should be vested in a mechanism that is compliant with the Paris Principles. More largely, the mandated inclusion of NHRIs in independent monitoring frameworks is central to the advancement of the human-rights based model of disability the Convention seeks to further.31

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**Box 2. The Paris Principles**

Adopted by the UN General Assembly in 1993, the Paris Principles are a set of minimum recommendations relating to the status and functioning of national human rights institutions (NHRIs). As of 6 May 2017, there were 121 internationally recognized NHRIs, of which 78 were officially considered to be in full compliance with the Paris Principles.32 Applying the Paris Principles to the implementation of CRPD Article 33 (2) means that at least one of the mechanisms in the independent monitoring framework must:

- Be **independent** of the Government, with such independence guaranteed in the country’s legal or constitutional text.
- Be **pluralistic** in its composition, including non-governmental organizations (NGOs) such as OPDs, trade unions, social and professional associations, universities, parliaments and others. In order to ensure independence, government departments should only participate in an advisory capacity.

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32According to the Global Alliance of National Human Rights Institutions (GANHRI), in the Middle East and North Africa, fully compliant NHRIs are located in Egypt, Jordan, Mauritania, Morocco, Qatar and the State of Palestine.
- Have as broad a mandate as possible, which includes a range of responsibilities such as reporting to the Government on human rights matters, ensuring harmonization of national laws, regulations and practices with the CRPD, and cooperating with relevant international, regional and national bodies.

- Have adequate powers of investigation, with the capacity to hear complaints and petitions, and to transmit them to the competent authorities.

- Be characterized by regular and effective functioning, including regular meetings and consultation with other relevant bodies.

- Be adequately funded and not subject to financial control that might affect its independence.

- Be accessible to the general public, and in the context of the CRPD, especially to persons with disabilities and their representative organizations.


Functions

Independent monitoring frameworks have specific responsibilities under each of the three main areas of Article 33 (2): promotion, protection and monitoring. Promotion activities relate mainly to awareness-raising, training and dissemination of information related to the CRPD. Protection refers to responsibilities through quasi-judicial powers, such as handling complaints regarding CRPD violations, providing mediation services and supporting legal processes including the provision of assistance to persons with disabilities before the courts. Monitoring involves reviewing the State Party’s legal and practical compliance with CRPD obligations, as well as conducting inquiries and submitting reports and recommendations to State authorities.  

Independent monitoring frameworks also play a particularly important role vis-à-vis the CRPD Committee (see Box 3).

Box 3. Role of independent monitoring frameworks in the proceedings of the CRPD Committee

Independent monitoring frameworks play an important role in facilitating the work of the CRPD Committee. While the Convention itself does not include specific instructions for their interaction, the CRPD Committee recently released a set of draft guidelines that define the major characteristics of independent monitoring frameworks and outline how the frameworks can participate in the work of the Committee. According to these guidelines, some of the responsibilities of independent monitoring frameworks in the context of the CRPD Committee’s work include:

- Raising awareness about States’ obligations under the CRPD, including reporting obligations.

- Encouraging timely reporting to the CRPD Committee.

- Contributing to the drafting of initial and periodic reports to the CRPD Committee through, inter alia, encouraging States to ensure a transparent and participatory drafting process; disseminating information among national stakeholders; informing civil society organizations, including OPDs, of their opportunities to participate in the official drafting process; making data and research available to stakeholders in the reporting process; and providing written inputs if they consider it appropriate.

▪ Submitting alternative reports to the CRPD Committee and supporting OPDs in the preparations and submission of their own alternative reports.
▪ Contributing to the preparation of the CRPD Committee’s list of issues, and submitting independent written contributions commenting on States Parties’ replies to lists of issues.
▪ Participating in the dialogue between the CRPD Committee and the State Party delegations, including by making opening and closing statements.
▪ Translating and disseminating the concluding observations of the Committee in accessible formats.
▪ Contributing to the CRPD Committee’s follow-up procedures.
▪ Providing the Committee with written submissions or oral statements in cases in which the Committee chooses to investigate a State Party that has not reported.
▪ Monitoring States Parties’ responses to allegations of reprisals against individuals, groups, or OPDs that have interacted with the Committee, and support alleged victims of reprisals.
▪ Providing assistance to persons with disabilities and/or their relevant organizations seeking to bring a complaint to the Committee (applicable in States that have signed the Optional Protocol on complaint procedures). 34

Source: Committee on the Rights of Persons with Disabilities, 2016.

Article 33 (2) requires States Parties to maintain and strengthen their independent monitoring frameworks by ensuring that they can actively engage in the above activities. 35 Recent guidance issued by the Committee has expanded on this requirement, stressing the duty of States Parties to ensure their monitoring frameworks possess the technical resources necessary to function successfully, including full and complete access to relevant databases, records and facilities. 36 Inversely, Article 33 (2) should also be read as requiring States Parties to refrain from restricting or limiting the capacities of the independent monitoring framework as it promotes, protects, and monitors the Convention.

**Single vs. multiple entity frameworks**

States Parties have several different options when structuring their independent monitoring frameworks. The most straightforward model is the designation or establishment of a single entity that discharges all of the above functions. The selection of one institution entails certain advantages with regards to accountability and visibility to stakeholders, but also means that the entity must be fully equipped and resourced to handle the wide mandate of Article 33 (2).

In order to satisfy the Article’s requirement relating the Paris Principles, and in line with the recommendations of the CRPD Committee, this entity should normally take the form of an NHRI, 37 such as a human rights commission, ombudsman or equality body. This is the case in Germany, which has designated the German Institute for Human Rights, 38 and in Australia, where the Australian Human Rights Commission represents the independent monitoring framework. 39 A number of countries have designated or established a single non-NHRI entity as their independent monitoring frameworks, such as an OPD

34 ibid.
35 UN OHCHR, 2018, p.3.
36 ibid.
37 Committee on the Rights of Persons with Disabilities, 2016, p. 5.
federation in Spain and a specialized monitoring committee in Austria. However, the selection of a non-NHRI entity as a State Party’s only mechanism in its independent monitoring framework may present challenges for compliance with the Paris Principles, particularly legally guaranteed independence and adequate mandates.

When appointing multiple mechanisms to the independent monitoring framework, States have different options. They can designate more than one NHRI, like in New Zealand where both the Human Rights Commission and the Office of the Ombudsman have been appointed to the independent monitoring framework.\(^\text{40}\) Such an institutional arrangement can be particularly relevant for decentralized states, as they enable the State Party to incorporate NHRIs at the sub-national level. States may also choose to include other non-NHRI bodies in the independent monitoring framework, such as advisory bodies or civil society structures like OPD federations. In Denmark for example, the Danish Disability Council (a national advisory body on disability) is part of the independent monitoring framework along with the Danish Institute for Human Rights and the Parliamentary Ombudsman.\(^\text{41}\) If multiple monitoring mechanisms are appointed by the State Party, all mechanisms must be independent from the Executive Branch of government.\(^\text{42}\) This was reiterated in the Committee’s concluding observations to the European Union, which called for the removal of the European Commission, an executive-level body, from the EU’s independent monitoring framework.\(^\text{43}\)

While they are inherently more complex and require additional effort in terms of securing a clear division of labour and solid cooperation channels, multi-institutional monitoring frameworks often carry significant benefits. They allow States to utilize the comparative advantages of different bodies to implement the three different areas of responsibility outlined in Article 33 (2). In New Zealand, namely, the Human Rights Commission focuses more on promotion and monitoring functions, while the Ombudsman handles broader protection responsibilities.\(^\text{44}\) In Denmark, the Ombudsman is the only member of the independent monitoring framework that has the mandate to treat individual complaints,\(^\text{45}\) and as such is an important complement to the Danish Institute for Human Rights and the Danish Disability Council. Moreover, including organizations of persons with disabilities and their federations can also be instrumental for the functioning of the independent monitoring framework. While organizations of persons with disabilities cannot comply with the Paris Principles (and thus cannot alone fulfill the requirements of Article 33 (2)), they can ensure a strong and effective channel for the participation of persons with disabilities in the monitoring processes, which is also an obligation under Article 33 (3) (to be discussed in more detail in a later section).

