



Convention on the Rights of Persons with Disabilities

Distr.: General
3 May 2012

Original: English

Committee on the Rights of Persons with Disabilities Seventh session

Summary record (partial)* of the 67th meeting

Held at the Palais Wilson, Geneva, on Tuesday, 17 April 2012, at 3 p.m.

Chairperson: Mr. McCallum

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* No summary record was prepared for the rest of the meeting.

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The meeting was called to order at 3 p.m.

Consideration of reports submitted by States parties under article 35 of the Convention (continued)

Initial report of Peru (continued) (CRPD/C/PER/1; CRPD/C/PER/Q/1 and Add.1)

1. *At the invitation of the Chairperson, the delegation of Peru took places at the Committee table.*
2. **Ms. Yang Jia** said that, under article 30 of the Convention, persons with disabilities must be not only observers but also participants in cultural life. Bearing in mind that sporting activities facilitated integration in society for persons with disabilities, she wished to know more about how Peru encouraged participation in such activities by young persons and adults with disabilities. For example, to what extent would Peru be participating in the London 2012 Paralympic Games?
3. **Ms. Caballero de Clulow** (Peru), replying to questions posed earlier, said, with regard to article 25 of the Convention, that nearly 60,000 patients had been seen in rehabilitation centres throughout the country in 2010, approximately half of them women. Over 14,000 women receiving rehabilitation services had been aged between 20 and 64. Approximately 21,000 patients with motor disabilities had been cared for, representing nearly a third of all patients receiving rehabilitation services, as well as over 13,000 patients with other physical disabilities. The statistics had been provided by the Ministry of Health, which had a national database on acts of care performed for persons with disabilities and on the number of patients.
4. Of the 282 hospitals providing rehabilitation services, 135 had residential facilities, while 80 did not, and 67 offered medical support services. Some 50 mental health hospitals dealt with adults and elderly persons, and 52 cared for children and adolescents. Private insurance did not cover persons with disabilities when the disability was considered to be a pre-existing condition.
5. In order to ensure that health services were provided as close as possible to people's own communities and that such health services were gender-sensitive, in line with articles 19 and 25 of the Convention, specific legislation had been passed, including the Framework Act on Universal Access to Health, and efforts had been made to strengthen primary care services. In addition, the Ministry of Health had issued Ministerial Decisions Nos. 520 and 308 adopting the technical health regulations of the Rehabilitative Medical Service Production Unit. Further work was required by the Government, in cooperation with the different sectors involved, in order to translate the legislation and decisions cited into specific actions and services for persons with disabilities.
6. **Mr. Guzmán Jara** (Peru) said that the non-contributory social scheme enabling persons with disabilities to benefit from primary health-care services did not apply in the case of congenital disabilities. The Government would try to ensure, however, that persons with disabilities were covered in future by the "Crece Juntos" (let's grow together) social programme, which provided a small amount of income support. Peru had also started a non-contributory pension scheme entitled "Pension 65" and legislation was being drawn up, with the support of the National Council for the Integration of Persons with Disabilities (CONADIS), to extend the scheme to persons with severe disabilities living in extreme poverty. Under the national technical health regulations, all types of health facilities, including hospitals and research centres, were required to have rehabilitation centres or programmes. That goal had not yet been achieved throughout the country, but work to that end was under way.

7. With regard to forced sterilization of persons with mental health problems, the Ministry of Health had issued Ministerial Decision No. 536 of 2005, which was currently being examined with the aim of bringing it into line with the Convention. Forced sterilization or abortion carried out on persons with disabilities were offences under the Criminal Code.

8. **Ms. Caballero de Clulow** (Peru) said that, following a 2006 ruling by the Constitutional Court, the Government was in the process of revoking a number of articles of Act No. 29737, which authorized involuntary confinement for persons with mental disabilities. The Government believed that involuntary confinement should be authorized only for persons with mental disabilities who had been declared to lack legal capacity, in cases where they were at risk of harming themselves or others, or in accordance with security measures ordered following an act of wilful wrongdoing. Act No. 29737 would thus be brought into line with the international obligations entered into by Peru, including article 14 of the Convention.

