



UNPRPD MPTF
Partnership on the Rights of Persons with Disabilities



UNITED NATIONS
TUNISIA



SITUATIONAL ANALYSIS OF THE RIGHTS OF PERSONS WITH DISABILITIES

TUNISIA



COUNTRY BRIEF



UNPRPD MPTF
Partnership on the Rights of Persons with Disabilities



UNITED NATIONS
TUNISIA



SITUATIONAL ANALYSIS OF THE RIGHTS OF PERSONS WITH DISABILITIES IN **TUNISIA**

COUNTRY BRIEF

November 2022

Disclaimer

This brief was prepared by the Technical Secretariat. It summarizes the key findings from the situational analysis report and does not necessarily reflect the position of the UNPRPD MPTF.

CONTENTS

Acronyms and abbreviations	4
1 Background	5
2 Why a country analysis?	6
3 Introduction to disability context in Tunisia	7
4 Findings	8
4.1 Stakeholder coordination mechanisms	8
4.2 Preconditions for disability inclusion	12
– Equality and non-discrimination	12
– Inclusive service delivery	13
– Accessibility	15
– CRPD compliant budgeting and financial management	16
– Accountability and governance	17
4.3 Cross-cutting approaches: Participation, gender, inequalities	19
4.4 Disability inclusion in broader development, humanitarian and emergency contexts	20
5 Conclusions	21
Annex 1	23

ACRONYMS AND ABBREVIATIONS

CRPD	Convention on the Rights of Persons with Disabilities
CSOs	Civil Society Organizations
MoE	Ministry of Education
MoH	Ministry of Health
MoSA	Ministry of Social Affairs
MPTF	Multi-Partner Trust Fund
OPDs	Organizations of Persons with Disabilities
OTHDDPH	Tunisian Organization for the Defence of the Rights of Persons with Disabilities
SRH	Sexual and Reproductive Health
ULPS	Local Units for Social Promotion
UNAT	National Union of Persons with Visual Disability of Tunis
UNPRPD	United Nations Partnership for the Rights of Persons with Disabilities

1 BACKGROUND

The United Nations Partnership on the Rights of Persons with Disabilities Multi-Partner Trust Fund (UNPRPD MPTF) is a unique partnership that brings together United Nations (UN) entities, governments, organizations of persons with disabilities (OPDs), and broader civil society to advance the implementation of the Convention on the Rights of Persons with Disabilities (CRPD) and disability-inclusive Sustainable Development Goals (SDGs) at the country level around the world.

The UN entities participating in UNPRPD are ILO, OHCHR, UNDESA, UNDP, UNESCO, UNICEF, UNFPA, UN Women and WHO. Other UNPRPD members include the International Disability Alliance and the International Disability and Development Consortium (IDDC). The main contributors to the UNPRPD MPTF are Australia, Finland, Norway, Sweden and the United Kingdom.

In 2020, with the Strategic and Operational Framework 2020-2025 UNPRPD adopted a new programme design approach. The Framework moves towards proactive, results-oriented joint programming to drive implementation of the CRPD and disability-inclusive SDGs.

In the same year, the UNPRPD launched its fourth funding call and invited UN Country Teams (UNCTs) to submit proposals for joint country-level programmes with the objectives of advancing CRPD implementation and improving the implementation of disability-inclusive SDGs. The 26 selected teams (see Annex 1) were then allocated an initial budget to deliver an induction training, conduct a country situational analysis and complete a full joint programme proposal based on the findings of the situational analysis.

The 26 countries each conducted a comprehensive multistakeholder situational analysis to identify gaps and opportunities around preconditions to CRPD implementation and agree on a set of recommendations to address them.

From March to December 2021, the Tunisia UNCT conducted the comprehensive situational analysis. The methodology included a desk review of relevant literature, key informant interviews and focus groups, stakeholder mapping exercises, and consultative workshops with key stakeholders.

The full situational analysis report can be found [here](#).

2

WHY A COUNTRY ANALYSIS?



Many countries still struggle to transform the CRPD into concrete policies, systems, programmes and services that uphold the rights of persons with disabilities. It is urgent that governments and their implementation partners deliver on their SDG commitments through CRPD-compliant interventions. To support countries in the most catalytic way requires understanding the main bottlenecks and priorities in each country in relation to the fulfilment of the CRPD. We needed to know who the key stakeholders are, how implementation/monitoring mechanisms are functioning (or not), which capacities stakeholders may need to improve, and which ongoing development processes could be leveraged to become more disability inclusive.