**RELATIONSHIP BETWEEN THE INSTITUTIONAL FRAMEWORKS OF ARTICLE 33 (1) AND 33 (2)**

In many ways, the distinction between institutional set-ups established under CRPD Article 33 (1) and 33 (2) are quite clear. On the one hand, focal points and coordination mechanisms are concerned with implementation issues and are largely, if not exclusively, composed of government entities. Independent monitoring mechanisms, on the other hand, focus on promotion, protection and monitoring tasks, and by

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\(^{\text{40}}\) Initial Report of New Zealand on the Implementation of the CRPD (CRPD/C/NZL/1), p. 44.
\(^{\text{41}}\) Liisberg, 2013, p. 82.
\(^{\text{42}}\) UNOHCHR, 2018, p. 3.
\(^{\text{43}}\) Concluding observations on the initial report of the European Union (CRPD/C/EU/CO/1), p. 10.
\(^{\text{44}}\) Reif, 2014, p. 240.
\(^{\text{45}}\) Liisberg, 2013, p. 87.
definition should be independent of the government.\textsuperscript{46} In the case that government bodies are represented in the independent monitoring framework, it is important that they serve only in an advisory capacity in order to stay in line with the Paris Principles.

However, when looking at the functions of these two institutional set-ups, the dividing line between them becomes a bit more ambiguous. There are a number of areas in their respective mandates which overlap. For example, focal points (with help from coordination mechanisms) are responsible for drafting the initial and periodic State reports to the CRPD Committee and representing the State Party during Committee sessions. At the same time, independent monitoring frameworks play an important role in the drafting process and in facilitating the work of the CRPD Committee. Promoting awareness of the CRPD, as well as facilitating participation of persons with disabilities and representative organizations, are also responsibilities that befall both institutional bodies. These complementary and sometimes overlapping responsibilities require States Parties to find an adequate balance, ensuring that the two frameworks work together but remain distinct.

Recent guidance issued by the Committee has also stressed the necessity of sustained cooperation between focal points, coordination mechanisms and independent monitoring frameworks in gathering robust and disaggregated data on persons with disabilities to support monitoring activities. This should include joint efforts to improve systems for collecting and analyzing data, in collaboration with national statistics offices, United Nations agencies and regional organizations.\textsuperscript{47}

**PARTICIPATION OF PERSONS WITH DISABILITIES AND THEIR REPRESENTATIVE ORGANIZATIONS**

\begin{quote}
**Article 33 (3)**

*Civil society, in particular persons with disabilities and their representative organizations, shall be involved and participate fully in the monitoring process.*
\end{quote}

Article 33 (3) stresses the obligations of States Parties in ensuring the participation of persons with disabilities, organizations of persons with disabilities (OPDs) and other civil society organizations in domestic monitoring efforts. While Article 33 (3) only mentions monitoring, it is important to keep in mind that States Parties are also required to involve persons with disabilities in all processes, as per other articles in the Convention, notably Article 4 (3).\textsuperscript{48}

**Possible channels for participation**

States Parties can ensure the participation of persons with disabilities in a number of ways, most of which involve working with organizations of persons with disabilities. OPDs are representative civil society

\textsuperscript{46} De Beco, 2011a, p. 100.
\textsuperscript{47} UN OHCHR, 2018, p. 11.
\textsuperscript{48} Article 4 (3) of the Convention states that: “In the development and implementation of legislation and policies to implement the present Convention, and in other decision-making processes concerning issues relating to persons with disabilities, States Parties shall closely consult with and actively involve persons with disabilities, including children with disabilities, through their representative organizations.”
organizations that are led and controlled by persons with disabilities and aim to collectively express, promote, pursue and/or defend a field of common interest.\textsuperscript{49}

OPDs can take various forms – from individual organizations to federations – and can operate on local, national, regional and/or global levels. Given their composition and proximity to their constituencies, they are usually the best placed to inform and engage in policy, decision-making and the monitoring processes. Moreover, facilitating the participation of OPDs can also promote other important values, such as agency, empowerment and ownership.\textsuperscript{50}

The Committee has recently highlighted the need for States Parties to actively distinguish between OPDs and other civil society organizations that advocate for or provide services to persons with disabilities. For an entity to be considered fully representative, and thus an OPD, persons with disabilities must compose a clear majority of its membership.\textsuperscript{51} While Article 33 (3) calls for the broad participation of civil society in the monitoring of the Convention, States Parties should prioritize ensuring the participation of representative organizations over groups that may have relevant expertise but are non-representative.

Participation of persons with disabilities can also take place directly, where individuals are part of an Article 33 entity in their own capacity. In these cases, they may be appointed as experts in coordination mechanisms or executive boards of NHRIs or be selected to be a commissioner or state secretary for disability affairs. Indirect participation occurs when OPDs are involved in policy processes. For example, States Parties can include national advisory bodies on disability or OPDs in their Article 33 (2) set-up, like in Spain where a national OPD federation acts as the country’s independent monitoring framework.\textsuperscript{52}

In addition to including persons with disabilities and OPDs as part of a country’s Article 33 institutional structures, governments can consider other modes of engagement, such as: holding public consultations on public policy issues; soliciting inputs and feedback during the drafting of initial and periodic State reports; providing reasonable accommodation during public policy and decision-making processes; ensuring that information on CRPD monitoring and implementation is disseminated in accessible formats; providing training to government officials on engaging with OPDs and vice versa; and investigating laws and policies that were not developed in consultation with persons with disabilities.

In building these various participation pathways, States Parties should keep in mind that OPDs are heterogeneous. Some may represent all disabilities, while others specific types of disabilities. They may also represent different constituencies based on other characteristics, such as women, children or indigenous peoples with disabilities. As such, it is essential to engage with a wide spectrum of organizations so that different groups and interests are included in monitoring and policy processes. In the same vein, States Parties should also consider providing capacity-building support to OPDs, particularly to those representing constituencies that have previously been excluded from civil society or government processes, such as self-advocacy groups for persons with intellectual or psychosocial disabilities and representative organizations of women and girls with disabilities.

\textsuperscript{50} Ibid, p. 9.
\textsuperscript{51} General comment No. 7 (2018) on the participation of persons with disabilities, including children with disabilities, through their representative organizations, in the implementation and monitoring of the Convention (CRPD/C/GC/7).
\textsuperscript{52} Barriffi, 2013, p. 205.
In addition to engaging in national implementation and monitoring, persons with disabilities and OPDs also play a significant role in the procedures of the CRPD Committee (see Box 4). These various participation methods are greatly valued and welcomed by the Committee.

**Box 4. Participation methods for OPDs and civil society organizations in the work of the CRPD Committee**

- Raise awareness about States’ obligations under the CRPD, including reporting obligations;
- Provide written submissions to the Committee such as alternative or shadow reports;
- Make oral statements during Committee sessions;
- Request national or thematic briefings with the Committee;
- Participate in the drafting of general comments and days of general debate;
- Make contributions to the Committee’s communications procedures;
- Collaborate with the Committee during country visits;
- Request activation of early warning or urgent action procedures;
- Request inquiries by the Committee on violations of the CRPD.

Source: Report of the Committee on the Rights of Persons with Disabilities on its eleventh session, Annex II “Guidelines on the participation of disabled persons’ organizations and civil society organizations in the work of the Committee” (CRPD/C/11/2).