9. **Mr. Rojas Julca** (Peru) said that the Government was uncompromising in its efforts to combat all forms of violence against women and children. The Ministry for Women and Vulnerable Population Groups had a specific vice-ministry for women, one of the main tasks of which was to combat violence against women. To that end, a system of women's refuges, or safe houses, had been set up throughout Peru, with funding provided to ensure their operation 24 hours a day. The safe houses supported women in their recovery from violence, with the cooperation of representatives of the national police force, the public prosecution service, judges, psychologists and social workers. Programmes were also run to promote women's economic empowerment and entrepreneurship, since women's financial independence was a fundamental tool for combating violence. Violence against women was severely punished. Congress had adopted a specific regulation relating to the offence of femicide, which incurred the maximum penalties under the Criminal Code.

10. **Ms. Caballero de Clulow** (Peru) said that, under article 3 of the General Act on Persons with Disabilities (Act No. 27050), persons with disabilities enjoyed the right to participate in political and public life on the same footing as the rest of the population. That included the right to vote. Under the Elections Act, the National Election Procedures Office was required to implement whatever measures were necessary to ensure that persons with disabilities could cast their vote. The Government, through the National Identity and Civil Status Registry, had issued Decision No. 508 of 2011, under which persons with intellectual disabilities were required to be included on the electoral roll and the necessary facilities provided to ensure that they could exercise their right to vote on an equal basis.

11. **Mr. Guzmán Jara** (Peru) said that Regionalization Act No. 27867, as amended by Act No. 17902, provided for political participation by persons with disabilities, while the guidelines for the regional and municipal offices established to support persons with disabilities highlighted the importance of citizens' participation. In addition, under articles 80 to 98 of the Civil Code, all persons had the right to freedom of association; accordingly, persons with disabilities were able to set up not-for-profit organizations, associations and foundations.

12. Currently, five members of Congress had physical disabilities, as did one of the Peruvian members of the Andean Parliament. While the political participation of persons with disabilities in general and local elections had increased, more progress still needed to be made.

13. The General Act on Sport (Act No. 28036) had established a national council for sport, which governed sports policy in Peru; CONADIS had been represented on the council since January 2002. Under the Act, sports facilities were required to be adapted for persons with disabilities. While full participation by persons with disabilities in all sports

events had not yet been achieved, work was being carried out to that end. CONADIS, for example, had decided to set up national sports federations for persons with disabilities, covering people with physical, visual or intellectual disabilities. The work of the federations would be covered by the general budget of the national institute for sport.

14. **Ms. Caballero de Clulow** (Peru) said that the Ministry for Women and Vulnerable Population Groups, under its programme to combat domestic and sexual violence, had designed and implemented a number of policies and activities at national level to care for, protect and support victims of domestic and sexual violence. Means of protection for women with disabilities included preventive policies and the emergency shelters for women.

15. Peru's criminal legislation had been strengthened to improve protection of the right to life, health and honour of children and adolescents. Under the amended provisions of the Criminal Code covering offences of sexual violence, article 172 made it an aggravating circumstance to engage in a sexual act with a person suffering from a psychological disorder or intellectual disability, or who was unable to resist. Such offences were punishable by a prison sentence of between 20 and 28 years. The Criminal Code also contained a series of penalties, the most serious of which was life imprisonment, for the offence of engaging in a sexual act with a child under the age of 10. Where victims were between 10 and 14 years of age, the penalty was a prison sentence of between 30 and 35 years, and where they were between 14 and 18 years of age, a prison sentence of between 25 and 30 years. Other articles of the Criminal Code prohibited and punished acts of child sexual exploitation in the context of tourism, with penalties including prison sentences and, in the case of public officials, teachers or carers who committed such acts, dismissal.

16. The National Family Welfare Institute provided temporary shelters for abandoned children, abused women, the elderly, persons with disabilities and indigent persons. Mental health hospitals took in persons with disabilities or those who required continuing supervision.