The situation analyses were designed to:

- Inform the design of future PRPD funded programmes in the country and serve as a baseline for them;
- Inform UNCTs of gaps in achieving disability inclusion in ongoing national processes and programmes and recommend further, in-depth analysis where needed;
- Build a base of mutual understanding and working relationships among UN entities, government, OPDs and other civil society organizations (CSOs), as well as the private sector and academia, as the basis for future co-design of joint programmes;
- Strengthen the capacity of those stakeholders to more effectively include and address the rights of persons with disabilities as outlined in the CRPD; and,
- Serve as an advocacy tool for ODPs and other civil society partners, both national and international.

3

INTRODUCTION TO DISABILITY CONTEXT IN TUNISIA

 Population	12 million
 Disability Prevalance	14.1% [2017]¹

Tunisia ratified the CRPD in 2008. However, its definition of ‘disability’ has evolved over time, initially involving a medical approach and now gradually shifting to a human rights and social-environmental approach. Over the years, the government has supported a range of well-meaning initiatives for persons with disabilities, such as financing individual micro-projects, developing specialized services, encouraging the creation of local associations and specialized centres providing services throughout the territory, and allocating financial support for their management. However, these initiatives have fostered a medical- and charity-based perception of people with disabilities, preventing the emergence of representative organizations of people with disabilities to advocate and assert themselves as rights holders.

Persons with disabilities were practically absent from the social movements claiming rights and rejecting injustice leading up to the 2011 revolution. No real structures or human rights-based organizations existed to represent their rights and express their needs. Over time and with the support of international organizations, the movement of persons with disabilities began to develop and organize, first through the creation of the Tunisian Organization for the Defense of the Rights of Persons with Disabilities, and next, the Tunisian Association for the Rights of Persons with Disabilities, followed by local OPDs, such as the organization *Ville pour tous*.

4 FINDINGS

4.1 Stakeholder coordination mechanisms

The key stakeholders responsible for implementing and monitoring the CRPD are highlighted below. A full list of stakeholders is included in the full report.

Government

- The **Ministry of Social Affairs (MoSA)** is the ministry with overall responsibility for issues related to persons with disabilities. It manages institutions that provide specialized education, care and professional training for these persons. The MoSA is responsible for granting disability cards, which allow persons with disabilities to benefit from certain services. It is also responsible for the social care of persons with disabilities and the commission in charge of reviewing their requests when applying for employment.
- **The Ministry of Education (MoE)** has led the inclusive education program since the early 2000s. It was strengthened by the Orientation Act No. 2005-83, which guarantees all students with disabilities the right to attend regular education. However, 16,496 persons with disabilities are still registered in MoSA's special education facilities, while only 4,439 children with disabilities were enrolled in mainstream primary classes (ages 6 to 12 years) in 2020.
- **The Ministry of Health (MoH)** plays a vital role in medical and therapeutic treatment and early diagnosis of disabilities through its programmes and national or subnational bodies.
- **The National Family and Population Board**, which falls under the MoH, is responsible for sexual and reproductive health (SRH) services. It lacks both the capacity to support women and girls with disabilities who are victims of sexual violence and the norms and standards to ensure that SRH services and information are accessible to persons with disabilities.

In addition to the ministries, national-level public institutions include:

- The **Higher Institute of Specialized Education**, formerly known as the Institute for the Promotion of Disability, falls under the Ministry of Higher Education and Scientific Research and the MoSA. It provides disability-related training and research and offers special education and professional training units for adolescents aged

12-15 with intellectual disabilities. Its **Prevention and Rehabilitation Unit** provides disability diagnosis and testing, as well as medical and psychological care for children with disabilities.

- The **Vocational Rehabilitation Center** for persons with disabilities and injured people is a public institution under the MoSA. It provides rehabilitation and vocational training services to persons with disabilities.
- The Parliamentary **Commission for Persons with Disabilities and Other Vulnerable Groups** is composed of deputies who, nonetheless, lack sufficient knowledge of the CRPD. It continues to take a medical approach to disability and recognizes the MoSA as the ministry of reference for persons with disabilities.

Subnational, regional and local systems and coordination

- **Local Units for Social Promotion (ULPS):** These units represent the MoSA at the local level and exist across the country. They are the primary point of contact for persons with disabilities, particularly for seeking to obtain and renew their disability cards. They are also in charge of advising and referring persons with disabilities and their families to available services.
- **Regional Rehabilitation Units:** Under the supervision of the MoH, they function as regional representations (one per governorate). They provide medical and therapeutic care for children with disabilities, as well as advice and guidance to parents through their multidisciplinary teams.

