



UNPRPD MPTF
Partnership on the Rights of Persons with Disabilities



UNITED NATIONS
UZBEKISTAN



SITUATIONAL ANALYSIS OF THE RIGHTS OF PERSONS WITH DISABILITIES

UZBEKISTAN



COUNTRY BRIEF



UNPRPD MPTF
Partnership on the Rights of Persons with Disabilities



UNITED NATIONS
UZBEKISTAN



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

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 Uzbekistan	7
4 Findings	8
4.1 Stakeholder coordination mechanisms	8
4.2 Preconditions for disability inclusion	11
– Equality and non-discrimination	11
– Inclusive service delivery	12
– Accessibility	15
– CRPD compliant budgeting and financial management	16
– Accountability and governance	16
4.3 Cross-cutting approaches: Participation, gender, inequalities	19
4.4 Disability inclusion in broader development, humanitarian and emergency contexts	20
5 Conclusions	22
Annex 1	24

ACRONYMS AND ABBREVIATIONS

ADMSS	Agency for the Development of Medical and Social Services
ADPU	Association of Disabled People of Uzbekistan
CRPD	Convention on the Rights of Persons with Disabilities
CSO	Civil Society Organization
Mahalla	Community-level local self-government citizen body
MPTF	Multi-Partner Trust Fund
NCHR	National Centre for Human Rights
NGOs	Non-Governmental Organizations
NPA	National Plan of Action
OPDs	Organizations of Persons with Disabilities
SDGs	Sustainable Development Goals
UNCT	United Nations Country Team
UNDP	United Nations Development Programme
UNICEF	United Nations Children’s Fund
UNPRPD	United Nations Partnership for the Rights of Persons with Disabilities
VKK	Medical Consultative Commission
VTEK	Medical and Labour Expert Commission

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 September 2021, the Uzbekistan 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 programmes;
- 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 UZBEKISTAN

	Population	35 million
	Disability Prevalance	2.1%*¹

* The report highlights that due to lack of reliable data on persons with disabilities, this number may be underestimated.

Uzbekistan is a lower middle-income country in Central Asia that gained its independence from the Soviet Union in 1991.

The officially reported number of persons with disabilities – 2.1 percent of the population - is likely underestimated, given that an estimated 15 percent of people around the world have some form of impairment and about 80 percent of them live in developing countries.

In Uzbekistan, contemporary understanding and practices related to disability at a policy level have been heavily influenced by the programmes for disabled people that were developed in the USSR. In the Soviet Union, disability was determined based on the degree of loss of working capacity and all State measures were aimed at assisting a disabled person to regain his/her ability to work. This medical approach to disability also involved the institutionalization of children and adults with disabilities, where they were said to receive ‘specialized support and care.’ Soviet disability policies still have strong implications for contemporary definitions of disability and have influenced current policies and practices in Uzbekistan.

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 full report.

Government

- **The Agency for the Development of Medical and Social Services (ADMSS)** provides medical and social services to the elderly, persons with disabilities and other groups in need of social protection. It is considered to be a focal point for disability issues, but its management does not include persons with disabilities and their OPDs.
- **The Inter-Agency Council on the Affairs of Persons with Disabilities** in the Cabinet of Ministers was established recently as a coordination mechanism. It facilitates the activities of entities that implement state policy to ensure the rights of persons with disabilities. Although a welcome initiative in principle, concerns have been raised about transparency and the meaningful participation of organizations of persons with disabilities in its work.
- **Ombudsman’s Office of the Republic of Uzbekistan** plays an important role in promoting and protecting human rights in Uzbekistan. The activities of the Ombudsman are regulated by the Constitution of the Republic of Uzbekistan, the Law of the Republic of Uzbekistan, “On the Ombudsman of the Republic of Uzbekistan for Human Rights (Ombudsman),” and other regulatory acts of the Republic of Uzbekistan. The Ombudsman ensures parliamentary control over implementation of human rights legislation by state bodies, enterprises, institutions, organizations and officials.
- **National Human Rights Center of the Republic of Uzbekistan** is a government agency responsible for human rights policies in the country. Its competence includes among other, assisting the Government with shaping and implementing human rights policies, programmes and legislation, analyzing human rights practices and developing recommendations to improve them.
- **Other ministries:** The Ministry of Health, Ministry of Finance, Ministry of Public Education, Ministry of Employment and Labour Relations, Ministry of Economic Development and Poverty Reduction and Ministry for Support of Mahalla have initiatives that support persons with disabilities. Full details are included in the full report.