17. **Mr. Rojas Julca** (Peru) said that a bill prohibiting all forms of punishment that violated the physical or psychological integrity of minors had been approved by the Council of Ministers and would be submitted to Congress in due course. The bill would not prevent parents from correcting their children but would outlaw all forms of abusive punishment in the home, at school and in any other environment.

18. **Mr. Guzmán Jara** (Peru) said that the Government endeavoured to achieve the broadest possible civil society involvement in Government consultations and policymaking and that it recognized the scale and value of civil society's contribution to development in general and the specific advances achieved in Peru in particular. That recognition was reflected in various measures and provisions. For example, the General Act on Persons with Disabilities, as amended, expressly stipulated that civil society should be involved in the development, evaluation and implementation of social policies and programmes concerning disability. Furthermore, civil society organizations had the possibility of taking part in the participatory budget councils of all of the country's more than 1,800 local and regional authorities. That ensured persons with disabilities a voice in decisions concerning the application of resources, particularly resources for infrastructure development. A multisectoral commission had been established to monitor implementation of the Convention, and CONADIS would be initiating ongoing monitoring activities in conjunction with the Ombudsman's Office, civil society and human rights organizations in the months ahead.

19. Organ trafficking was prohibited in Peru in all circumstances and occurred only in the context of organized crime.

20. **Mr. Rojas Julca** (Peru) said that, under a 2010 directive on civil defence, the authorities were required to adopt specific measures guaranteeing the protection and safety of persons with disabilities in the event of natural disasters and ensure that such persons were prioritized in emergency and evacuation plans. As a country located on the Pacific Ring of Fire, Peru recognized the need to foster a culture of risk management, prevention and disaster preparedness at all levels of government and across all layers of society, besides doing everything possible to guarantee protection for the most vulnerable.

21. **Ms. Cabellero de Clulow** (Peru) said that the main vehicle for raising awareness of disability issues in Peru was the radio programme *Sin Barreras* (without barriers), which broadcast reports and interviews on issues in health care, employment, accessibility, the arts, sport and science, among other areas. Other significant awareness-raising activities included the events organized to mark the National Day of Persons with Disabilities on 16 October, the International Day of Persons with Disabilities on 3 December and World Autism Awareness Day on 2 April.

22. The duties of CONADIS, as established in article 8 of the General Act on Persons with Disabilities, included advising public- and private-sector bodies on care, assistance and social integration schemes for persons with disabilities, monitoring and supervising organizations that worked to support persons with disabilities, and administering fines in the event of non-compliance with the Act's provisions. To foster compliance with the Act, and also with international treaties and conventions concerning disability, CONADIS had been actively promoting inter-institutional agreements with Government ministries, professional associations, regional governments, local authorities and civil society. Civil society days offering legal advice, medical assistance and access to motorized devices were organized on a regular basis with ministerial support, as well as workshops and seminars to increase knowledge of the rights of persons with disabilities and provide a forum for monitoring respect for those rights in the public and private sectors. Work was also under way to strengthen the capacity of the regional and municipal offices for persons with disabilities and bring them into compliance with national and international legal standards.

23. **Mr. Guzmán Jara** (Peru) said that copious legislation to improve the quality of life of persons with disabilities had been enacted and that CONADIS must henceforth invest equivalent energy in raising from State bodies the financial resources needed to make the legislative advances a practical reality. Awareness-raising and training initiatives to educate decision-makers in government and society at large were vital to that end. There were around 2,500 autonomous bodies with their own budget resources that might, with appropriate encouragement, contribute to the required increase in public investment.

24. It was vital that public officials at all levels of government were mindful of the need to ensure disability-inclusive development. Peru had enjoyed sustained growth of around 7 per cent per annum for the past 10 years, and the current Government was fully committed to economic growth as the cornerstone of development. However, it was equally committed to ensuring human development through improved health care, education, employment, access to drinking water and electrification such as to benefit all persons, including those with disabilities. As political participation was a core element of human development, it was likewise essential that persons with disabilities had the opportunity to participate directly as citizens in public affairs.