Organizations of persons with disabilities

- **National Union of Persons with Visual Disability of Tunis (UNAT)**, founded in 1956, was, for many years, Tunisia's only OPD. Other OPDs representing persons with hearing disability, such as *La Voix du Sourd Tunisie*, emerged later (1983). The Tunisian Organization for the Defence of the Rights of Persons with Disabilities (OTDDPH), the first OPD representing groups of persons with disabilities, was not created until 2012. Its elected board of directors is made up of persons with disabilities. Its main mission is to advocate for the rights of persons with disabilities. The OTDDPH was instrumental in gaining recognition of the rights of persons with disabilities in the Tunisian Constitution, drafting the Tunisian Charter on the Rights of Persons with Disabilities, and organizing the lobbying efforts for the Charter. It is one of the most important advocates for persons with disabilities in dealing with the government and decision-makers.
- The **Parents and Friends of Persons with Disabilities Association of Tunis** is a parent representative association, with local branches. There are no OPDs of persons with intellectual disabilities.

The need for capacity building and coalition building among OPDs persists because of the competition among some actors in the area of training and funding opportunities. Another important aspect is the generational gap between some of the OPD leaders. The UNAT is considered a historical actor that has been active over several decades and a well-established membership organization. The non-governmental organizations, *La Voix du Sourd* and OTDDPH, take a more advocacy-based approach and were created

post-2011 by young activists from the community of persons with disabilities. Cooperation exists, but rarely involves coalitions and joint advocacy on medium-term initiatives.

UN System

The UN system has supported disability inclusion in Tunisia through UNPRPD projects. Project details can be found in the full report.

Summary of stakeholder coordination analysis

Apart from the designated ministries and public institutions, every ministry is mandated to have a disability department or focal point. The role of these focal points is to mainstream knowledge and participate in national efforts. However, some ministries approach disabilities on a case-by-case basis, rather than take a holistic approach. Most ministries do not consider persons with disabilities as a target group. Thus, few of them include disability in their action strategies, let alone in their programmes. Rather, persons with disabilities are perceived as a vulnerable group under the responsibility of the MoSA, or as a group with medical needs to be referred to the MoH.

The role and involvement of persons with disabilities and their representative organizations is still limited, both in terms of programme development and participation in general. This is because the consulting mechanisms are not designed to facilitate or encourage their involvement. Addressing those issues would increase the participation of people with disabilities, particularly underrepresented groups, such as women and girls.

- First, OPDs have limited capacity in the areas of advocacy, project management and communication. When the disability advocacy movement was launched after the 2011 revolution, international cooperation organizations supported training and capacity building sessions for people with disabilities. The goal was to raise awareness among those individuals and familiarize them with the concepts of rights and advocacy so that they could become more vocal about their cause in the public sphere. Before the revolution, the general public understood little about these issues. Still, OPDs have insufficient expertise and abilities compared to other human rights movements, such as the women's rights movement.
- Second, the number of OPDs is limited, as is their representativeness. There is no federation of OPDs or coalition in Tunisia that brings together all groups of individuals with disabilities. Existing OPDs are primarily local or sectoral (for example, around culture or sports) and national organizations are not particularly representative. The lack of a unifying voice complicates decision-makers' duties as this fragmentation increases the likelihood of varied and opposing demands.
- Third, none of the established OPDs include underrepresented populations. The small number of OPDs and their limited capacities explain the absence of underrepresented groups in consultations with authorities, as well as their exclusion from any social activity. Indeed, there are no OPDs that represent individuals with intellectual impairments, persons with hearing and visual impairment, or people with psychosocial disabilities (the Orientation Act does not include the latter in its definition of persons with disabilities). Because

policymakers are unaware of these individuals' needs and challenges, the policies and programmes they create do not consider these persons.

- Fourth, the lack of a system-wide consultative process hampers consultation and engagement of OPDs. Because there is no government coordination structure that applies cross-cutting mechanisms across different ministries or that has the authority to monitor and enforce disability policies, OPDs and people with disabilities have not had the opportunity to engage in decision-making processes. Consultations are conducted on an ad hoc basis, upon request or in conjunction with a specific project or event, such as the development of the SDG report or the CRPD State report. A regular and permanent consultative system that is known to the public and, most importantly, accessible to all persons with disabilities, would be required to encourage the involvement of persons with disabilities and consideration of their needs and challenges.

4.2 Preconditions for disability inclusion

In its Strategic Framework, UNPRPD identified five preconditions as foundational elements that must be in place to address the rights of persons with disabilities across sectors. The following findings focus on these preconditions in the Tunisian context.