Organisations of persons with disabilities

Uzbekistan's active OPDs are mainly concentrated in the capital city, Tashkent. The four leading OPDs are the **Society of the Deaf of Uzbekistan**, the **Society of the Blind of Uzbekistan**, the **Society of the Disabled** (primarily persons with physical impairments), and the **Association of Disabled People of Uzbekistan (ADPU)**.

The ADPU is a cross-disability umbrella organization established in 2018. It brings together 31 non-governmental organizations (NGOs) and OPDs in the disability field. The Association currently has 11 regional branches across the country and 33 member organizations. Its main goal is to coordinate the actions of public organizations of persons with disabilities to ensure their rights and create an inclusive society through implementation of the CRPD. On 30 August 2021, the Association gained consultative status with the UN Economic and Social Council, approved by the UN Committee on Non-Governmental Organizations.

UN system

The disability community of Uzbekistan has limited interactions with the global disability movement, notably the International Disability Alliance, which does not have a dedicated regional structure for Central Asia. The language barrier is a significant obstacle that prevents Uzbekistan's disability movement from gaining a higher international profile and access to the global disability community.

The UN Human Rights and Inclusion Task Force, co-chaired by the United Nations Children's Fund (UNICEF), meets regularly to discuss priorities in the area of disability inclusion as well as joint efforts to support the government as "one UN" to overcome any duplication. As co-chair of the Task Force, UNICEF represents the UNCT in supporting the Government of Uzbekistan in the area of disability inclusion. The Organization for Security and Co-operation in Europe has joined UNCT efforts to provide technical expertise on best practices and international standards on implementing the rights of persons with disabilities. UNICEF and UNDP have recently recruited UN Volunteers with disabilities and further aim to enhance their disability inclusion programming through advocacy and building capacity among staff and partners, as well as ensuring that all events and premises accommodate the needs and accessibility requirements of persons with disabilities. As of October 2022, UNFPA is finalizing the recruitment process for UN Volunteer with disability.

Summary of stakeholder coordination analysis

- There is a lack of understanding of the requirements of certain CRPD articles, such as the composition and functioning of the different layers of national implementation and monitoring mechanisms and OPDs' participation in them.
- The creation of the ADMSS and its strategic placement within the Cabinet of Ministers constitutes a significant step forward, along with the creation of the Interagency Disability Council pursuant to the 2020 Law on the Rights of Persons with Disabilities. However, the composition, mandate and functioning of these structures should be considered further, particularly regarding the meaningful and continuous involvement of OPDs.

- While a few respected women with disabilities have greatly contributed (and continue doing so) to increasing the visibility of women with disabilities on the national agenda, they cannot and should not be expected to replace a representative organization governed by women with disabilities. The challenges to establishing such an organization include administrative barriers, low capacity of activists and limited support.
- Similarly, support for the establishment of an organization of families of children with disabilities run by parents and young persons themselves must be considered a priority prior to drafting Uzbekistan's initial report to the CRPD Committee. The process of establishing the organization should capitalize on the energy and readiness for coordinated advocacy that many parent representatives have expressed and should benefit from the ongoing inclusive education reform. While the decision to establish new NGOs rests with the government, the international community can actively support the case for diversifying and professionalizing the national disability movement.

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 Uzbek 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

Existing law in Uzbekistan, including the latest legislative initiatives, are based on the medical model of disability and do not address all civil, political, economic, social and cultural aspects of human life. The laws support the removal of legal capacity and decision-making powers of persons with disabilities and lack concepts such as universal design and reasonable accommodation. There are no legal provisions to protect women and girls with disabilities from gender-based violence and ensure their equitable access to sexual and reproductive health care and access to justice. Access to reproductive health rights is extremely limited for girls and women with disabilities who report a lack of accessibility of information about those rights.

Negative perceptions and discriminatory attitudes are at the core of continued exclusion and segregation of persons with disabilities. Dual discrimination experienced by women and girls with disabilities puts them at increased risk of deprivation, exclusion, sexual and physical violence, and abuse. The stigma is prevalent not only among the general population, but also in the professional and policymaking spheres, slowing advancement of disability policies in line with the Convention.