25. **Mr. Ríos Espinosa** asked whether reports of narcoleptic drugs being administered to institutionalized patients with psychosocial disabilities in Victor Larco Herrera psychiatric hospital were accurate. He also wished the delegation to comment on the derogatory terms and discriminatory content of the Aliens Act, which restricted access to Peruvian nationality for persons with disabilities.

26. **Mr. Al-Tarawneh** noted that while, according to the State party's report, less than 10 per cent of the Peruvian population had a disability, globally, according to the *World report on disability* published by the World Health Organization (WHO) and the World Bank in 2011, around 15 per cent of the population lived with a disability of some form. In view of that divergence, he wondered whether the Government had taken the new statistics provided in the latter document into consideration when compiling the statistics detailed in its own report.

27. **Mr. Kim Hyung Shik**, referring to article 32 of the Convention, asked what specific measures had been adopted to ensure that persons with disabilities were involved in developing and implementing policies for disability-inclusive development, how good practice was shared and what the authorities were doing to encourage research into assistive technologies. He would also appreciate examples of partnerships for international cooperation involving persons with disabilities.

28. **Ms. Peláez Narváez** asked for information about measures in place to guarantee vigilance in protecting minors with disabilities from sexual abuse, exploitation and organ trafficking, which the State party had acknowledged was needed in its replies to the list of issues (CRPD/C/PER/Q/1/Add.1). Noting that those replies also indicated that there were currently around 145 children with disabilities in residential care centres in Peru, she enquired what efforts the State party was undertaking to provide care within the wider family or within the community in a family setting in those cases where the immediate family was unable to care for a child with a disability, as States were encouraged to do under article 23, paragraph 5, of the Convention. For example, were children with disabilities included in national and international adoption programmes?

29. She had been concerned to learn that the recently revised text of the Criminal Code stipulated that sex trafficking in children was a criminal offence subject to prosecution only when the victims were aged 14 or under. Since sex tourism and other forms of sexual abuse continued beyond that age, there should be no such limit. She would therefore like to know what the State party planned to do to remedy that shortcoming and ensure that fundamental rights were respected.

30. She also wished to know whether national programmes for children and adolescents provided for the specific needs of children with disabilities. She would particularly appreciate information about measures in place to facilitate early diagnosis and ensure that children with disabilities had every opportunity to develop their full potential and enjoy the best possible quality of life. In addition, she would welcome clarification of certain inconsistencies in the information on forced sterilization: although forced sterilization was expressly prohibited under the Criminal Code, it was recognized that women with psychosocial disabilities were sometimes subjected to such procedures.

31. Lastly, noting with satisfaction the recent legislative amendments that legitimized abortion for victims of incest, she asked how the Government intended to guarantee that women with disabilities who had suffered such abuse received the legal support and guidance necessary to exercise their rights and enjoy effective access to justice.

32. **Mr. Langvad** said that he would like to know how civil society organizations of persons with disabilities had been involved in planning and decision-making regarding international cooperation. Statistics had been referred to many times during the dialogue; he wondered whether the Government had taken account of the shift from a medical to a social model of disability embodied by the Convention in gathering data and calculating statistics pertaining to persons with disabilities.

33. **Ms. Cisternas Reyes** said that, while some examples had been given of high-level participation in public life by women with disabilities, she wished to know whether the participation of women with disabilities at the local and regional levels was measured.

More information on the national action plan for children and adolescents would also be useful, including whether the plan took account of indigenous and Afro-descendent children with disabilities, and what percentage of children with disabilities from those communities participated in public life.

34. **Mr. Ben Lallahom** asked for more information regarding the strategic programmes on children's nutrition, literacy, neonatal and postnatal care administered by the Ministry of Economic Affairs and Finance.

The meeting was suspended at 4.10 p.m. and resumed at 4.30 p.m.

35. **Mr. Rojas Julca** (Peru) said that the General Act on Persons with Disabilities, as amended, facilitated the participation of persons with disabilities in public and cultural life, inter alia, by granting them a 50 per cent discount on the cost of tickets for events organized by the State.