- 1 Equality and non-discrimination
- 2 Accessibility
- 3 Inclusive service delivery
- 4 CRPD-compliant budgeting and financial management
- 5 Accountability and governance

Equality and non-discrimination

Inadequate legal efforts and achievements to advance equality

Tunisia's 2014 Constitution stipulates that "the state protects individuals with disabilities from all forms of discrimination."² Although it is critical to emphasize the significance of this achievement, no new legislation or legislative changes have been implemented in support of this provision to date, seven years after the Constitution's adoption. Thus, in the absence of legislative measures to realize the principles of equality and non-discrimination in the treatment of persons with disabilities, they remain visions and ideals.

The 2005 Orientation Act strives to ensure equal opportunities for persons with disabilities, promote their rights and provide protection against discrimination of any kind. This law also defines discrimination. However, the definition of disability is incomplete compared to the CRPD's. Reasonable accommodation is not recognized as a form of discrimination and, indeed, the concept of reasonable accommodation does not exist under Tunisian law. In addition, the definition of "person with a disability" in Article 2 of the Orientation Act omits persons with psychosocial disabilities. The definition is rather narrow and takes a medical, rather a social, approach as promoted by the CRPD.

Systemized marginalization

People with disabilities are still largely marginalized in nearly all sectors. In education, children with disabilities are enrolled primarily in specialized centres, under the supervision of the MoSA, while the MoE should have responsibility for all children. In addition to being marginalized and excluded from the regular system, these children cannot obtain a valid certification at the end of their special education course.

Persons with disabilities receive vocational training in specialized facilities, which further isolates them from the labour market and from competition with people without disabilities, who receive instruction in public vocational training institutes. This has a significant impact

on the employment opportunities of people with disabilities. Despite an increase in the employment quota in the civil service and public and private firms from 2 percent to 5 percent, individuals with disabilities are still significantly stigmatized and face greater exclusion from the labour market than the general population. This is due primarily to educational and occupational training constraints.

Furthermore, the failure to recognize the legal capacity of persons with disabilities remains a major obstacle to their access to their rights and to achieving equality. Indeed, people with intellectual or psychosocial disabilities, blind people and deaf people have limited, if any, legal capacity, while persons with intellectual or psychosocial disabilities are subject to guardianship and co-guardianship. This deprives them of civil, political and other socio-economic rights.

Although Tunisia has signed the CRPD, it does not apply the Convention's Article 12 on equal recognition before the law. In addition, national law and practice contradict the CRPD's provisions. If legal capacity is not recognized, the principles of equality and non-discrimination cannot be implemented. This right is essential for the enjoyment of other rights, such as the right to self-sufficiency, to work and to engage in public and political life.

Key findings

- Certain legislative provisions amplify existing inequality, as evidenced by the lack of inclusive services that assure equality and non-discrimination on a practical level. The most important factor is that the law does not recognize the notion of reasonable accommodation or the absence of such accommodation as discrimination.
- Tunisia should review the framework of legal capacity and guardianship of persons with disabilities, particularly Article 23 of the Law on the Notary Profession and the 1958 law on public guardianship and adoption. This article contradicts the CRPD's principle of non-discrimination towards persons with disabilities.

Inclusive service delivery

Disability assessment and referral services

To benefit from services, social protection and other advantages established by the government, persons with disabilities must present a disability card. This card is issued at the request of the person with a disability or his/her family and may be renewed every five or 10 years. To apply for the disability card, the applicant must contact the ULPS or the regional MoSA body and submit documentation that includes a medical certificate. The application is presented to a regional commission chaired by the MoSA and composed of doctors, representatives of different ministries, and OPD representatives. The assessment is based on a form that commission members complete based on the applicant's application. They may ask to meet with the applicant, but this is not mandatory.

According to Decree 2005-3086 relating to the creation of regional commissions for persons with disabilities, the setting of disability criteria and the conditions for awarding

the disability card, assessments are based on medical, functional, psychological, social and economic criteria with a focus on medical and functional criteria, such as the cause of the impairment and its nature and degree. The degree of disability is scored according to a list of activities. The final score determines whether the person will receive a disability card and, in the affirmative, classifies the person based on three levels of disability severity. Each level is associated with a specific set of benefits. For example, the most serious degree of disability recognizes that a person needs a personal assistant/support person part-time or full time.

Disability support services

The Orientation Act 83 introduces the notion that organizations working in the field of disability complement the State's efforts to care for persons with disabilities. These organizations provide early intervention, special education, sheltered workshop vocational training and rehabilitation services and are funded by the government.

In addition to organizations providing day services, the MoSA manages several residential institutions for people with disabilities, especially those without family support. These institutions contradict the values promoted by the CRPD, which focus on community and family-based support services. Still, since 2012, at least four new institutions have been established in different governorates.