The Law on the Rights of Persons with Disabilities, which entered into force on 16 January 2021, repeals and replaces the outdated 2008 Law on the Social Protection of Persons with Disabilities. It introduces the principle of non-discrimination on the basis of disability. While the law's adoption is a significant step towards a better understanding of the rights-based approach to disability, it falls short of full compliance with the CRPD. Largely based on the medical model of disability, it does not address the civil and political rights of persons with disabilities, lacks enforcement, implementation and monitoring mechanisms, and does not address the multiple forms of discrimination faced by women and girls with disabilities and those who belong to marginalized and invisible groups.

The National Centre for Human Rights (NCHR) will soon draft a national action plan to implement the Convention. This will provide an opportunity to strengthen ideological

commitments by providing practical mechanisms for implementation, budgeting, data collection, monitoring and OPD participation. However, significant concerns have been raised about the rush to draft the plan, which could leave little room for meaningful consultation with all stakeholders, including OPDs.

Key findings

- During the research for this analysis, every stakeholder has invoked stigma, negative stereotypes and rampant discrimination against persons with disabilities in all areas of life as critical gaps that must be addressed to achieve inclusion.
- The 2021 law adopted in preparation for ratification of the CRPD has serious shortcomings as it maintains the medical approach to disability, lacks key definitions, and establishes a limited scope that excludes nearly all civil and political rights. As such, it does not yet meet the high standard set by the Convention. Other legislative and policy instruments have yet to be revised and brought into compliance with the CRPD.
- A system-wide approach to ensuring equality and non-discrimination at legal, policy, budgetary and communication levels is required.
 - First, legislation must provide tools to improve the visibility of persons with disabilities. Disability mainstreaming in draft laws and policy proposals must thus become routine.
 - Second, the national government and international donors alike must hold to budgetary conditionality on this issue: no public funds may be spent if the intention or outcome is to exclude, segregate or discriminate against persons with disabilities. Disability-disaggregated outcomes, targets, budgets and monitoring indicators must thus be included in the programme and policy frameworks.
 - Third, monitoring and data collection matter. A mechanism to monitor and counteract the expression of discriminatory or stigmatizing views, discriminatory statements in the media, and disability-based hatred must be developed.
 - Finally, awareness-raising activities at schools, hospitals, media and employers' associations must be undertaken under the leadership of representative disability organizations.

Ratification of the CRPD and the adoption of the first post-Convention legislative acts have created the opportunity to take these steps. The government's commitment to achieving the global 2030 Agenda for Sustainable Development is a further opportunity to advocate for disability-inclusive development at all levels.

Inclusive service delivery

The Medical Labour Expert Commissions (VTEK) is the structure responsible for disability assessment and determination. It operates under the Agency for the Development of Medical and Social Services and determines severity of disability, assigns disability classification, identifies causes, time of onset and terms of disability, and defines measures

of medical, social and professional rehabilitation for adults over 18. Children under 18 are assessed by the Medical Consultative Commissions (VKK). The determination of child disability – or delays in psychological development – begins at the age of 3 years old, when the VKK can assess a child.

The disability classification system is inherited from the Soviet Union, where persons with disabilities were referred to as ‘invalids’ and disability was defined as the loss of working capacity. However, the Law of the Republic of Uzbekistan on the rights of persons with disabilities adopted by the Senate of Uzbekistan in September 2020 has introduced the term “persons with disability” in line with the CRPD. A full package of required medical documents must be presented to the VTEK to apply for a disability assessment. To obtain a preliminary disability assessment, a person with a disability must provide a referral from a medical institution with an excerpt from his/her medical history and certified by the attending physician, head of the department and chief physician, the round stamp of the institution, and an outpatient card.

Disability assessment and determination procedures are heavily bureaucratized, which leads to regular corrupt acts by VTEK personnel. Persons with disabilities must undergo four to six months of medical treatment, at an additional cost (including transportation to a medical facility, treatment costs and informal costs, such as bribes to VTEK staff), although even a non-expert is capable of identifying their physical, sensory and learning impairments easily.

Disability assessment and referral services

Eligibility for social support services is limited to persons with disabilities living alone who fall into disability classifications I and II. The individual’s family (including children, parents, spouse, siblings, and guardians or trustees) bears primary legal responsibility to support the family member with disabilities and is expected to at its own expense. Due to recent reforms including on issues related to disability allowances, the Presidential Decree from April 2022 highlights that caregivers are paid a monthly benefit for caring after a child with disability, in addition to a disability benefit.