**SUMMARY OF ARTICLE 33**

As the previous sections show, there are wide and numerous ways for States to implement Article 33 at the national level. While difficult to summarize, the following table aims to provide a non-exhaustive, rough overview of the main features of Article 33 frameworks. The table tries to reflect those areas where there are shared characteristics or responsibilities, but it is worth noting that the lines distinguishing focal points, coordination mechanisms and independent monitoring frameworks are oftentimes much more ambiguous in reality.
### Table 1. Overview of institutional frameworks under Article 33

<table>
<thead>
<tr>
<th></th>
<th>Focal point(s)</th>
<th>Coordination mechanism</th>
<th>Independent monitoring framework</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mandate</strong></td>
<td>Maintains overall responsibility for the implementation of the CRPD; serves as the State’s main contact point for domestic / international stakeholders</td>
<td>Ensures coordinated and coherent CRPD implementation across government (both horizontally and vertically)</td>
<td>Promotes, protects and monitors CRPD implementation by the State</td>
</tr>
<tr>
<td><strong>Structure / composition</strong></td>
<td>At least one focal point, located at the highest level of government, e.g. the Office of the President / Prime Minister, State Secretary, Ministry, national coordination mechanism, etc.</td>
<td>Chaired by senior level government official, e.g. the lead focal point, the President or Prime Minister, Minister, etc.</td>
<td>At least one independent mechanism that takes into account the Paris Principles, e.g. human rights commission, ombudsman, etc.</td>
</tr>
<tr>
<td><strong>Examples of functions</strong></td>
<td>Sets, oversees and monitors the State’s agenda and action plan vis-à-vis CRPD implementation</td>
<td>Coordinates and monitors CRPD implementation by various ministries and departments, including at the sub-national level</td>
<td>Monitors CRPD implementation, including by reviewing laws, policies, strategies and practices, and proposes recommendations to State authorities</td>
</tr>
<tr>
<td><strong>Reviews, revises and amends relevant laws, strategies and policies</strong></td>
<td>Facilitates mainstreaming of the rights of persons with disabilities across government (including laws, policies and strategies)</td>
<td>Maintains responsibility for protection functions, including handling individual complaints and petitions, and supporting domestic legal processes</td>
<td></td>
</tr>
<tr>
<td><strong>Provides advice and builds capacities within government on the rights of persons with disabilities</strong></td>
<td>Provides a forum for information and experience sharing, joint initiatives, etc.</td>
<td>Provides training to relevant stakeholders (inside and outside of government) on the CRPD and its Optional Protocol</td>
<td></td>
</tr>
<tr>
<td><strong>Roles vis-à-vis CRPD Committee</strong></td>
<td>Coordinates and prepares initial and periodic reports to the CRPD Committee, as well as replies to the list of issues</td>
<td>Supports the drafting of the initial and periodic reports, including by facilitating the participation of civil society and OPDs and submitting alternative reports</td>
<td></td>
</tr>
<tr>
<td><strong>Represents the State Party during dialogues with the CRPD Committee</strong></td>
<td></td>
<td>Participates in dialogues between the State Party and the CRPD Committee</td>
<td></td>
</tr>
<tr>
<td>Ensures that recommendations from the concluding observations are addressed, and coordinates the State’s participation in the Committee’s follow-up procedure</td>
<td>Disseminates concluding observations and participates in follow-up procedures</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Support for the Convention is strong in the Arab world. Out of the 18 ESCWA member countries, 17 have ratified or acceded to the Convention and eight have ratified or acceded to the Optional Protocol (see Table 2). In short, almost every country in the region has an obligation under international human rights law to abide by and implement the provisions of the CRPD, including Article 33. It is also noteworthy that many Arab countries have commenced the initial State reporting process to the CRPD Committee, with eight countries – Jordan, Morocco, Oman, Qatar, Saudi Arabia, Sudan, Tunisia and the United Arab Emirates – having fully completed their first reporting cycle.\(^\text{53}\)

### Table 2. Signatures and formal confirmations/accessions/ratifications of the Convention and its Optional Protocol among ESCWA member countries

<table>
<thead>
<tr>
<th>Country</th>
<th>Convention Signed</th>
<th>Acceded to/Ratified</th>
<th>Optional Protocol Signed</th>
<th>Acceded to/Ratified</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bahrain</td>
<td>25/6/2007</td>
<td>22/9/2011</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Egypt</td>
<td>4/4/2007</td>
<td>14/4/2008</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Iraq</td>
<td>-</td>
<td>20/3/2013</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Jordan</td>
<td>30/3/2007</td>
<td>31/3/2008</td>
<td>30/3/2007</td>
<td>-</td>
</tr>
<tr>
<td>Kuwait</td>
<td>-</td>
<td>22/8/2013</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Lebanon</td>
<td>14/6/2007</td>
<td>-</td>
<td>14/6/2007</td>
<td>-</td>
</tr>
<tr>
<td>Libya</td>
<td>1/5/2008</td>
<td>13/2/2018</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Oman</td>
<td>17/3/2008</td>
<td>6/1/2009</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Qatar</td>
<td>9/7/2007</td>
<td>13/5/2008</td>
<td>9/7/2007</td>
<td>-</td>
</tr>
<tr>
<td>United Arab Emirates</td>
<td>8/2/2008</td>
<td>19/3/2010</td>
<td>12/2/2008</td>
<td>-</td>
</tr>
</tbody>
</table>


According to the CRPD, States are given significant leeway in shaping and adapting their Article 33 frameworks to fit national contexts and state structures. In order to undertake a comparative analysis of

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\(^{53}\) Other countries have submitted their initial reports to the CRPD Committee but have not yet completed their first reporting cycle, including: Bahrain, Iraq, Kuwait and Mauritania. See: [https://www.ohchr.org/EN/HRBodies/CRPD/Pages/CRPDIndex.aspx](https://www.ohchr.org/EN/HRBodies/CRPD/Pages/CRPDIndex.aspx). Accessed on 21 May 2019.
the implementation of Article 33 of the CRPD in the Arab region, ESCWA invited all of its member States to complete a questionnaire on four main topics:

1. Article 33 (1): Focal points
2. Article 33 (1): Coordination mechanisms
3. Article 33 (2): Institutional setups for monitoring CRPD implementation
4. Reporting mechanisms to the CRPD Committee

The questionnaire received responses from 16 out of 18 ESCWA member States, including Bahrain, Egypt, Iraq, Jordan, Kuwait, Lebanon, Mauritania, Morocco, Oman, Palestine, Saudi Arabia, Syria, Sudan, United Arab Emirates, Yemen and Qatar. Tunisia did not complete the questionnaire but provided some information about its institutional setup. Libya was not included in the analysis. Out of the 17 countries, only Lebanon has not yet ratified or acceded to the CRPD. However, mechanisms for promoting and monitoring the rights of persons with disabilities are provided for under Lebanon’s disability law 220/2000. The following sections will review the results of the questionnaire.

Designation and structure of focal points in the Arab region

<table>
<thead>
<tr>
<th>Article 33 (2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>States Parties shall, in accordance with their legal and administrative systems, maintain, strengthen, designate or establish within the State Party, a framework, including one or more independent mechanisms, as appropriate, to promote, protect and monitor implementation of the present Convention. When designating or establishing such a mechanism, States Parties shall take into account the principles relating to the status and functioning of national institutions for protection and promotion of human rights.</td>
</tr>
</tbody>
</table>

As discussed previously, focal points are the central actors which ensure the full, effective and coordinated implementation of the CRPD. All 17 member States have designated focal points to carry out this task, thus fulfilling their focal point obligations as required by Article 33 (1) (see Annex 1 for a list of focal points by country).