Persons with disabilities with a disability card are eligible for several benefits and support services. They include access to free health care, free transportation, free access to cultural and recreational areas, and the right to benefit from the employment quota. Certain advantages also apply to the personal assistant, who is usually the guardian but could be someone else.

Mainstream services

From a legislative perspective, the Constitution and the Orientation Act guarantee the eligibility of persons with disabilities to and accessibility of mainstream services. However, no measures are taken to ensure accessibility to these services. Although legislative measures exist, they are not implemented. Accessibility standards fail to consider all types of disabilities and do not recognize the notion of reasonable accommodation, although it is a key concept of the CRPD guaranteeing non-discrimination.

The legal gaps and the lack of monitoring explain the lack of access and use of public services by persons with disabilities. For example, while the general law provides for inclusive education, it is not reflected in practice. No resources are provided to develop an inclusive education system. Further, the commission that evaluates and decides whether a child may attend a mainstream school still relies primarily on a medical assessment. Special education schools still fall under MoSA's authority. Thus, it manages the funds, staff and all resources for students with disabilities under a separate system, while this should be the function of the MoE.

Key findings

- Existing legislative measures on inclusive service delivery are not implemented. The accessibility standards do not consider all types of disabilities and are not aligned with CRPD requirements. For example, Tunisian law does not recognize reasonable accommodation.
- The lack of processes to monitor the implementation of legislative policies impacts the accessibility of public services such as access to education, health and social protection.

Accessibility

Accessibility is a principle, a right and a tool required to access other rights. The CRPD mentions accessibility as one of the general principles described in Article 3 and dedicates a separate article – Article 9 - to it.

The Government of Tunisia has issued several decrees relating to accessibility standards for public spaces, services and communication:

- **Access to public spaces:** Despite the existence of a guide describing the technical accessibility standards, most public spaces are not accessible for all people with disabilities. In fact, most people with disabilities cannot circulate independently on the roadway, sidewalks or other areas because of existing obstacles.
- **Access to services:** General public services used by all citizens are not accessible to persons with hearing disabilities because sign language interpreters are not available. Persons with a hearing disability must bring an interpreter, at their own expense, to obtain health-, employment- or administrative-related services. To address this, a pilot project to train health professionals in sign language was conducted at a basic care centre in Jbal Lahmar with support from CSOs. In recent years, an organization of sign language interpreters was created in Tunisia. This group could work with the government to ensure that deaf people have access to basic services. Documentation in braille or audio in public services (including banks, post offices and public administration offices) is not available for blind persons. Blind and visually impaired children study in a specialized school affiliated with the Ministry of Education and use braille (the other specialized schools operate under the MoSA). No easy-to-read documentation is provided for people with intellectual disabilities.
- **Access to information:** As sign language is not recognized as an official language, deaf persons have difficulty obtaining access to information. The national television only recently began presenting the main news programme in sign language. Previously, only one of the day's news broadcasts was signed. Sign language communication has also been adopted since the 2014 elections. The Independent Superior Electoral Body issued a decree requiring political parties to use sign language in election-related communication. However, public communication has not adopted easy-to-read language.

Key findings

- Overall, persons with disabilities experience barriers to accessing public spaces, services and information. Although some laws exist to ensure accessibility in Tunisia, they are not enforced and persons with disabilities continue to be excluded.
- Tunisia has specialized systems – particularly for education - that exclude people with disabilities from accessing the same services as the rest of the population. Their exclusion from mainstream services increases stereotypes and prejudice and reinforces marginalization.
- The concept of reasonable accommodation does not exist under Tunisian law. For persons with disabilities, this constitutes an essential accessibility measure that would enable them to participate in, social, political and economic life.

CRPD compliant budgeting and financial management

Financial Planning and monitoring

As described above, the MoSA is the lead ministry for disability issues. As such, any policy, strategy or budget is linked to this ministry. According to the data collected from the MoSA, the 2021 disability affairs budget is 80 million Tunisian Dinars (US\$28.4 million). Disability-related spending by other ministries (such as health and education) is unknown. There is no transversal approach to disability and no interministerial structure in charge of disability policy and action plans, which prevents a unified approach in line with the CRPD.

Regulation and support for the additional costs of disability

In 2012, the MoSA developed a national strategy outlining the direction and principles for the social and economic inclusion of persons with disabilities. However, an action plan and budget were never developed. Consequently, the strategy has not been implemented.