Those without family members are eligible for in-home services upon authorization of the local authorities. They may also apply for placement in a residential care institution. The majority of adults and children with disabilities in need of support rely heavily on residential care, with mobile social services and day centres for persons in need of support representing an insignificant share of available services.

Mainstream services

The situational analysis report provides an overview of disability inclusion mainstream services, including social protection, education, health and access to justice. The brief highlights key gaps and further details may be found in the full report.

Social protection

Social protection measures for persons with disabilities include disability allowances, concessions and social services. The report highlights that the allowances are inadequate and do not consider the actual support needs associated with the impairment. Also,

the national structural arrangement has been criticized for fragmentation and lack of coordination in implementing a single State policy in the field of social protection and inclusion of persons with disabilities. Due to the limited scope of interagency communication, there is no common vision or coordinated strategy to implement the rights of persons with disabilities. Although each department has established a vertical organizational structure, horizontal communication is lacking among various government agencies. This significantly reduces the quality, coverage and effectiveness of social services for children and adults with disabilities.

Health

Most of the respondents representing OPDs raised the issue of the significant lack of universal access to affordable health care services. This concerns persons with all impairments and throughout the lifecycle. The UN 2019 situational analysis of children and adults with disabilities in Uzbekistan showed that 25 percent did not receive the required health care services (compared to 10 percent of those without disabilities) and that persons with disabilities are almost three times more likely to lack access to prescribed medication. Although persons with disabilities are legally entitled to privileges and benefits, including free health care, they face numerous barriers to accessing medical services, such as lack of transport to health facilities (especially in rural areas).

Education

Despite some progress in improving access to education for children with disabilities, ‘inclusive education’ continues to be misunderstood and is often confused with integration. Most often, segregation into specialist/correctional classes is considered the most suitable form of education for children with disabilities. The inclusive education reform, which was adopted without meaningful participation of persons with disabilities, was conducted in a rushed and ill-prepared manner. Only two months before the first experimental ‘inclusive classes’ were to start, the range of support services provided to children was still unknown pending a decision by the Ministry of Education. The shortage of professionals in all categories is obvious. The focus is still on training ‘defectologists’ rather than providing necessary support and training to regular classroom teachers.

Key findings

- A scarcity of reliable data about persons with disabilities increases the challenge to developing inclusive community-based services. Social support services in the community are limited to some in-home help, but eligibility conditions are strict and only persons without family support are entitled to it.
- Multidisciplinary coordination among medical, rehabilitation, social support and education services is not adequate. The identification of persons with disabilities is based on the outdated medical/charity model, which focuses on the person’s capacity to work and is used to determine eligibility for cash benefits.
- According to parents of children with disabilities, the absence of a system-wide approach to early identification and early intervention, particularly in the case of children with intellectual and developmental disabilities, is the most critical gap as it puts children at a lifelong disadvantage and risk of institutionalization. The lack of specialists is well documented and it is difficult to obtain the services of

speech therapists, physiotherapists, occupational therapists, social workers and inclusive education support staff. Specialists are usually concentrated in regional hubs, and children and adults with disabilities living in remote and rural areas are significantly underserved.

- The development of disability-inclusive and gender- and age-appropriate support services in the community has been identified as a core priority of future interventions to support the full inclusion of persons with disabilities in accordance with the Leave No One Behind principle and Uzbekistan's commitment to the global SDG agenda. The continuing involvement of the UNCT in developing integrated social service delivery and its commitment to support the government in developing early identification and early intervention services thus present a major opportunity.

Accessibility

Uzbek society has a narrow understanding of accessibility as an issue relevant only to a minority group of persons with disabilities. Current legislative accessibility provisions, which pertain primarily to the physical accessibility of public infrastructure, are not effectively enforced due to the lack of involvement of OPDs in monitoring construction projects. Marginalized and underrepresented groups, such as deaf and hard of hearing people, deafblind persons and persons with intellectual and psychosocial disabilities, lack reasonable accommodation.

Lack of understanding of universal design-based accessibility, lack of enforcement and dissuasive sanctions, and failure to consistently include OPDs in the development, implementation and monitoring of standards have been identified as challenges. The disability community has long called for the adoption of a nationwide programme on an accessible environment, complete with measurable objectives and indicators and an earmarked budget, but the authorities have not offered a constructive response.