Member States have generally followed Committee guidelines in their selection of entities to serve as focal points. Bahrain, Mauritania, Morocco, Palestine, Qatar, Saudi Arabia, Syria and Yemen have designated their ministries of social affairs or development as focal points, dually fulfilling recommendations to designate focal points at highest level of government and from bodies that have pre-existing jurisdiction over disability-related issues. Qatar has nominated the National Committee for Human Rights as the main focal point, as well as additional focal points in various ministries. The UAE has designated its Ministry of Community Development as its focal point, thus also meeting these recommendations, as social issues fall under this ministry’s purview.

Eight States have designated national disability councils as their focal points (Egypt, Iraq, Jordan, Kuwait, Lebanon, Oman, Sudan and Tunisia). While national disability councils have relevant expertise and existing relationships with domestic actors, the ability of disability councils to successfully execute the
duties required of the focal point may depend on the authority designated to them by their country’s leadership, and their proximity to the executive branch of Government.

Seven countries have appointed multiple focal points in addition to their lead focal point (Bahrain, Mauritania, Palestine, Saudi Arabia, Syria, Qatar and the UAE). Additional focal points include disability councils, human rights commissions, state or local level bodies, and OPDs. While designating multiple focal points is thought to be particularly helpful in coordinating CRPD implementation efforts in countries with large territories or decentralized systems of governance, in the Arab region, the States Parties that have chosen to utilize multi-focal point set-ups encompass a range of sizes and governance structures.

In the seven countries that designated multiple focal points, distribution of focal points was predominantly horizontal, across national bodies. Egypt, Iraq and Sudan have single focal points, but include regional subgroups within their coordination mechanism. Such vertical set-ups may be useful in supporting wide-ranging implementation efforts.

Lines of reporting within focal point set-ups vary throughout the Arab region. In seven countries, the lead focal point reports to the President or Prime Minister (Egypt, Jordan, Morocco, Palestine, Saudi Arabia, Sudan and Syria), and in six countries the lead focal point reports to a minister or council of ministers (Bahrain, Iraq, Lebanon, Oman, the UAE and Yemen) (see Chart 1). Direct reporting of focal points to senior level government officials can be quite valuable when it results in improved political influence and the human and financial resources required to carry out their responsibilities.

Chart 1. Entity to which national focal points report (by number of countries)

Source: ESCWA on the basis of questionnaires (see annex)

Capacity and funding of focal points

Eleven countries have focal points with over 15 staff members, as well as dedicated budgets to execute their mandates. Respondents from Palestine, Lebanon, and the UAE reported that their focal points did not have dedicated budgets to carry out focal point functions, though they receive funds for their general activities from state budgets. Additionally, the representative from Saudi Arabia noted that the budget for its focal points was unspecified, and the representative from Syria stated that the funding allocated to its
focal points was dependent on upcoming projects. In countries that provided the specific budgets of their focal points, funding varied greatly. Focal points have critical responsibilities in the process of overseeing CRPD implementation and must be funded accordingly.

Functions of focal points in the Arab region

As stated, the primary tasks of focal points are overseeing the overall implementation of the CRPD. This includes and guiding / preparing and revising the relevant policies and legal frameworks, build relevant capacity within Governments, ensure relevant data collection, and coordinating the state reports to the CRPD Committee. Focal points are the main interlocutor for the CRPD Committee.

Overseeing the implementation of the Convention naturally also includes administrative monitoring of implementation progress. Such administrative monitoring is an original function of focal points and coordination mechanisms (see below), but needs to be distinguished from independent monitoring frameworks which are requested in Article 33 (3).

Oversight of and guidance for implementation can entail certain conflicts of interest if the oversight body (focal point) is at the same time a direct service provider. Focal points should set the rules and guidelines, which service providers should implement.

If focal points are at the same time service providers, these specific roles can be blurred. For the Arab region, this is the case to a certain extent in Iraq, Kuwait and Sudan. Bahrain’s focal point is the Ministry of Labour and Social Development, but this ministry also directly provides diagnostic testing, accommodation, vocational training, and employment support to persons with disabilities. In Kuwait, PADA is the focal point but also the main service provider for persons with disabilities.

For the reason of a clearer separation of functions, the new Disability Law in Jordan (2018) has relieved the focal point, the National Council, of service provision functions and shifted them to the relevant Ministries. It is advisable that focal points focus on developing and coordinating national policies to guide and inform government implementation and are careful not to compromise this role through the provision of service delivery.

Designation and structure of coordination mechanisms in the Arab region

Article 33 (1)

States Parties […] shall give due consideration to the establishment or designation of a coordination mechanism within government to facilitate related action in different sectors and at different levels.
As reflected in the second part of Article 33 (1), coordination mechanisms are not required, but states should give “due consideration” to their designation and establishment since they contribute towards mainstreaming disability policies and ensuring a coordinated and coherent approach to CRPD implementation. Despite being optional, all 17 ESCWA member States have designated or established a coordination mechanism via legislation, decree, act or government decision (see Annex 2 for a complete list).

The composition of coordination mechanisms differs by country, but mostly consist of the various government ministries that deal with disability affairs, e.g. social affairs, labour, health, education, finance, etc. Many Arab States have also included ministries that are not traditionally linked to disability: for example, Morocco’s coordination mechanism includes the Ministry of Foreign Affairs, the Ministry of Tourism, and the General Committee for the Management of Prisons, and Iraq’s coordination mechanism includes the Ministry of Trade and the Ministry of Defense. Diverse ministerial representation has the potential to strengthen coordination mechanisms. The challenge lies in building consistent capacity and understanding of policy implications for persons with disabilities across relevant ministries.

Fourteen countries have also included non-governmental entities on their coordination mechanisms, such as persons with disabilities, civil society organizations, OPDs, private sector businesses and/or charitable organizations. In addition, though gender diversity is not stipulated in the Convention, fifteen countries responded that they have female members on the coordination mechanisms, ranging from between one and nine members.

Roles and functions of focal points and coordination mechanisms should also be clearly identified and delineated. In Kuwait, the State party has designated the Public Authority for the Disabled (PADA) as its focal point as the single coordination body within the Government on issues relating to disabilities, governed by the Supreme Council of the Public Authority of the Disabled. 54

Capacity and funding of focal points

As with focal points, coordination mechanisms should have sufficient resources to carry out their work. In eight member States, coordination mechanisms have more than fifteen staff members. Half of respondents indicated that their coordination mechanisms have dedicated budgets to execute mandates. Like focal points, the majority of coordination mechanism entities receive funding for their general activities through state budgets. Reported budgets for coordination mechanisms varied greatly. In the cases of Egypt, Jordan, and Sudan, budgets for focal points and coordination mechanisms are the same because they are the same entity.

Functions of coordination mechanisms in the Arab region

In regard to their functioning, most countries’ coordination mechanisms meet once a month (5) or every three months (5). In eight countries, coordination mechanisms have sub-committees at the sub-national level (4), thematic level (3) or both (1). The coordination mechanisms in ten countries have a secretariat, consisting primarily of members of national disability councils or ministries. The majority of coordination

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54 CRPD, 2015, p. 48.
mechanism chairs consist of ministers of social affairs or presidents/prime ministers (see Chart 2), with their seniority being a promising indicator of their ability to successfully carry out the coordination role.