Another effort to implement the CRPD has been in the planning phase since 2018. With support from Italian cooperation, its budget totals \$1 million. However, this project has not yet been launched, due primarily to administrative and bureaucratic obstacles to engaging other ministries, as well as the regular reshuffling of ministerial cabinets. Finally, the COVID-19 crisis posed another obstacle, shifting the focus of the various agencies and entities to a crisis response.

The MoSA reports that it has a budget of nearly \$24 million to create, maintain or sustain specialized services, but developing an inclusive system is not considered a priority. Under the CRPD, any investment in specialized services is contrary to its principles. However, transitioning from a specialized to an inclusive system requires a careful and detailed action plan with specific annual targets, as well as a budget. The plan must respect the rights of persons with disabilities to ensure that they are not neglected in the new inclusive settings and as institutions are closed, but without also maintaining the specialized system. Noting that, local governments do not have a specific transition budget.

Key findings

- Despite the efforts of the MoSA to develop a national action plan for the social and economic inclusion of people with disabilities, consistent with the CRPD, lack of expertise and internal human resources remain the main obstacles to implementation.

Accountability and governance

Inclusive evidence and data gathering systems

Data collection and statistics regarding persons with disabilities constitute one of the major gaps in Tunisia and has a major impact on policy and programme development. Very little quantitative data exists on persons with disabilities and very few studies are disaggregated by disability. The last national census (2014) incorporated the Washington Group Questions on the identification of persons with disabilities and found that 2 percent of the population met that definition. This corresponds to the number of disability cards as recorded by the MoSA. However, it still differs significantly from the World Health Organization's global average of approximately 15 percent.

Some studies conducted as part of international cooperation at the local level and/or on specific themes have resulted in the collection of local-level data in different regions of Tunisia. For example, the United Nations Population Fund and Humanity & Inclusion conducted a study in 2019 on sexual violence and the SRH health needs of young people and women with disabilities. Results were shared with the main stakeholders so that they could adapt their SRH health and gender-based violence interventions. Studies have also been carried out on social protection and the participation of persons with disabilities; most of them point to the lack of disaggregated data on people with disabilities and, in particular, women and girls.

National accountability mechanisms

One of Tunisia's major strengths in the area of disability is its extensive set of laws. Although these laws still do not conform to international frameworks, the most significant gap remains in monitoring, enforcement and imposing sanctions for violations.

The Parliamentary Commission for Persons with Disabilities and Other Vulnerable Groups has a role in developing laws and monitoring the implementation of existing laws and programmes through periodic revisions and annual reports. Since its creation, the Commission has met frequently with representatives of OPDs and associations working in the field of disability. This has helped it to improve its knowledge of the rights of persons with disabilities and the demands and priorities of persons with disabilities. However, the Tunisian Parliament was suspended after the constitutional referendum of 25 July 2021, which poses a major obstacle in terms of securing accountability mechanisms.

The CRPD monitoring and reporting commission falls under the Prime Minister's office. Its members include ministry representatives, including from the MoSA. Other related ministries include the Ministry of Women, Youth and Sports. The commission is closely

monitoring the rights of persons with disabilities and held two consultations to prepare the 2018 national report on the rights of persons with disabilities.

The temporary Higher Committee for Human Rights and Fundamental Liberties submitted national human rights reports in 2016 and 2019 that included a section on the rights of persons with disabilities in Tunisia.

In addition, the MoSA also meets frequently with representatives of OPDs and people with disabilities to hear their views and opinions regarding existing services and the difficulties they encounter.

Key findings

- The lack of reliable data collection and statistics on persons with disabilities is a major gap in Tunisia.
- Tunisia has several accountability mechanisms that promote and monitor the rights of persons with disabilities, but they lack capacity and a mandate to monitor and enforce the existing legal provisions.
- The suspension of the Tunisian Parliament after the constitutional referendum of 25 July 2021 poses a major obstacle in terms of securing accountability mechanisms.

4.3 Cross-cutting approaches: Participation, gender, inequalities

The UNPRPD has adopted three cross-cutting approaches to be intrinsically applied across all of UNPRPD MPTF's work, including its structures, programmes and processes to ensure full and meaningful participation of all persons with disabilities.



Participation:

Enabling full and effective participation of persons with disabilities



Inequalities:

Ensuring the inclusion of marginalized and underrepresented groups of persons with disabilities



Gender:

Addressing gender inequality and advancing the rights of women and girls with disabilities

Participation

The participation of persons with disabilities and their representative organizations in Tunisia is still limited. This is partly due to lack of consultation mechanisms and of reasonable accommodation by government and development stakeholders. Furthermore, the limited capacity of OPDs, their lack of representativeness (especially of underrepresented groups) and the lack of cooperation among them weakens their participation. (This is further outlined in the stakeholder coordination section.)