Key findings

- Although the national disability legislation requiring accessibility of public buildings and infrastructure for persons with physical and sensory impairments has existed for quite some time, the legal norms are rarely enforced. Reasons include the lack of involvement by local OPDs with limited capacity to participate in the design and planning of new urban construction projects and the omission of the CRPD concept of universal design from current legislation.
- The society has a narrow understanding of the concept of 'accessibility' as an important issue. Underrepresented and marginalized groups are left behind in these processes and are not provided with reasonable accommodation and assistive devices.
- To achieve disability-inclusive planning, design and building in urban and rural areas, public associations of people with physical, sensory, intellectual and psychosocial disabilities must participate in the new procedure for coordination of construction projects and technical councils of the Main Department of Architecture and Construction of Tashkent. All cross-disability OPDs must participate permanently in the Interdepartmental Council on the Affairs of Persons with Disabilities.

CRPD compliant budgeting and financial management

Limited data are available to analyse CRPD-compliant budgeting and financial management. A considerable portion of the national budget allocated for social protection is directed towards old age pensions, while the number of recipients of disability benefits has fallen over the last 10 years, reflecting the government's austerity measures. Lack of OPD involvement in the decision-making process for budget allocation results in measures that undermine disability-inclusive development and are not aligned with the CRPD.

Key findings

- Investments are required to create a favourable national environment at all levels to make measurable progress towards achieving the ambitious disability rights agenda.
- Disability mainstreaming must become an integral part of all programmatic efforts of international donors present in Uzbekistan. All grant making activities – not only the obvious social inclusion projects - must be analysed to assess their inclusion of women, men and children with disabilities and ensure that disaggregated goals, targets and monitoring indicators exist for these groups.
- International donors should use their leverage with the government to demand the same for all government activities that receive international funding.

Accountability and governance

The lack of reliable and disaggregated administrative and survey data on disability makes it difficult to ensure accountability and proper governance, as many persons with disabilities may have been left behind by the social protection system. Current estimates of disability prevalence appear to be severely underestimated at about 2 percent of the total population based on administrative data registries. The government refuses to include the Washington Group Short Set of Disability Questions in the upcoming 2023 population census, arguing that it lacks the necessary expertise and financial support. The NCHR, which should monitor and report on Uzbekistan's international human rights obligations, lacks sufficient independence.

Inclusive evidence and data gathering systems

Other than the VTEK administrative data set, the national census and surveys have not been used to identify children and adults with disabilities, the barriers they face and their support needs. Uzbekistan has not conducted a population census since 1989. National household surveys have never incorporated any disability questions and, as mentioned above, the VTEK administrative registries provide most official disability data.

Uzbekistan's first population census since 1989 was planned to be conducted in 2022 but was postponed to 2023 due to the COVID-19 pandemic. Despite joint ongoing advocacy by the national disability movement and the international community calling for the inclusion of the Washington Group Short Set of Disability Questions in the upcoming census, the State Statistics Committee refused, pointing to the lack of resources and expertise.

Several recent initiatives have been developed to improve the national data collection system, including the 2017 presidential decree and the 2018 decree of the Cabinet of Ministers, 'On Improvement of the System of Statistical Registration of Persons with Disabilities.' However, implementation of these mechanisms remains unreliable. The official data available on disability are based only on the reported number of registered persons with disabilities and do not reflect actual disability prevalence in the country. Importantly, the administrative data on the total number of persons with disabilities are not adequate to assess the barriers to the participation of persons with disabilities in social, economic and political life. Although limited gender-disaggregated data is available on the reported number of women and men receiving pensions and social benefits, the VTEK's existing administrative data cannot address multiple and intersecting identities, such as age, gender, economic status, religion, and membership in marginalized and underrepresented groups.

National accountability mechanisms

Uzbekistan's ratification of the CRPD is expected to hold the government accountable for the implementation of the rights of persons with disabilities. The government is now required to submit periodic reports to the CRPD Committee and to establish national implementation and monitoring mechanisms. Both these obligations must be fulfilled with the active and meaningful participation of persons with disabilities and their representative organizations. However, local OPDs' capacities to report on CRPD implementation are weak and independent grassroots organizations lack the financial resources to conduct monitoring activities across the country.