It is important that the focal point and the coordination mechanism work together closely in the implementation of the Convention and drafting of state reports to the CRPD Committee. As mentioned, the relationship between the lead focal point and the coordination mechanism is variable, and this diversity is reflected across ESCWA member States. Six countries (Egypt, Jordan, Lebanon, Oman, Sudan, Tunisia) noted that their lead focal point is the same entity as the coordination mechanism. Four countries (Iraq, Palestine, Saudi Arabia, Syria) have their lead focal point as the chair of the coordination mechanism, while three other countries (Mauritania, UAE, Yemen) have their lead focal point as a member of the coordination mechanism. Two countries (Bahrain, Morocco) have focal points that are the secretariat of the coordination mechanism while Qatar’s lead focal point and coordination mechanism are structurally separate but have established channels for cooperation. One country (Kuwait) designated another relationship (see Chart 3).
Egypt, Sudan and Iraq have also formed sub-regional branches within its coordination mechanism structure. This may be a helpful step to ensure national coherency on policy in a country that is highly populous and has a large rural citizenry spread throughout the State.

Finally, like focal points, coordination mechanisms should actively involve persons with disabilities as they ensure the coherency of CRPD implementation. The majority of ESCWA member States reported that persons with disabilities were directly involved in coordination activities in their own capacity through serving as representatives on coordination mechanisms. The number of persons with disabilities represented on coordination councils varied, ranging from one in Saudi Arabia to 12 in Sudan. However, it is worth noting that having only one person with a disability on the coordination mechanism may impede its work, as that individual’s knowledge and views may not be representative of the country’s disability community as a whole.

**Designation and structure of independent monitoring frameworks in the Arab region**

**Article 33 (2)**

*States Parties shall, in accordance with their legal and administrative systems, maintain, strengthen, designate or establish within the State Party, a framework, including one or more independent mechanisms, as appropriate, to promote, protect and monitor implementation of the present Convention. When designating or establishing such a mechanism, States Parties shall take into account the principles relating to the status and functioning of national institutions for protection and promotion of human rights.*
As mentioned above, independent monitoring frameworks should be distinguished from administrative monitoring of implementation, which is a continuous function of focal points and coordination mechanisms. Independent monitoring frameworks should ensure that human rights principles regarding availability, adequacy and affordability of services to persons with disabilities are observed. Fourteen countries in the region have established a framework to promote, protect and monitor the CRPD under Article 33 (2) via legislation, decree or administrative decision (see Annex 3 for a full list). The countries that did not report having a monitoring framework included Kuwait, Lebanon and Palestine.

Jordan, Mauritania, Morocco, Saudi Arabia, Sudan, Qatar and Tunisia have designated a human rights body to be in their monitoring frameworks. The rest of the countries’ have frameworks made up primarily of national disability councils or government ministries. As discussed on pages 10 and 11, at least one mechanism within the monitoring framework should be categorized as “independent”. However, only seven countries (Jordan, Mauritania, Morocco, Oman, Saudi Arabia, Qatar and Sudan) identified having at least one independent mechanism.

Article 33 (2) directs states to consider the Paris Principles when establishing their independent mechanisms. As discussed previously, the Paris Principles outline that national institutions that promote and protect human rights should be independent, pluralistic, with a broad mandate, powers of investigation, and be adequately funded and accessible. In the questionnaire, ten countries responded that their independent mechanisms abide by the Paris Principles. Since there are only six countries which identified as having at least one independent mechanism, out of which only three have fully compliant NHRIs according to the Global Alliance of Human Rights Institutions (Jordan, Morocco and Mauritania), there is likely some confusion among countries what exactly the Paris Principles are or what qualifies as an independent mechanism.

In regard to the relationship between the members of monitoring frameworks, aside from one country that distinguished between voting members and observer members (Mauritania), eleven countries responded that all monitoring framework members have equal status. The monitoring frameworks in eight countries receive dedicated budgets from the government to execute their mandates. As mentioned previously, there is room for flexibility regarding the structure of monitoring frameworks, and states should feel free to adapt them to their national contexts. However, it is advisable that there is a clear distinction between the focal point and the monitoring framework, as the latter is responsible for overseeing the work of the former.55 In the Arab region, a number of countries have designated the same entity to be both the focal point and a member of the monitoring framework, including Egypt, Iraq, Jordan, Syria and Yemen. While focal points may play a valuable role in providing information on implementation, within the monitoring framework, the process of results monitoring should be entrusted to an independent body such as an NHRI to ensure objectivity.

Similarly, while representatives of government ministries can play an advisory role on the monitoring framework, countries should be cautious of giving government officials the primary responsibility for monitoring activities, as it could compromise the independent nature of the framework. This appears to be of particular relevance in the Arab region, as Iraq, Morocco, Sudan, Syria and the UAE all reported that more than 15 government officials are part of their designated monitoring frameworks. Bahrain, Qatar

55 De Beco, 2011a, p. 100.
Functions of independent monitoring frameworks in the Arab region

As stated previously, under Article 33 (2), independent monitoring frameworks are responsible for the promotion, protection, and monitoring of the Convention. While promotion activities are mainly related to raising awareness and may not be directly impacted by noncompliance with the Paris Principles, a lack of substantive and functional independence in Arab States’ monitoring frameworks has the potential to blur responsibilities throughout the monitoring process.

Still, while completely independent monitoring frameworks should be strived for, monitoring frameworks in the region appear able to engage in some protection and monitoring functions without Paris Principle compliance. Handling complaints regarding CRPD violations is a key responsibility under the umbrella of protection activities: though only three Arab countries reported monitoring frameworks that are fully compliant NHRIs, 12 countries confirmed that their monitoring frameworks have the legal capacity to hear and investigate individual or group complaints.

Like protection functions, the successful monitoring of the Convention in the Arab region is likely hindered by the presence of multiple States Parties that do not have a monitoring set-up that is fully separate from the government. It is difficult to imagine that monitoring frameworks with ties to government bodies are able to critically review the State Party’s legal compliance with CRPD obligations or spearhead inquiries into potential violations of CRPD protocol. Challenges may also be faced by non-independent monitoring frameworks in the process of reporting to the CRPD Committee, as discussed below.

Finally, there may be some confusion among Arab countries about what monitoring actually entails. Many may think monitoring means examining the implementation of disability-related activities by various government ministries. However, as outlined in the guidance from the CRPD Committee, monitoring includes identifying and analyzing the State’s implementation gaps in the Convention, as well as the impact of State policies and programmes on persons with disabilities and disability-specific policies. By understanding this important difference, Arab countries can both clarify and enhance the role, and possibly composition of, national monitoring frameworks.

Reporting mechanisms to the CRPD in the Arab region

The entity that maintains primary responsibility for drafting the State’s initial and periodic reports to the CRPD Committee varies by country (see Annex 4 for a full list). As discussed previously, it is generally considered to be the role of the focal point to coordinate the preparation of state reports in cooperation with the coordination mechanism, but in practice this is not necessarily the case. Some countries responded that their focal points maintain primary responsibility for drafting the state reports (Bahrain,

[^56]: UN OHCHR, 2018, pp. 7, 13.
Egypt, Iraq, Jordan, Sudan, Syria, UAE and Yemen), while others have designated various other entities to take on this role (Kuwait, Mauritania, Morocco, Oman, Palestine, Qatar and Saudi Arabia). However, it is worth noting that the majority of countries do send their focal points to represent them at Committee sessions.

Eleven countries noted that their monitoring frameworks participate in constructive dialogue with the CRPD Committee, though only nine countries noted that monitoring frameworks carry out regular reporting with regard to CRPD implementation. This task is coordinated in a variety of ways, e.g. through periodic reports and meetings (some experts advise that independent mechanisms should not contribute to the preparation of state reports because their role is to monitor, not implement, states’ obligations under the CRPD\textsuperscript{57}). Other entities that cooperate in the preparation of reports to the Committee include UN agencies, civil society, federal and local authorities and the private sector.