Gender

Interviews revealed that social and cultural norms around the sexuality of women and girls with disabilities affects the fulfilment of their SRH rights. In addition to being victims of discrimination, women with disabilities are victims of violence in different forms - verbal, physical and sexual. Interviewees reported that women with disabilities are often sexually abused, which may lead parents to sterilize their daughters with disabilities without consent. Most of the women interviewed identified public transportation as the primary location where violence occurs.

Inequalities

In Tunisia, underrepresented groups of persons with disabilities, including people with intellectual/psychosocial disabilities, blindness and deafness, have limited, if any, legal capacity. Persons with intellectual/psychosocial disabilities are subject to guardianship and co-guardianship, which deprives them of their civil and political rights as well as other socioeconomic rights.

4.4 Disability inclusion in broader development, humanitarian and emergency contexts

National development plans

Tunisia's 2021 Voluntary National Review report highlights the country's commitment to the 2030 Agenda, with the UN Sustainable Development Cooperation Framework set for 2021-2025. It establishes gender inequalities, poverty and youth unemployment as priorities, with a strong emphasis on persons with disabilities.

Climate change, disaster risk reduction and humanitarian action

The situational analysis did not report relevant findings on climate change, disaster risk reduction and humanitarian action apart from what is noted under the Covid-19 chapter below.

COVID-19

The pandemic and quarantine were unique experiences for people with disabilities. The situation exacerbated their sense of isolation, which required special mental health support. However, such support has been lacking throughout the pandemic.

In addition to the widespread challenges of the pandemic, such as the economic difficulties for self-employed persons and the difficulty of job hunting for unemployed persons with disabilities, the issue of personal assistance services is a particularly important problem, especially for persons with a visual impairment. They rely heavily on the sense of touch and are often required to have a personal assistant, which raises the potential risk of disease transmission.

Several research partners indicated that support for COVID-19 recovery (e.g., grants and food) declined significantly towards the end of 2021. Some persons with disabilities have even encountered difficulties obtaining food to meet their daily needs. Further, the quarantine period led to health problems as many people with disabilities were forced to delay their scheduled health or rehabilitation sessions. Many students with hearing and visual impairment also encountered problems in managing remote learning systems. Persons with disabilities also encountered obstacles to accessing information on protocols for emergency situations.

5 CONCLUSIONS

Despite Tunisia's positive developments in the legal and policy areas, large implementation gaps remain. Further efforts are needed to promote the rights of persons with disabilities. Although the human rights-based/social approach to disability is more acknowledged now, the medical approach still predominates. Some laws do not comply with the CRPD. The laws and strategies adopted lack concrete implementation plans and budgets and the government still invests in segregated institutions. Monitoring mechanisms lack enforcement mechanisms. OPDs are fragmented and have a small membership base, especially from underrepresented groups.

Based on gaps identified in the situational analysis, the Tunisia UNCT developed the following key recommendations:

- Support the MoSA to consolidate the national strategy for the economic and social inclusion of persons with disabilities, in coordination with all relevant ministries. This includes developing and adopting a plan of action with concrete annual targets for all stakeholders and a cross-sector budget.
- Support efforts to initiate and accelerate a review of Tunisia's legal framework to bridge the gaps in existing laws related to equality and non-discrimination principles, particularly by removing obstacles related to the legal capacity of persons with disabilities.
- Introduce mandatory accessibility checks in public and private services to acknowledge the notion of accessibility as basic, mandatory, and cross-cutting. This would also include UN processes and premises.
- Accelerate the transition to an inclusive education system by supporting the Tunisian government to develop and agree on timebound and budgeted steps, keeping the best interests of children with various types of disabilities in mind.
- Support national OPDs through tailored capacity strengthening programmes to operationalize their watchdog role and ensure compliance with the CRPD's recommendations.
- Institute a regular, systematic and ongoing consultation mechanism among national officials, persons with disabilities and their representative organizations.
- Support the development and operationalization of a centralized, coordinated data system, with disaggregated information about persons with various

disabilities, their gender and age, to ensure accessible information that could inform development of services and rights.

- Build national capacities and CSOs (including OPDs) and skills in the areas of disability data collection and disability research through trainings and technical assistance with the goal of incorporating the Washington Group Questions in the 2024 census and scaling-up the data generation on disabilities.
- Reinforce and increase awareness and education campaigns for media actors and regulatory institutions such as the Independent High Authority for Audio-visual Communication to improve media representation of persons with disabilities and the implementation of inclusive programming.
- Support national SRH and GBV programs to address the stigma related to the sexual and reproductive health and rights of persons with disabilities and to better reflect the SRH and GBV needs and services of persons with disabilities.