The ADMSS is considered the focal point overseeing CRPD implementation. As noted above, it has capacity gaps. The NCHR is responsible for monitoring and reporting on Uzbekistan's international human rights obligations. Although the Centre is, by law, an independent authority for monitoring legislation and law enforcement, it does not constitute an independent monitoring mechanism as its reporting is not considered impartial.

The ADPU is the leading OPD that monitors CRPD implementation on behalf of persons with disabilities. It carries out public oversight of implementation of national legislation in the field of protection of the rights and legitimate interests of persons with disabilities, including monitoring the accessibility of the built environment and public transportation.

Key findings

- To improve accountability and governance based on evidence-based policymaking, the skills and knowledge of local experts at the State Statistics Committee in disability-disaggregated data collection and analysis must be upgraded, using available international tools such as the Washington Group Short Set of Disability Questions.
- Questions regarding disability should be integrated and mainstreamed within general surveys and all other national planning and monitoring instruments to generate indicators and disability-disaggregated data.

- The disaggregation of data by gender, age, sexuality, economic conditions, religion, location and other characteristics should be encouraged across sectors including education, employment, healthcare, accessibility, social protection and poverty.
- Existing administrative data should be improved using information and communication technologies and modern databases.
- The upcoming 2023 population census should be used as an opportunity to include the Washington Group Short Set of disability questions.
- The NCHR should be supported to strengthen its independence.

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

Participation of persons with disabilities in policymaking, planning, implementation and monitoring of the CRPD and SDG programmes is weak and tokenistic. This is due to prejudice and lack of enabling systems and structures within existing coordination and monitoring bodies (the ADMSS, the NCHR and the donor community), and a lack of empowerment and strategic capacity of OPDs. All need to be addressed.

Inequalities

The voices of marginalized and underrepresented groups, such as children and adults with intellectual/developmental disabilities, deafblindness, children with rare diseases and persons with psychosocial disabilities, are not yet represented by formally recognized OPDs.

This is due to:

- Lack of legal capacity: many persons with disabilities are not considered to have legal capacity. They are confined to institutions or overprotective families. Therefore, their voices are not heard even within the disability movement. This needs to be addressed.
- Legal barriers to NGO registration: lack of NGO status deprives such groups of grant support from international donors and the legal leverage to exert pressure on the government to recognize them in the laws, policies, budgets and social services available to mainstream groups of persons with disabilities. Additional efforts are needed to strengthen the participation of young people, children and women with disabilities, persons with intellectual and psychosocial impairments, and those with multiple impairments in the disability movement, particularly because the current legal environment is not favourable to creating new representative OPDs.

Gender

Girls and women with disabilities may face double discrimination and may feel it is embarrassing to be regularly re-examined by VTEK to confirm their official disability status. The urgent need to develop the feminist disability movement is reflected in the continued exclusion of girls and women with disabilities from national policymaking and programmatic interventions, including key initiatives such as the recently adopted Law on Sexual and Reproductive Health and national gender equality policies. Misconceptions about disability reportedly leave providers of services for victims of violence reluctant to accommodate women and girls with disabilities who are fleeing family violence. Women and girls with disabilities needs better support to access SRHR services and access to justice in parity with other women. The women's movement needs support to address prejudice and to welcome their sisters with disabilities.

4.4 Disability inclusion in broader development, humanitarian and emergency contexts

National development plans

Uzbekistan adopted, localized and approved 206 national SDG indicators, which were integrated into national development strategies and programmes. On 7 February 2020, the Parliamentary Commission to monitor and facilitate implementation of the SDGs was established. The First Voluntary National Review was presented on 15 July 2020. One of the challenges noted was inaccessible public infrastructure for persons with disabilities and the disproportionate impacts of the COVID-19 pandemic on persons with disabilities, older people and children in closed institutions.

Further, the UN in Uzbekistan conducted the Common Country Analysis in 2021 which highlighted the socioeconomic impact of Covid-19 on persons with disabilities and their exclusion from development advances as outlined in the SDGs.² Based on the findings, the Government of Uzbekistan and the UNCT developed the UN Sustainable Development Cooperation Framework for 2021-2025 which prioritizes persons with disabilities.³

Climate change, disaster risk reduction and humanitarian action

The situational analysis did not report any relevant findings related to climate change, disaster risk reduction and humanitarian action.