The Office of the High Commissioner for Human Rights (OHCHR) encourages civil society to participate in drafting reports and attending Committee sessions. In 2016, the Committee released updated and simplified reporting procedures to assist the involvement of OPDs and other civil society organizations in submitting reports.\textsuperscript{58}

\textit{Participation of persons with disabilities under Article 33 (3) in the Arab region}

As called for in Article 33 (3), persons with disabilities, their representative organizations, and other civil society organizations should be involved in the monitoring process. Though Article 33 (3) only mentions monitoring, participation of persons with disabilities should also extend to the coordination activities discussed under Article 33 (1).

In 13 countries, monitoring frameworks involve and consult with persons with disabilities and their representative organizations in a variety of ways, as illustrated in Chart 4. In specifying how (more than one answer was allowed), 11 countries include them through direct participation of persons with disabilities as board members or committee experts (Bahrain, Egypt, Iraq, Mauritania, Morocco, Oman, Saudi Arabia, Sudan, Syria, UAE and Yemen). Eleven include OPDs in the framework (Qatar, Bahrain, Egypt, Iraq, Mauritania, Morocco, Oman, Saudi Arabia, Sudan, Syria and Yemen) and twelve include them through public consultations and meetings (Bahrain, Egypt, Iraq, Mauritania, Morocco, Oman, Saudi Arabia, Sudan, Syria, UAE, Qatar and Yemen). Ten countries include persons with disabilities through their participation in the drafting of reports to the CRPD Committee (Bahrain, Qatar, Egypt, Iraq, Mauritania, Morocco, Oman, Saudi Arabia, Sudan, and Yemen) and four counties include them through individual or informal channels (Egypt, Iraq, Oman and Sudan).

While there is no set pathway for States Parties to involve persons with disabilities in monitoring efforts, to effectively ensure participation, countries should seek to facilitate the engagement of persons with disabilities through multiple means. In its effort to promote the rights of persons with disabilities, Saudi Arabia has established the Authority for the Welfare of Persons with Disabilities in February 2018. The body acts as a planning and coordinating body and 2 persons with disabilities in its board of directors.

\textsuperscript{57} Ibid, p. 101.
\textsuperscript{58} CRPD, 2016b.
Without consultation, it is unclear whether the direct involvement of persons with disabilities in the monitoring framework is enough to guarantee a fully participatory monitoring process.

Chart 4: Consultative relationship between monitoring framework and persons with disabilities or OPDs

Concluding observations

States have significant leeway in shaping and adapting their Article 33 frameworks to fit national contexts and state structures. This is no less the case among Arab States, which have established institutional frameworks of different shapes and sizes to implement and monitor the Convention. Though most countries are meeting their Article 33 obligations, there are a number of areas which may make it difficult for the relevant institutions to carry out these responsibilities. These include sufficient political authority to affect real change in government disability policy; a lack of adequate human and financial resources for frameworks to operate broadly and effectively; a lack of sub-focal points or sub-national coordination mechanisms to help implement the Convention across entire countries, particularly those with large rural populations; and a blurring of the lines between implementation, coordination and monitoring roles.

The capacity of “independent” monitoring frameworks in some countries is a particular point of concern as it could mean states may not capture the real situation of persons with disabilities in their country. Independent monitoring is particularly important in identifying potential human rights violations and establishing methods to prevent them, so ineffective monitoring frameworks may miss a large number of violations occurring in their countries. Setting up fully compliant NHRIs and designating them as the independent members of the monitoring framework can be an effective way for states to be in compliance with Article 33 (2).
Despite these challenges, Arab countries are progressing in their fulfilment of Article 33 (3). The involvement of persons with disabilities and their representative organizations in the implementation, coordination, and monitoring of the Convention in all countries is noteworthy. Being one of the most important elements of the CRPD, full participation will ensure that persons with disabilities have the greatest impact on disability policy in their countries.

This section has reviewed in detail the specific setups of ESCWA’s member States in relation to Article 33. In addition to these elements, there are a number of other opportunities and challenges that cut across the Arab region that may affect countries’ implementation of Article 33. The next section will briefly review three examples of common themes which warrant further examination and strengthened cooperation, namely: disability data, civil society engagement and governance structures.

**OTHER POTENTIAL CHALLENGES FOR ARAB COUNTRIES**

**DISABILITY DATA AND STATISTICS**

Data is at the center of informed policymaking, including for the implementation and monitoring of the Convention. Reliable disability statistics enable focal points and coordination mechanisms to identify priorities, needs and gaps in their implementation efforts, as well as to effectively monitor the impact of government policies and programmes. Disability statistics help monitoring frameworks to better understand the situation of persons with disabilities on the ground and identify potential breaches or violations of the Convention.

The availability of reliable and accurate disability statistics is improving in the Arab region. Data collection methodologies increasingly comply with the international standards set by the Washington Group on disability statistics short set of questions and are increasingly progressing towards including additional dimensions. 59 However, definitions of disability still tend to be based on the medical model of disability, restricting the quality, comparability and accuracy of administrative data, which are the basis for devising policy interventions. In recent data collection efforts in Jordan, Morocco and Yemen, surveys that used the Washington Group’s standardized questions yielded significantly higher disability prevalence as well as rich and detailed data on participation barriers for persons with disabilities.60A variant of the Washington Group’s questions was also used by Egypt, Iraq, Oman, Palestine, Qatar, and Tunisia. Morocco’s National Observatory of Human Development also represents a promising new framework for data collection in the region.

Several Arab countries are now revising their disability assessment and determination procedures towards better compliance international standards for disability assessment, such as the International Classification of Functioning, Disability and Health (ICF)

These and other reforms are both needed and timely, not only for the implementation and monitoring of the CRPD but also for the achievement of the SDGs. In October 2019, UN ESCWA launched an Arab Disability Indicator Framework, that will allow for monitoring of disability across SDGs. 61 These

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59 UN ESCWA, 2018, p. 12.
developments will require that countries continue to work towards strengthening their national disability data, which will require substantial technical expertise, resources and cooperation.

ORGANIZATIONS OF PERSONS WITH DISABILITIES IN THE ARAB REGION

As mentioned earlier, engagement with persons with disabilities and OPDs is both an obligation for States Parties under Article 33 and an important investment in effective and participatory policymaking. This principle has important connotations in the Arab region, where civil society engagement has undergone significant changes, especially over recent years.

OPD movements vary across the region. Several countries have large numbers of OPDs that have long been active on the policy front. This is especially the case in, Lebanon, Morocco and Tunisia, as well as in Jordan and Egypt. In other Arab countries, movements are still in earlier stages of development, with more limited capacities and opportunities to participate in policy processes. In many instances, OPDs have emerged as service providers to fill gaps left by the public sector. In other instances, national and international developments triggered the creation of new organizations. OPDs in Tunisia, for example, found new space to engage in policy issues following the country’s 2011 uprising, while Egypt witnessed a growth in its OPD movement in conjunction with the CRPD drafting process.

As countries look to maintain and strengthen the participation of OPDs in policy processes, including in the context of their Article 33 obligations, some preliminary considerations should be taken into account. First, the States should adopt strategies to ensure wide representation of persons with disabilities in implementing the Convention. National OPD movements in the Arab world are diverse and heterogeneous, but some specific groups still tend to be underrepresented, such as persons with intellectual disabilities, women, rural dwellers and refugees with disabilities. As such, focal points, coordination mechanisms and independent monitoring frameworks may need to establish multiple channels for engagement and design these channels in a way that reaches these traditionally marginalized groups. For example, organizing public consultations at different levels (e.g. in rural areas and refugee settlements) may increase the chances that a wider spectrum of persons with disabilities and OPDs are consulted and involved. States may also consider providing capacity-building and financial assistance to OPDs to better enable them to engage in policy and monitoring processes.