36. All psychotropic drugs administered to patients at Victor Larco Herrera psychiatric hospital were legally registered. Patients were treated in accordance with the plan for psychiatric patients for the period 2012–2022, the goal being to provide care alongside family and community support.

37. It was recognized that the Aliens Act, which had been enacted several decades previously, was obsolete and the Government was attempting to modernize the regulations on acquisition of Peruvian nationality to ensure their compliance with international legislation.

38. **Mr. Guzmán Jara** (Peru) said that, according to the most recent census, 10.9 per cent of the population was living with a disability, although that figure had been revised to 15 per cent following the publication of the *World report on disability* in 2011. The Government planned to conduct a specialized national survey on disability using a sample of 230,000 families. A new methodology that went beyond the medical model of disability would be applied. It was hoped that new protocols could be developed, based on the outcome of the specialized survey and of a census to be carried out in Tumbes region, to enable a broader range of issues to be considered in future research on disability, including education, health, accessibility, reintegration into the labour market and poverty.

39. The Government had received little in the way of financing from international sources to support the implementation of the Convention, although Peruvian civil society organizations had been more successful in that regard. It therefore wished to appeal to the international community to implement fully the Convention's provisions on international cooperation.

40. Certain ethnic groups in Peru continued to eliminate children born with disabilities through starvation, abandonment and similar practices. There was a need to obtain the financial resources required to study the extent of the problem and to change attitudes towards children with disabilities. He noted, in that regard, that the international community seemed to view abortion as legitimate if continuing the pregnancy would result in the birth of a child with a disability.

41. There was a national plan to combat organ trafficking and trafficking for purposes of sexual exploitation or employment for the period 2011–2016. The plan should, however, focus specifically on persons with disabilities, who were particularly vulnerable to those phenomena.

42. **Ms. Caballero de Clulow** (Peru) said that protecting the personal inviolability of children, particularly children with disabilities, was a priority for the Government. Regarding the penalties applicable for sexual violence against children, the legislation on the matter divided child victims into three groups: children aged under 10 years, children

aged 10 to 14, and children aged 14 to 18. All persons up to the age of 18 years were afforded the greatest possible protection against sexual violence, but the exact penalties imposed on offenders varied according to the age of the victim, with harsher penalties applicable for offences against the youngest victims.

43. **Mr. Guzmán Jara** (Peru) said that abortion was an offence under the Criminal Code. Forced sterilization, however, was permitted to be performed on persons with psychosocial disabilities under Ministerial Decree No. 536 of 2005. The Government and CONADIS were fully committed to correcting that state of affairs.

44. Peru had initiated a process of economic growth and inclusive development. There was a results-based budget for measures to support persons with disabilities. Major funding had been secured under the budget for programmes in such areas as inclusive and special education, early intervention, and health and accessibility. The overall budget for persons with disabilities in 2012 was 180 million nuevos soles, and it was expected to increase by 1 per cent in 2013, along with all budget allocations. It was hoped to establish a disabilities research centre providing online information about equal opportunities, the Convention, local resources, and programmes and policies pertaining to persons with disabilities.

45. In the past, many of the country's social programmes had not focused on the inclusion of persons with disabilities. To address that problem, CONADIS was taking a leading role in monitoring inclusion. The efforts made to ensure that persons with disabilities were covered by the "Pension 65" scheme, the Food Supplement Programme and the non-contributory health-care scheme for the poorest were examples of progress made in that regard.

46. **Mr. Rojas Julca** (Peru) said that the dialogue with the Committee had been a learning opportunity, offering much food for thought. Peru would continue to strive to meet its international obligations, and the Government looked forward to receiving the Committee's recommendations.

47. **The Chairperson** thanked the delegation for its comprehensive and detailed answers to the Committee's questions, noting that the Committee and the Government were working towards the same goal of improving the lives of persons with disabilities.

The discussion covered in the summary record ended at 4.50 p.m.