COVID-19:

The ongoing COVID-19 pandemic and the strict quarantine measures introduced by the Government of Uzbekistan in 2020 have further exacerbated the already vulnerable situation of children and adults with disabilities, as well as their parents and caregivers. COVID-19 had negative impacts on the physical and mental health of persons with disabilities, particularly those living in institutions who were under greater risk of contracting

the virus due to direct exposure to institution staff. The Government of Uzbekistan has not issued any disability-disaggregated data on the number of infected persons and COVID-19-related deaths. Therefore, it is difficult to evaluate the real impact of the pandemic on persons with disabilities, except for some evidence and data from the international organizations operating in the country.

Persons with disabilities and their OPDs were not involved in the decision-making process regarding the allocation of support during the pandemic. Instead, OPDs were treated as passive recipients of basic goods, which were distributed through a single coordination centre based on a top-down approach. As a result, emergency services and provision of basic products were ineffective and did not reach the most marginalized and underrepresented groups. For example, deaf and hard-of-hearing people could not access the hotline to request support during the lockdown. This severely affected adults with hearing impairments involved in informal economic activities.

The data and information monitoring the delivery and outcomes of COVID-19 interventions and services have not been disaggregated by disability and do not include specific data points relating to persons with disabilities. The official data on COVID-19-related infections and deaths is not disability disaggregated. It is thus impossible to assess how the COVID-19 pandemic affected children and adults with disabilities as well as their parents and caregivers. The only available data come from the Listening to the Citizens of Uzbekistan survey, which incorporated the Washington Group Short Set of six disability questions on functioning and disability.

5 CONCLUSIONS

Progress has certainly been achieved in advancing the rights of persons with disabilities, especially since the adoption of the new Law on the Rights of Persons with Disabilities in 2020 and the ratification of the UN CRPD in 2021. The national institutional structure has also undergone changes with the addition of the Agency for the Development of Medico-Social Services under the Cabinet of Ministers, the Interagency Disability Council and several ministries with key roles for promotion of the rights of persons with disabilities. However, the situational analysis identified key challenges that persist in achieving the obligations under the CRPD.

To address the challenges identified in the situational analysis, key recommendations are outlined below. A full list of recommendations may be found in the full report.

- Conduct a full review of national legislative norms in light of Uzbekistan's obligations under the CRPD and introduce such a review of all forthcoming proposals, addressing preconditions for CRPD realization such as equality and non-discrimination (including multiple discrimination), reasonable accommodation, universal design, accessibility, and meaningful participation of OPDs.
- Facilitate and support the process of formal recognition of new and emerging OPDs and self-help groups of families of children with disabilities, persons with intellectual and psychosocial disabilities, girls and women with disabilities, and persons with rare and/or complex impairments such as deafblindness. As a first step, establishing a women's committee within the Association of Persons with Disabilities should be considered, with its chairperson nominated to the Board of the Association and mandated to represent the Association externally.
- Accelerate the reform of disability assessment and determination processes in compliance with the social model of disability based on the International Classification of Functioning, Disability and Health that focusses on the assessment of both medical conditions as well as barriers and individual support needs:
 - Improve the procedure's accessibility, including the communications and physical accessibility of VTEK centres;
 - Ensure that the procedure is financially affordable; and,
 - Involve local community structures, professionals, and OPDs.

- Improve implementation and monitoring systems by:
 - Providing opportunities for persons with disabilities and their respective organizations to participate in budget and procurement processes;
 - Mainstreaming disability inclusion in general programs that focus on economic development and improvement of livelihoods at the community level; and,
 - Collecting and analysing data on the overall budget allocations for the inclusion of persons with disabilities by distinguishing which state expenditures explicitly contribute to community-based inclusive development (e.g., social services, promoting inclusive education, supporting disability-inclusive employment in the open labour market, etc.).
- Design the national CRPD implementation and monitoring mechanisms based on CRPD Article 33 and international authoritative guidance.
 - The appointment of disability focal points in different ministries and services should be considered to improve awareness about the CRPD and disability mainstreaming in all policies;
 - The composition and working methods of the newly established Inter-Agency Council on Disability Affairs at the Council of Ministers should be revisited to ensure its full transparency, pluralistic representation of persons with disabilities and sustainability; and,
 - The Ombudsman's Office should be strengthened and formally appointed as the independent monitoring mechanism for the CRPD; steps should be taken towards obtaining 'A' status accreditation by Global Alliance of National Human Rights Institutions, while improving its capacity to monitor the Convention in all areas.