Second, OPDs may wish to explore opportunities for building and strengthening their own national federations or umbrella networks, which could significantly improve their collaboration with governments’ Article 33 frameworks. Establishing or strengthening federations can also provide opportunities to reduce or address possible fragmentation within national OPD movements, and in turn contribute towards productive partnerships and engagement with CRPD implementation and monitoring processes. However, in exploring such options, it is essential to heed the point made in the previous paragraph that wide representation is needed from different groups of persons with disabilities in order to be truly effective and inclusive.

62 UN ESCWA, 2015, p. 3.
63 Ibid.
64 Ibid, pp. 3-4.
CONCLUSION

Since its adoption, the CRPD has had an impact on the global, regional and national levels that cannot be overstated. The Convention has changed how disability is understood, has moved governments to take broad and bold action, and has put the voices of persons with disabilities at the center of policymaking. Moreover, the CRPD – including Article 33 – has introduced unprecedented institutional developments to better ensure the protection and promotion of the rights of persons with disabilities.

This paper hopes to contribute to policy discussions on the CRPD and Article 33, with particular focus on the Arab region. It unpacked the article’s main provisions relating to focal points, coordination mechanisms, independent monitoring frameworks and participation of persons with disabilities. It provided a summary of the current trends in Article 33 implementation in the Arab region. It further situated these trends and provisions in the region by exploring some of the opportunities and challenges that Arab countries face in implementing Article 33. While the issues touched upon in that section, namely disability data, organizations of persons with disabilities, are highly pertinent, it bears noting that Arab States face many other complex trends, not least with relation to the several armed conflict and humanitarian crises that continue to affect the region.

One important pathway for enhancing institutional frameworks for CRPD implementation and monitoring lies in inter- and intra-regional cooperation. By sharing their national experiences, governments can capitalize on progress made by others, and avoid potential mistakes and pitfalls met along the way. The same goes for persons with disabilities and their representative organizations, whose strengthened cooperation both within and across borders may help to enhance capacities and their engagement in policy processes. As the global community moves through the second decade of the Convention, these and other efforts will help to maintain current momentum and to continue the realization of the rights of persons with disabilities in the Arab region and around the world.
### Annex 1. Focal points by country

<table>
<thead>
<tr>
<th>Country</th>
<th>Lead focal point</th>
<th>Additional focal point</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bahrain</td>
<td>Ministry of Labour and Social Development</td>
<td>High Commission for Disability Affairs, which includes all ministries, institutions, civil authorities and the private sector</td>
</tr>
<tr>
<td>Egypt</td>
<td>National Council for Disability Affairs</td>
<td></td>
</tr>
<tr>
<td>Iraq</td>
<td>Commission for the Care of People with Disabilities and Special Needs</td>
<td></td>
</tr>
<tr>
<td>Jordan</td>
<td>Higher Council for the Rights of Persons with Disabilities</td>
<td></td>
</tr>
<tr>
<td>Kuwait</td>
<td>Public Authority for Disability Affairs (PADA)</td>
<td></td>
</tr>
<tr>
<td>Lebanon</td>
<td>National Authority for Disability Affairs</td>
<td>Multi-sectoral Council for the Promotion of Persons with Disabilities</td>
</tr>
<tr>
<td>Mauritania</td>
<td>Ministry of Social Affairs, Childhood and Families</td>
<td></td>
</tr>
<tr>
<td>Morocco</td>
<td>Ministry of Family, Solidarity, Equality and Social Development</td>
<td></td>
</tr>
<tr>
<td>Oman</td>
<td>National Committee for the Care of Persons with Disabilities</td>
<td>Oman Human Rights Committee</td>
</tr>
<tr>
<td>Palestine</td>
<td>Ministry of Social Development</td>
<td>Higher Council for Persons with Disabilities; Palestinian Union of People with Disabilities</td>
</tr>
<tr>
<td>Qatar</td>
<td>The National Human Rights Committee</td>
<td>Ministry of Interior - Human Rights Department; Qatar Foundation for Social Work; Ministry of Administrative Development Labour and Social Affairs; Planning and Statistics Authority; All ministries concerned with the services provided and civil society institutions.</td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td>Ministry of Labour and Social Development</td>
<td></td>
</tr>
<tr>
<td>Sudan</td>
<td>National Council for Persons with Disabilities</td>
<td></td>
</tr>
<tr>
<td>Syria</td>
<td>Minister of Social Affairs and Labour / Secretary General of the Central Council for Disability Affairs (same person)</td>
<td>Sub-councils for the disabled in the governorates, Department of Disability Affairs of the Directorate of Social Services at</td>
</tr>
<tr>
<td>Country</td>
<td>Organization</td>
<td>Additional Information</td>
</tr>
<tr>
<td>---------------------------</td>
<td>---------------------------------------------</td>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>Tunisia</td>
<td>Higher Council for Social Development and for the Welfare of Disabled Persons</td>
<td></td>
</tr>
<tr>
<td>United Arab Emirates</td>
<td>Ministry of Community Development</td>
<td>Executive boards at the government/local level</td>
</tr>
<tr>
<td>Yemen</td>
<td>Ministry of Social Affairs and Labour</td>
<td></td>
</tr>
</tbody>
</table>
# Annex 2. Coordination mechanisms by country

<table>
<thead>
<tr>
<th>Country</th>
<th>Chair of the coordination mechanism</th>
<th>Composition of the Coordination Mechanism</th>
<th>Year established</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bahrain</td>
<td>Minister of Labour and Social Development</td>
<td>Ministry of Labour and Social Development, Ministry of Education, Bahrain Chamber of Commerce and Industry, Ministry of Health, Ministry of Housing, Supreme Council for Women, Ministry of Public Works, Municipal Affairs and Urban Planning, Bureau of Civil Service, Ministry of Information Affairs; Civil society organizations, the National Foundation for Disabled Services, Bahrain Disabled Sports Federation, the Bahrain Center for International Mobility, General Organization for Youth and Sports, Bahraini Association for the parents of the disabled</td>
<td>2007</td>
</tr>
<tr>
<td>Egypt</td>
<td>Prime Minister</td>
<td>System of focal points for disability related matters in ministries or other governmental institutions (Ministry of Health and Population, Ministry of Education, Ministry of Social Solidarity, Ministry of Planning and Administrative Reform, Ministry of Labour); Federation of Organizations for Persons with Disabilities; experts on disability; representatives of Organizations of Persons with Disabilities; representatives of the private sector</td>
<td>2012</td>
</tr>
<tr>
<td>Jordan</td>
<td>President of the Higher Council for the Rights of Persons with Disabilities</td>
<td>Board of Trustees, made up of a total of 25 representatives. The Board comprises at least 9 people with disabilities reflecting all types of disabilities, 3 representatives of families of persons with disabilities with one being a first-degree parent or kin, and 8 experts in the field of disability.</td>
<td>2007</td>
</tr>
<tr>
<td>Kuwait</td>
<td>Minister of Social Affairs and Labour</td>
<td>Ministry of Social Affairs and Labour, Ministry of Health, Ministry of Education and Higher Education, General Authority for Youth and Sports, two representatives of public welfare associations and clubs working in the field of tourism, two persons with competence and experience in the field of disability, Director General of PADA</td>
<td>2010</td>
</tr>
<tr>
<td>Country</td>
<td>Role/Title</td>
<td>Description</td>
<td>Year</td>
</tr>
<tr>
<td>---------</td>
<td>--------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Lebanon</td>
<td>Minister of Social Affairs</td>
<td>18 members, out of which 12 are elected, including four representatives of associations of persons with disabilities, four representatives of institutions and associations working in the field of disability, for members from the Ministry of Social Affairs (including the Minister of Social Affairs) and two persons appointed by the Minister</td>
<td>1993</td>
</tr>
<tr>
<td>Mauritania</td>
<td>Adviser to the Prime Minister</td>
<td>All represented government sectors, federal organizations for persons with disabilities, Federation of Employers, trade unions, local groups</td>
<td>2010</td>
</tr>
<tr>
<td>Qatar</td>
<td>The Chair of the National Human Rights Committee</td>
<td>System of focal points for disability related matters in line ministries or other governmental institutions, National Human Rights Committee</td>
<td>2013</td>
</tr>
<tr>
<td>Country</td>
<td>Role</td>
<td>Description</td>
<td>Year</td>
</tr>
<tr>
<td>------------------</td>
<td>----------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------</td>
</tr>
<tr>
<td>Sudan</td>
<td>President of the Republic (or his authorized representative)</td>
<td>All federal ministries, organizations and unions of persons with disabilities, National Assembly, State Councils</td>
<td>2010</td>
</tr>
<tr>
<td>Tunisia</td>
<td>Prime Minister</td>
<td>System of focal points for disability related matters in line ministries or other governmental institutions, Higher Committee for Human Rights and Fundamental Freedoms</td>
<td>2010</td>
</tr>
<tr>
<td>United Arab Emirates</td>
<td>Chairman of the Advisory Council for People of Determination</td>
<td>People of determination (persons with disabilities), government, and society</td>
<td>2017</td>
</tr>
<tr>
<td>Yemen</td>
<td>Executive Director of the Disabled Care and Rehabilitation Fund (DCRF)</td>
<td>Disability focal points of ministries and other governmental institutions (Ministry of Social Affairs and Labour, Ministry of Planning and International Cooperation, Ministry of Finance, Chamber of Commerce)</td>
<td>2002</td>
</tr>
</tbody>
</table>
## Annex 3. Monitoring frameworks by country