ANNEX 1: 26 SELECTED COUNTRIES

Argentina
Colombia
Guatemala
Panama
Trinidad & Tobago

AMERICAS

Cameroon
DRC
Eswatini
Ghana
Rwanda
Sierra Leone
Tanzania
The Gambia
Tunisia
Zimbabwe

AFRICA

Montenegro
North Macedonia
Republic of Moldova

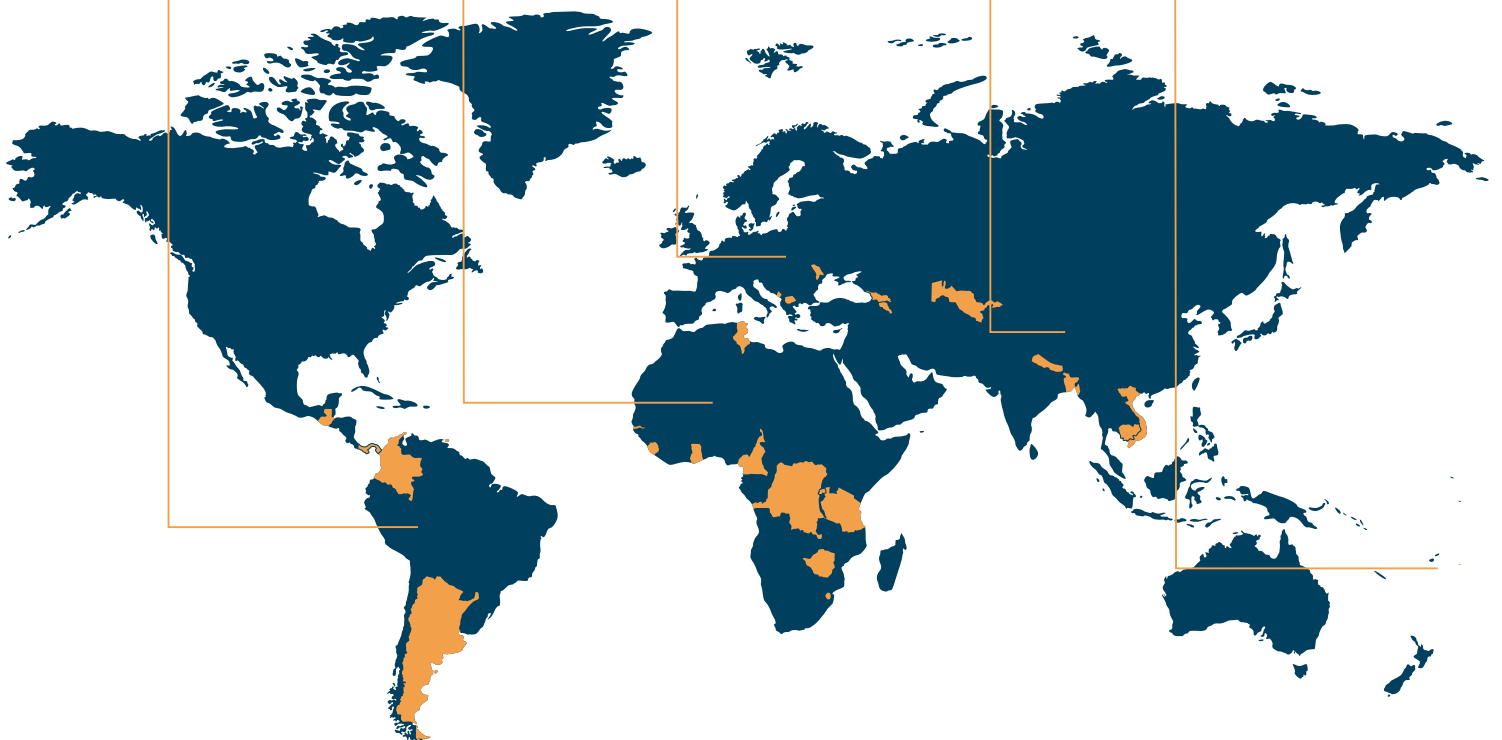
EUROPE

Armenia
Bangladesh
Cambodia
Georgia
Nepal
Uzbekistan
Vietnam

ASIA

Cook Islands

OCEANIA



ENDNOTES

- 1 Survey by Humanity & Inclusion, Ministry of Social Affairs and the National Institute of Statistics
- 2 Constitution of Tunisia 2014: https://www.constituteproject.org/constitution/Tunisia_2014.pdf



Follow us on Twitter @unprpd