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

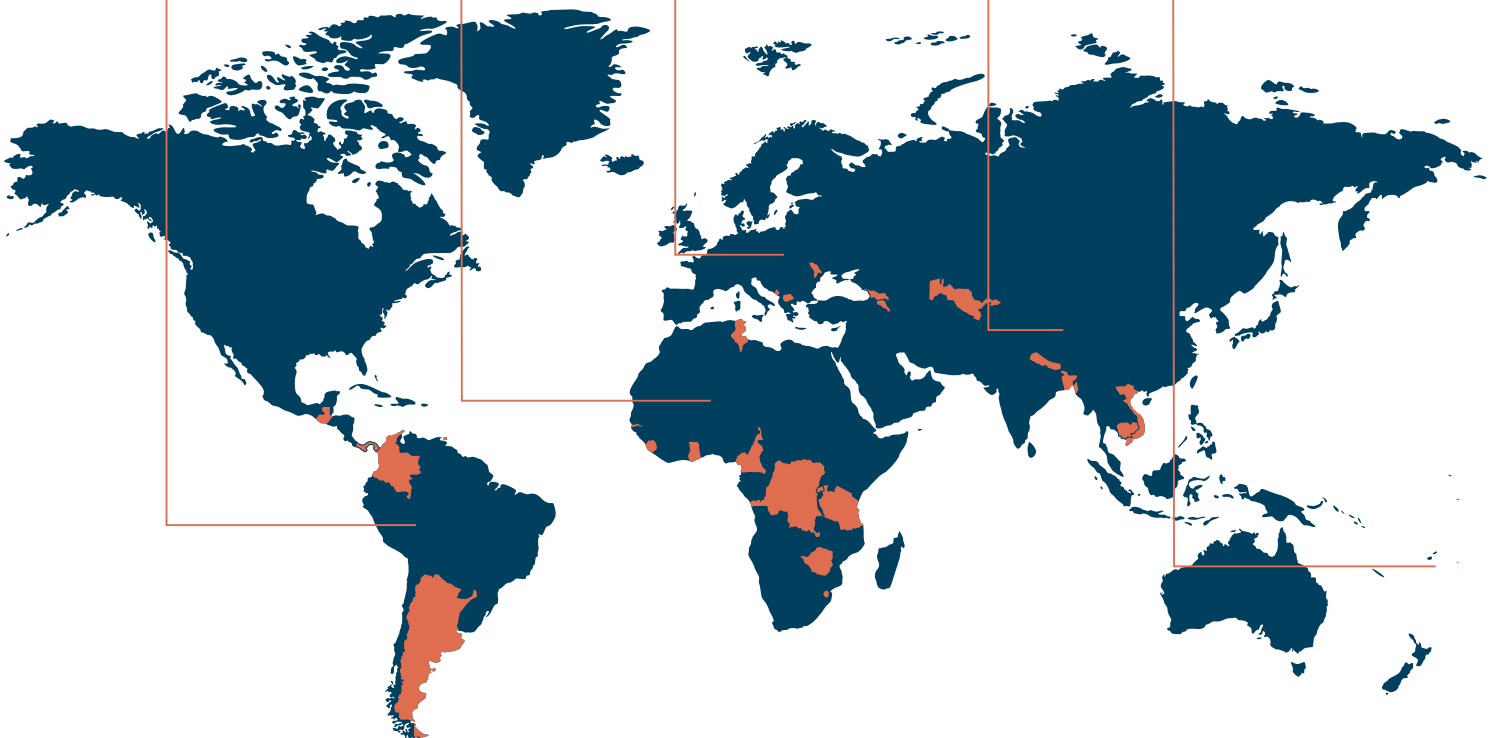
EUROPE

Armenia
Bangladesh
Cambodia
Georgia
Nepal
Uzbekistan
Vietnam

ASIA

Cook Islands

OCEANIA



ENDNOTES

- 1 The State Committee of the Republic of Uzbekistan on Statistics
- 2 <https://uzbekistan.un.org/en/126438-united-nations-common-country-analysis-uzbekistan>
- 3 <https://uzbekistan.un.org/en/94416-united-nations-sustainable-development-cooperation-frame-work-2021-2025-uzbekistan>