<table>
<thead>
<tr>
<th>Country</th>
<th>Entity(ies) on the monitoring framework</th>
<th>“Independent mechanism” on the monitoring framework</th>
</tr>
</thead>
<tbody>
<tr>
<td>Egypt</td>
<td>National Council for Disability Affairs</td>
<td></td>
</tr>
<tr>
<td>Iraq</td>
<td>Authority for the Care of People with Disabilities and Special Needs</td>
<td></td>
</tr>
<tr>
<td>Kuwait</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Lebanon</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Mauritania</td>
<td>National Human Rights Commission</td>
<td>National Human Rights Commission</td>
</tr>
<tr>
<td>Palestine</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Qatar</td>
<td>The National Human Rights Committee, the Ministry of Administrative Development, Labour &amp; Social Affairs, the Qatar Foundation for Social Work</td>
<td>Ministry of Administrative Development, Labour &amp; Social Affairs; the Qatar Foundation for Social Work; The National Human Rights Committee</td>
</tr>
</tbody>
</table>

39
<table>
<thead>
<tr>
<th>Country</th>
<th>Agencies/Entities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Saudi Arabia</td>
<td>Coordinating Council of the Human Rights Commission (governmental entity); Coordinating Council of Charitable Associations on Disability (civil authority); Bureau of Experts</td>
</tr>
<tr>
<td></td>
<td>Coordinating Council of Charitable Associations on Disability</td>
</tr>
<tr>
<td>Sudan</td>
<td>Advisory Council for Human Rights</td>
</tr>
<tr>
<td></td>
<td>Advisory Council for Human Rights</td>
</tr>
<tr>
<td>Syria</td>
<td>Ministry of Social Affairs and Labour, Department of Disability of Affairs, Sports Olympiad for Persons with Disabilities, Central Council for Disability Affairs, medical committees in the Ministry of Health, Ministry of Education, Ministry of Higher Education</td>
</tr>
<tr>
<td>Tunisia</td>
<td>Higher Committee for Human Rights and Fundamental Freedoms</td>
</tr>
<tr>
<td>United Arab Emirates</td>
<td>Advisory Council for People of Determination</td>
</tr>
<tr>
<td>Yemen</td>
<td>Ministry of Social Affairs and Labour, Ministry of Planning and International Cooperation, Ministry of Finance and the Chamber of Commerce</td>
</tr>
</tbody>
</table>
## Annex 4. Reporting to the CRPD Committee by country

<table>
<thead>
<tr>
<th>Country</th>
<th>Entity with primary responsibility for drafting States’ reports to the CRPD Committee</th>
<th>Other entities that cooperate in the preparation of State reports</th>
<th>Primary representative at CRPD Committee sessions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bahrain</td>
<td>Ministry of Labour and Social Development</td>
<td>UNDP</td>
<td>High Commission for Disability Affairs</td>
</tr>
<tr>
<td>Iraq</td>
<td>Authority for the Care of People with Disabilities and Special Needs</td>
<td>Civil society organizations</td>
<td>Authority for the Care of People with Disabilities and Special Needs</td>
</tr>
<tr>
<td>Jordan</td>
<td>Higher Council for the Rights of Persons with Disabilities</td>
<td>All relevant ministries and civil society organizations</td>
<td>Higher Council for the Rights of Persons with Disabilities</td>
</tr>
<tr>
<td>Mauritania</td>
<td>Inter-ministerial technical committee</td>
<td>Ministry of Social Affairs, Childhood and Families</td>
<td></td>
</tr>
<tr>
<td>Morocco</td>
<td>Inter-ministerial Committee for Human Rights</td>
<td>National institutions, Parliament, civil society organizations</td>
<td>Ministry of Family, Solidarity, Equality and Social Development</td>
</tr>
<tr>
<td>Oman</td>
<td>Oman Human Rights Committee</td>
<td>Ministry of Foreign Affairs</td>
<td>Oman Human Rights Committee</td>
</tr>
<tr>
<td>Palestine</td>
<td>Each Ministry according to their specialization, coordinated by the Ministry of Foreign Affairs</td>
<td>Different ministries and the associations working in this area</td>
<td>Ministry of Social Development</td>
</tr>
<tr>
<td>Qatar</td>
<td>Ministry of Foreign Affairs, The National Human Rights Committee</td>
<td>The National Human Rights Committee in cooperation with other relevant entities</td>
<td></td>
</tr>
<tr>
<td>Saudi Arabia</td>
<td>Committee for the Coordination of Services for Persons with Disabilities</td>
<td>Charities and the private sector</td>
<td>Ministry of Labour and Social Development</td>
</tr>
<tr>
<td>Country</td>
<td>Body/Agency</td>
<td>Other Organizations</td>
<td>Ministry/Authority</td>
</tr>
<tr>
<td>--------------</td>
<td>------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------</td>
</tr>
<tr>
<td>Sudan</td>
<td>Advisory Council for Human Rights in cooperation with the National Council for Persons with Disabilities</td>
<td>Ministries, government agencies and voluntary organizations in the field</td>
<td>Ministry of Foreign Affairs and Advisory Council for Human Rights</td>
</tr>
<tr>
<td>United Arab Emirates</td>
<td>Ministry of Community Development</td>
<td>All ministries, federal and local authorities and persons with disabilities</td>
<td>Ministry of Community Development</td>
</tr>
<tr>
<td>Yemen</td>
<td>Ministry of Social Affairs and Labour</td>
<td>Entities specialized in the rehabilitation of persons with disabilities (Rehabilitation Fund for the Disabled)</td>
<td>Ministry of Social Affairs and Labour, Union for the Disabled</td>
</tr>
</tbody>
</table>
REFERENCES


Reports submitted by States Parties under Article 35 of the Convention to the CRPD Committee:


Replies of Kuwait to the list of issues in relation to the initial report (submitted 2019). CRPD/C/KWT/Q/1/Add.1. Available from: