



**Alternative Report on the Report of the Republic of Latvia on
the “Consolidated Second and Third Report of the Republic
of Latvia on the Implementation of the United Nations
Convention on the Rights of Persons with Disabilities,
13 December 2006, in the Republic of Latvia in the Period
from 1 January 2017 to 31 December 2019”**

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Terms

Alternative Report – the Ombudsman's alternative report on the Report of the Republic of Latvia on the “Consolidated Second and Third Report of the Republic of Latvia on the Implementation of the United Nations Convention on the Rights of Persons with Disabilities, 13 December 2006, in the Republic of Latvia in the Period from 1 January 2017 to 31 December 2019”

UN Committee – the Committee of the UN Convention on the Rights of Persons with Disabilities

Institution – a long-term social care and social rehabilitation institution / social institution that provides a person who is unable to care for himself or herself due to his or her age or health condition, as well as orphans and children left without parental care, with housing, full care, and social rehabilitation in accordance with Article 1 of the Law on Social Services and Social Assistance.

Abbreviations

CMMN - compulsory measures of medical nature

CRPD - the UN Convention on the Rights of Persons with Disabilities

DI – deinstitutionalization

DIS - Disability Information System

NR- the report of the Republic of Latvia “Consolidated Second and Third Report on the Implementation of the United Nations Convention on the Rights of Persons with Disabilities, 13 December 2006, in the Republic of Latvia in the Period from 1 January 2017 to 31 December 2019”

OPD - organizations of persons with disabilities

SCDEHS - State Medical Commission for the Assessment of Health Condition and Working Ability

Introduction

1. Based on the Article 2 of the Law on the Convention on the Rights of Persons with Disabilities the Ombudsman ensures monitoring of the implementation of obligations referred to in Article 33(2) of the CRPD. Therefore, the Ombudsman has drawn up the Alternative Report.
2. Paragraph 9 of NR states that NR includes “information on progress from 1 January 2017 to 31 December 2019; however, to show significant changes that have had a direct impact on the target group, the information on the implementation of certain articles of the CRPD contains also data of the year 2020 and 2021”. The Ombudsman also maintains this in the Alternative Report, basically providing information on the period from 2017 to 2019 while in some cases also referring to years 2020, 2021, and 2022.
3. The Alternative Report provides information on the implementation of articles of the CRPD with more detailed references to the paragraphs of NR.
4. The Alternative Report contains additional information from the Latvian Association of the Deaf, the State Social Integration Agency College, SJSC “Latvijas Dzelzceļš” (Railroad of Latvia), JSC “Pasažieru vilciens” (Passenger Train) and JSC “RB Rail”.

Article 4. General obligations

NR 29

The Ombudsman welcomes the work within the project “Improvement of the child disability detection system” of the European Social Fund. The methodology for determining disability corresponding to international practice developed within the project by medical experts provides a new approach to the evaluation of functional disorders of the child and gives an opportunity to carry out a more comprehensive assessment of children, which would allow more targeted services to reduce the disability consequences for children.

The Plan to Promote Equal Opportunities for Persons with Disabilities 2021–2023¹ approved by the government on 17 August 2021 describes activities related to the implementation of functionality assessment-based disability determining in children: the plan is to introduce the methodology developed for the use of international criteria of functioning, disability and health classification in disability determination in children and to improve the SCDEHS Disability Information System (DIS). Amendments to the regulatory framework are planned for the second half of 2022. The referred activities on the development of the DIS are planned to be completed by the end of 2023 and continued after that as well.

The Ombudsman is concerned that the implementation of functional assessment-based disability determination in children is slow and the four-year deadline for implementation after the finalizing of methodology is too long and may adversely affect the rights of children with functional disabilities who need a maximally targeted State aid already today. There are no objective obstacles for the responsible State authorities to take the necessary actions in accordance with the principle of priority of the interests of children to ensure the implementation of preparatory measures and the introduction of a new approach to the assessment of the child's functioning disorders more quickly.

Recommendation: To provide a new approach to the evaluation of the child's functional disorders as soon as possible.

¹ Order No 577 “Regarding the Plan to Promote Equal Opportunities for Persons with Disabilities 2021–2023” issued by the Cabinet of Ministers on 17 August 2021.

Article 6. Women with disabilities

NR 60

Constitutional Court in their judgement of 4 June 2021 in case No 2020-39-02 established that some of the most controversial norms of the Istanbul Convention comply with the Constitution.

However, there is no initiative among politicians that would indicate a desire to update the ratification of the Istanbul Convention.

Article 7. Children with disabilities

NR 83–89.

One of the tasks of the DI is to ensure that children grow up in a family environment and receive social care and rehabilitation in their municipality, thus the Ombudsman conducted a study (in 2018) on municipalities' progress in the implementation of the activities planned within the DI framework.

Conclusions:

1. Parents do not have enough information about the services available in the municipality; information campaigns are needed.
2. The administrative capacity of local governments must be increased to facilitate the attraction of specialists corresponding to the needs of the population at the level of planning regions and local administration.
3. There is still a lack of a common approach and understanding of the promotion and implementation of inclusive education in municipalities.
4. Special attention should be paid to establishment and maintenance of available day-care centres for families raising a child with functional disabilities.

Recommendations:

[1] To ensure that the website of each municipality contains easily accessible and clear information about municipal services for families raising children with special needs.

[2] To establish and provide in each municipality a set of services for children with disabilities and their families.

[3] To promote and implement good practices of inclusive education thus building understanding of inclusive education through concrete examples of good practice in municipalities.

[4] To ensure the availability of day-care centres for families raising children with disabilities by paying particular attention to the location of day-care centres, the availability of infrastructure (accessibility), and access to rural areas.

Article 8. Awareness-raising

In addition to the activities indicated in the NR, every year since 2015, the Ombudsman has been organizing the following:

1. A conference dedicated to the day of persons with disabilities: “Access to the labour market for persons with disabilities” (2017); “Is it easy to live in community? Disability” (emphasis on the DI process, 2018); “Person and value” (2019).
2. Annual award for the support of people with disabilities, where individual persons, OPDs and other legal entities, which have acted to improve the situation of persons with disabilities in Latvia, can be nominated in several categories.
3. Networking event for persons with disabilities and OPD to exchange information on the latest developments in the field of the rights of persons with disabilities in Latvia and the world.

Article 9. Accessibility

The NR indicates the measures taken by the State to ensure accessibility by addressing the lack of knowledge and understanding. However, the NR does not contain relevant information that poses a risk to the provision of accessibility in future.

The Ministry of Economics (the authority responsible for determining building regulations including regarding accessibility conditions)² drew attention to the fact that “with amendments to the Construction Law of 15 April 2021 (came into force on 19 May 2021), the competence of the building board was changed. Until 18 May 2021, according to Article 9¹(7)7) of the Construction Law (version of 18 May 2021), the competence of the building board included accepting alternative technical solutions and deviations from the accessibility requirements laid down in the building codes. In addition, the competence of the building board also involved the control over the compliance with accessibility requirements specified in building codes when examining construction projects. In turn, from 19 May 2021, the competence of the building board does not involve control of accessibility requirements laid down in building codes including coordination of alternative technical solutions and deviations anymore. The annotation enclosed to the draft law indicated that the control of accessibility requirements will no longer be within the competence of the building board, and it will

² Information provided by the Ministry of Economy in August 2021

become a matter of professional responsibility of construction specialists.³ The annotation does not provide any information that the solution was agreed with OPDs. At present, minimum accessibility standards have been set in Latvia with a lot of deviations so that accessibility should not be ensured. According to the NR, the training of the parties involved is not regular. Until now, building boards had been a conditional supervisory mechanism, which does not exist anymore. Construction specialists shall not be considered an effective supervisory mechanism within the meaning of the CRPD to ensure accessibility. Consequently, the current responsible authority, which is the Ministry of Economy, has established a formal implementation of accessibility, but in fact the implementation of accessibility will remain on the conscience of each individual specialist, and on the understanding of this specialist whether it is necessary to ensure accessibility for persons with disabilities at all.

NR 103

Referring to the Research “Analysis on self-assessment of accessibility in State and municipal institutions” of 31 March 2021 conducted by the Ministry of Welfare⁴ that was cited in the NR, the Ombudsman would like to emphasize the conclusion of the Ministry of Welfare that only 8% of public buildings are accessible and 26% of public buildings are partially accessible. Accessibility at a level that meets the requirements laid down in building codes and accessibility guidelines is ensured in none of the public building groups.

When reviewing cases on accessibility, the Ombudsman has also identified lack of knowledge and understanding of the importance of ensuring accessibility.

NR 111

The information in the NR shall be specified. There are currently 146 stations⁵ and stops in Latvia for passenger servicing; by the end of 2023, four new stations and stops will be built.

At 16 passenger stations and stops elevated platforms with ramps for wheelchairs (ascents) have been constructed, which facilitate access and getting in and off the train;

³ Draft law "Amendments to the Construction Law", adopted on 15.04.2021, entered into force on 19.05.2021. Available at: <<http://titania.saeima.lv/LIVS13/SaeimaLIVS13.nsf/0/B723945BD75B42CCC22585040051B820?OpenDocument>>

⁴ Study “Analysis on self-assessment of accessibility in national and municipal institutions”, 31.03.2021//Available at: <http://petijumi.mk.gov.lv/node/3655>.

⁵ Information provided by SJSC “Latvijas Dzelzceļš” on 6 September 2021.

information signs on access to platforms for persons in wheelchairs have been placed; passenger notification system on platforms and in station buildings has been installed: displays (visual) and loudspeakers (audio) for the transfer of information about the schedule of trains; in station buildings sanitary facilities suitable for persons with disabilities and persons with reduced mobility have been constructed.

At 9 stations and stops, elevated platforms with wheelchair ramps (ascents) have been built, which facilitate access and getting on and off the train, and at 2 more stations – one elevated platform with wheelchair ramps has been built in each of them.

So, in total, out of 146 stations and stops, in 27 (18.5%) measures to facilitate access, getting on and off train for persons with a wheelchair have been carried out. The picture below shows the current passenger trains in Latvia. Getting on and off them is a problem also for people without reduced mobility. The first procurement for the supply of trains accessible to persons with reduced mobility was announced on 1 April 2010.⁶ Unfortunately, until 2022, the situation has not improved. Persons with reduced mobility still cannot use passenger trains independently.

In turn, only 11% of all stations and stops have information signs on access to platforms for persons in wheelchairs, passenger notification systems are installed on platforms and in station buildings, and displays (visual) and loudspeakers (audio) are installed to announce information about the schedule of trains.

⁶ Information provided by JSC "Pasažieru vilciens" as of 24 September 2021.



Recommendation: To establish a system of accessibility consistent with Article 9 of the CRPD and General Comment No 2.

Article 11. Situations of risk and humanitarian emergencies

The Ombudsman supplements the information specified in the NR on the implementation of Article 11 and notifies that during the Covid-19 pandemic, the number of applications to the Ombudsman has increased threefold. The Ombudsman keeps track of the development of the situation and regularly recommends the government on how to improve the situation. Given that the regulatory framework related to Covid-19 often changes, it is difficult to include precise information in the Alternative Report. Thus, the Ombudsman draws attention to two examples:

1. The Cabinet of Ministers (the government) established a mandatory obligation to use face masks while visiting public places and events and receiving services. The Cabinet Regulation⁷ provide for exceptions (groups of persons) in the use of face masks. For example, persons with obvious movement disorders or mental health disorders, due to

⁷ The mandatory use of face masks is currently determined by Paragraph 16 of Regulation No 662 "Epidemiological safety measures for the containment of the spread of COVID-19 infection" adopted by the Cabinet of Ministers on 28 September 2021. Available at: <https://likumi.lv/ta/id/326513-epidemiologiskas-drosibas-pasakumi-covid-19-infekcijas-izplatibas-ierobezosana>.

which they lack the ability or skills to use a face mask⁸. The Ombudsman received complaints that the norm, which allows people with movement disorders or mental health disorders not to wear face masks, is not clear. Namely, the application of the norm is not comprehensible since it admits various interpretations. The applicants complained to the Ombudsman that the Cabinet Regulation did not explain how to certify or prove movement disorders and mental health disorders, due to which a person lacks the abilities or skills to use the mouth and nose cover.

2. During the state of emergency in 2020 due to the spread of Covid-19 infection, also persons in institutions (including people with disabilities) had to comply with rather strict restrictions on the movement. After the abolition of the emergency situation on 9 June 2020, the public enjoyed less restricting Covid-19 containment measures. In turn, for the clients of the institutions, isolation continued, and complaints were received about the non-provision or limited provision of rehabilitation services.

In the opinion of the Ombudsman, it is not permissible for social rehabilitation services to be interrupted or significantly reduced even during an emergency situation, as this may have irreparably adverse consequences for the maintenance and development of cognitive abilities of clients.

Article 12. Equal recognition before the law

NR 129–141

1. NR provides a general outline of the implementation of the obligations laid down in Article 12 regarding applying in practice amendments to the regulatory framework providing for the establishment of limited capacity to act. Such a framework, still does not fully ensure the fulfilment of the obligations contained in the CRPD. There are situations when employees of institutions are still being appointed as guardians or a person with disabilities does not have a guardian at all for a long time; consequently, the person is unable to exercise his or her interests and rights.

⁸ From 21 October 2020, the right of persons with obvious movement disorders or mental health disorders not to use face masks was determined by the Cabinet of Ministers in Regulation No 360 "Epidemiological safety measures for the containment of the spread of COVID-19 infection" adopted on 9 June 2020 (available at: <https://likumi.lv/ta/id/315304-epidemiologiskas-drosibas-pasakumi-covid-19-infekcijas-izplatibas-ierobezosanai>). Currently, it is determined by Paragraph 17.4 of Regulation No 662 "Epidemiological safety measures for the containment of the spread of COVID-19 infection" adopted by the Cabinet of Ministers on 28 September 2021 (available at: <https://likumi.lv/ta/id/326513-epidemiologiskas-drosibas-pasakumi-covid-19-infekcijas-izplatibas-ierobezosanai>).

2. The number of persons with limited capacity to act is increasing in Latvia every year due to the lack of alternative mechanisms for limiting capacity to act. Very few people choose continuing power of attorneys as an alternative mechanism for limiting capacity to act, whereas the consolidation of more appropriate alternative mechanisms that best ensure the inclusion of these persons in the society in the regulatory framework and implementation in practice takes place disproportionately slowly.

3. The Ministry of Welfare already in 2016 started the work on the development of the support person service; in addition, from 2017 to 2019, a pilot project⁹ was successfully implemented, which resulted in elaboration of a detailed support person service.

Despite the activities carried out, the delay in the introduction of the supported decision-making service from the State resources is critical and inadmissible at the moment; consequently, work on the abolition of the regulation on the restriction of capacity to act also does not take place. This hinders the full implementation of the rights guaranteed by Article 12 of the CRPD.

Recommendation: To ensure the service of the support person by providing the financing from the State budget.

Article 13. Access to justice

NR 142–144

NR indicates a special regulation in the Administrative Procedure Law, which is considered to be protective regarding a person with disabilities. In 2020, when conducting a survey on the availability of legal aid to citizens in administrative proceedings in the State and municipal institutions and courts, it was concluded that neither the institutions nor the court directly inform persons about the possibilities provided for in Article 18 “Costs of Administrative Proceedings and the State Ensured Legal Aid” of the Administrative Procedure Law, which clearly cannot contribute to the exercise of their rights. Among the rest, the results of the population survey pointed to the fact that the less educated and low-income people, which can often be considered as persons with disabilities, are the least informed about their rights.

NR 144, 145¹⁰

⁹ Entrusted to the society “Resource Centre for people with mental disability “Zelda””

¹⁰ The main emphasis is made on participation in the trial, and not on the potential result – imprisonment, therefore complies with Article 13 of the CRPD

Despite the fact that the regulation of compulsory measures of a medical nature was improved and the norms of the Criminal Procedure Law provide that a person's own participation in a court hearing is the basic principle and only in exceptional cases a court can decide on whether a person's participation is compatible with their state of health, the practice still has not changed significantly in this matter and, very often, the right of persons to access the court is not ensured. Courts in most cases choose not to invite persons to the court hearing, based on the expert's recommendation that inviting a person to the court hearing is not targeted and may harm the state of health of the person. Experts usually do not provide any arguments of such statements. The protection and representation guaranteed to a person by the State in most situations is ensured formally, without communicating or listening to the opinion of the person, as a result the person's right to a fair trial may be jeopardised. The Ombudsman considers that the persons involved in the proceedings do not have sufficient knowledge about the rights of persons with disabilities and methods of communication with persons who have mental disorders.

NR152

NR indicates that the regulatory framework provides State-ensured legal assistance to persons with disabilities who are in institutional care. In the discussion organised by the Ombudsman in 2018 it was concluded that, in practice, persons in institutional care are not aware of their rights, and the exercise of these rights may be difficult or even impossible for them without appropriate support. To ensure the availability of information on the rights of persons with disabilities to receive State ensured legal aid, it is essential to regularly educate employees of institutions who can help persons with disabilities in everyday life to identify both those situations when it is necessary to apply for legal aid and to provide such support (for example, by helping to draw up a proper application, etc.).

NR 153

Regarding the accessibility in places of detention, the Ombudsman has established (specifically, in Riga Central Prison on 4 August 2020) that accessibility is still not fully suitable (although the premises have been repaired) for persons with reduced mobility, especially for those in wheelchairs. The facilities are too narrow to allow free entry and movement with a wheelchair, thus the door is left open, which breaches personal privacy. Prisoners refuse to go for walks because of the difficulty of moving along the

stairs. Assistance in such cases is provided by another prisoner – a cleaner who is employed by the maintenance crew. The cleaner also helps with entering the shower room, as well as helps with self-care, in some cases other cell inmates are involved in the assistance, which is not allowed. No assistant services are provided. Also, a person with a disability with explicit functional disorders should write an application for each regular, foreseeable medical or nursing need. These needs should be identified at the outset and a treatment and care plan should be drawn up, thus ensuring everything in a timely manner, reducing unnecessary bureaucracy and unnecessary, inefficient medical advice.

Recommendations:

[1] For the State to ensure that in practice also in criminal cases, where the issue of the determination of compulsory measures of a medical nature is decided, persons with disabilities are fully ensured the right to a fair trial, including participation in court proceedings, ensuring appropriate adjustments, support in pre-trial and court proceedings, if necessary.

[2] To regularly educate employees of institutions who can provide daily help to persons with disabilities in identifying situations when it is necessary to apply for legal aid and to provide the necessary support so that the person could receive the legal aid.

[3] To adapt prison infrastructure to the needs of persons with reduced mobility.

[4] To take measures to ensure the provision of a caregiver (assistant) in places of detention, who, if necessary, provides daily assistance to persons with disabilities.

Article 14. Liberty and security of the person

NR 160

It is often observed that persons receive CMMN – treatment in a psychiatric hospital (namely, a person is restricted in freedom) only because an outpatient CMMN treatment is not effective and does not reach its goal. Often the person who committed the crime needs complex assistance, most often of a social nature, not only medical one. As the psychiatrists point out, the problem will often not be solved with treatment alone or the treatment will be just a temporary solution. The Ombudsman also raised the issue of the need for a coordinating body regarding the application of the CMMN. Meaningful application of outpatient CMMN treatment does not depend only on the court and the psychiatrist, but should also involve other institutions (e.g., social service, but not in all cases). To ensure that a person ceases to commit offences and can live fully in the

society without being isolated from it, various institutions have to cooperate in a coordinated manner. There is currently no such system in Latvia.

Recommendation: To establish a coordinating mechanism to ensure that a person with a disability who has committed a criminal offence is given the assistance and support they need (not just medical advice) to stop committing new offences and to be able to live fully in the society.

Article 15. Freedom from torture or cruel, inhuman or degrading treatment or punishment

NR 166

In 2018, the Ombudsman established that Latvia has not developed and implemented requirements for vehicles of prisoners' (including the ones with disabilities) transportation, as a result the transportation of these persons and their presence in them may be dangerous from the point of view of the road traffic safety. In 2021, the Ombudsman repeatedly addressed the issue. However, from the answer given in 2021 it can be concluded that at the level of the normative act, the requirements for premises in vehicles for the transportation of prisoners are not incorporated.

NR 167

Most of the penitentiaries, prisons, and temporary detention places of the State Police, as well as the premises of the precincts surveyed by the Ombudsman are not accessible to persons with mobility impairments (in wheelchairs). Some temporary detention facilities have one cell adapted to the needs of persons with reduced mobility. In most cases, these rooms are not accessible, and persons cannot move independently for objective reasons (thresholds, stairs, narrow doorways, location in the basement, lack of access to sanitary facilities in cells).

Article 16. Freedom from exploitation, violence and abuse

In 2017, the Ombudsman received several submissions regarding possible violations of children's rights in the children's psychiatric hospital "Ainaži" (hereinafter – the Hospital). The submissions covered very wide areas (illegal placement of children, violence against children, non-provision of health services), thus a general monitoring visit was conducted (three visits in total), together with a certified psychiatrist.

The Hospital is the only specialized hospital in the country, which, as stated on the Hospital's website, provides “qualified and professional psychiatric assistance to children and adolescents with long-term psychiatric disorders and illnesses, and the duration of treatment is as long as necessary.”

The Ombudsman detected significant violations of the rights of children, including several constituent elements of a criminal offence in the actions of the Hospital staff and management (Article 144. 152, 174, 317, and 319 of the Criminal Law). The Prosecutor General was informed of the findings. The Health Inspectorate was informed of the violations found in the field of health care.

The Ombudsman detected the following violations:

1. Lack of treatment: the only child psychiatrist in the Hospital was available only 2 days a week; although children with addiction problems were placed in the Hospital, their narcological treatment did not take place because narcological and addictive diagnoses were not included in the State order to the Hospital; unfilled medical documents.
2. Lack of other specialists and services: insufficient number of nurses; lack of staff supervising children during swimming; no speech therapist, no functional specialist.
3. Violence against children: both abuse committed among children and violence by the staff. It was concluded that neither the head of the institution nor the staff working there react to cases of mutual abuse of children, do not take actions to prevent it, and do not inform the legal representatives of children. The inaction of officials has resulted in exposure of children to the risk of both physical and emotional abuse.
4. Unlawful fixation (mechanical restraint by applying restrictive ties or straps).
5. Injections for the purpose of sedation (injecting medication to the patient against their will).
6. Restriction of privacy.
7. Not informing children about medical treatment.

The report on the findings was sent to the President, the Cabinet of Ministers, the Parliament, and the Prosecutor General.

NR 178–180

In Latvia, despite the policy planning documents and training, there is still no effective mechanism of recognition and referral of victims of human trafficking (national referral

mechanism), as well as the understanding of officials about human trafficking is still not at the proper level.

NR 179

In 2019, the Ombudsman participated in the school program “Ready for life” and educated students about the risks of human trafficking. In 2021, students' training was continued.

NR 180

In March 2019, in cooperation with the State Border Guard, the Ombudsman, launched a project “Effective implementation of the observation and forced return (Stage I)”; in the framework of this project, also the measure “Improvement of procedures for recognition of victims of human trafficking in the forced return” was implemented. In 2020, this project activity resulted in the development of study materials on recognition of victims of human trafficking in the return, and in organization of training seminars, during which 42 participants from the State Border Guard, Orphan and custody courts, the State Inspectorate for Protection of Children's Rights, associations “Shelter “Safe House””, “Centre MARTA”, and “Latvian Red Cross” were trained.

Recommendation of the UN Committee on the Establishment of an Independent Human Rights Monitoring Mechanism to conduct monitoring in institutions.

Even though the Ombudsman has been conducting monitoring visits in various closed-type institutions (institutions, prisons, psychiatric hospitals, etc.) since the beginning of the establishment of the Office, on 1 March 2018 the Prevention Unit was created; its main task is to visit institutions where persons are or may be deprived of liberty. The purpose of the visits is to prevent possible violations of human rights by checking the compliance of living conditions with human rights standards, interviewing people placed in the institution, as well as educating employees of the institution on various human rights issues. From 2022, the Ombudsman's office is the National Preventive Mechanism within the meaning of OPCAT¹¹.

In 2018, the Prevention Unit carried out 25 monitoring visits, including 7 to psychiatric hospitals and 3 to the State social care centres.

¹¹ Optional Protocol to the UN Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (Additional Protocol). Note.

In 2019, a total of 76 monitoring visits were carried out, including 7 to psychiatric hospitals, 13 to boarding schools (where children with disabilities are mostly enrolled), as well as 3 to State social care centres.

In 2020 (during pandemic), 38 monitoring visits were carried out, including 5 to State social care centres, 6 to elderly nursing homes, and 10 to children's social care institutions.

Problems identified during monitoring visits and repeating in many institutions:

1. Accessibility – architectural barriers of buildings and planning of premises prevent persons with disabilities from moving independently or create additional effort, reasonable adjustments are not considered (in almost all types of institutions).
2. In some institutions people in wheelchairs can still be placed on the higher floors of buildings without an elevator. Consequently, not only is the freedom of movement of persons restricted (e.g., walking in the fresh air), but also in the event of evacuation, for example, in the event of a fire, the lives of persons are endangered.
3. Risks have been identified that institutions are not able to meet the requirements for all clients and organise skills and movement development classes and meaningful leisure activities in accordance with the functional state of the clients.

Article 19. Living independently and being included in the community

The Ombudsman has for a long time drawn the attention of the responsible institutions to the fact that the provision of social services does not meet the needs of persons with mental disorders and alternative community-based services are not sufficiently available; consequently, in many cases persons with mental disorders are forced to choose institutional care.

Regular visits to institutions show that most institutions have expanded, and large State budget resources are invested in them thus strengthening institutional care, which is contrary to the purpose and essence of the DI.

The Ombudsman stresses that it is not permissible that the financing of the State budget or European Union projects is directed to the strengthening of institutional care rather than to the development of community-based social services.

On 13 October 2020, the Ombudsman held a press conference and addressed the Prime Minister, calling for the provision of a wide range of community-based services,

including the support person service, throughout the territory of Latvia, that is financed from the State budget.

Recommendations:

[1] To provide a wide range of community-based services throughout the territory of the State, including funding from the State budget.

[2] In the foreseeable future (the Ombudsman has requested until 1 January 2024) to completely stop placing new clients in the State social care centres and to ensure the provision of appropriate social services in community for every person with disabilities.

Article 20. Personal mobility

NR 200 on the right of the child to receive a new assistive technology

According to Ombudsman, NR does not reflect complete information on problems on assistive technologies. NR notes that funding for assistive technologies has increased in recent years and that the number of beneficiaries of assistive technologies has increased.

However, the Ombudsman draws attention to a situation when, on the advice of doctors, a child with a disability was recommended to immediately change the electrically controlled wheelchair to a wheelchair appropriate to the child's change in height. The granting of the new assistive technology to the child was refused because the term of use of the assistive technology provided for by regulatory enactments – 6 years – had not passed.

The Ombudsman found that according to Regulation¹² in a situation where the SJSC “National Rehabilitation Centre “Vaivari”” issues an assistive technology, a person may be re-admitted to the queue for the receipt of the assistive technology, if the anthropometric indicators have changed and the previously issued assistive technology has become unsuitable for further use. In turn, if an assistive technology has been received via compensation, a person's right to being provided with a new assistive technology in case the person's anthropometric indicators have changed may be limited by the duration of use of the previous assistive technology.

To use an assistive technology, it must be adapted to the individual needs of a person. According to Ombudsman, it is not correct to determine a long period of time for children to use the assistive technology because the child's growth and physical

¹² Regulation No 1474 “Regulation on the assistive technology: adopted by the Cabinet of Ministers on 15 December 2009

changes occur constantly, it is impossible to predict them. The Ombudsman recommended amendments to the legal framework to the Ministry of Welfare. The ministry agreed that the compensation mechanism for providing children with assistive technologies is not appropriate and they have begun working on amendments.

NR 205–207, Assistant service

The Ombudsman believes that the information provided in the NR regarding the implementation of Article 20 is not complete regarding the provision of assistant services to persons with disabilities.

For several years the Ministry of Welfare have worked to improve the assistant service. As a result, a new model of assistant service has been developed. A new procedure has been established for the provision of assistant services to people with disabilities. In general, more assistant service hours are allocated to persons with disabilities who work, study, are active and with the support of an assistant can move outside the home more often, inter alia, by engaging in the work of non-governmental organizations and volunteering. Consequently, the assistant service is assigned in a smaller amount for people who are not socially active.

In 2021, the scope of assistant service for children was reduced from 160 to 80 hours per month, while introducing two new services: a care service for children who need special care up to 80 hours per month, and a companion service for children with disabilities who need support to move outside the home 60 hours per month. The new assistant service model significantly worsened the situation of children (about 21%) who so far used more than 80 assistant hours per month. These are children attending medical or leisure activities or receiving services far from their place of residence.

The Ombudsman has received complaints about shortcomings regarding assistant service and the new model. Applicants complain that the remuneration of assistants to people with disabilities is disproportionately low.¹³ On average, assistant service providers receive a salary of EUR 3.62/hourly¹⁴. A similar remuneration is also established for caregivers and attendants. On the other hand, the low pay and limited

¹³ In accordance with Paragraph 35 of Regulation No 316 "Regulations regarding the service of an assistant, companion and care service for persons with disabilities" adopted by the Cabinet of Ministers on 18 May 2021, the amount of funding provided by the State for one hour of provision of the assistant service and companion service is EUR 4.73, which includes remuneration of the assistant and companion in the amount of not less than EUR 4.50, including all taxes related to the provision of the assistant service and companion service, as well as expenses for administration of services in the amount of not more than EUR 0.23. Available at: <https://likumi.lv/ta/id/323301-noteikumi-par-asistentu-pavadona-un-aprupes-pakalpojumu-personam-ar-invaliditati>

¹⁴ <https://www.lm.gov.lv/lv/media/8857/download>

hours of work are not motivating enough to attract potential service providers. Consequently, parents who cannot find an assistant become assistants to their children. This situation also contradicts one of the objectives of the service – to relieve the family members of persons with disabilities and provide them with free time and the opportunity to return to work.

The State does not provide training of assistant service providers for work with people with disabilities. The service provider must be able to establish contact with the person, have knowledge of communication psychology, first aid, the basics of care, including awareness of specific care issues depending on the type of health disorder, etc. The actions of an assistant, caregiver or companion when working with a child may affect the rights and interests of the child, therefore those service providers should also be required to acquire special knowledge on the protection of the rights of the child, as is the case for representatives of other professions in accordance with Article 51 of the Law on the Protection of the Children's Rights. These factors affect the quality of the assistant service.

Applicants in their complaints indicate an insufficient amount of assistant service. There are a lot of people with disabilities who are disadvantaged by the new procedure for providing the assistant service compared to the previous one. In individual cases, the number of hours of assistant service has decreased. It should be noted that if the assistant service is not provided in sufficient volume or quality, the person with disabilities may feel isolated or separated from the society.

Recommendation: To give assistant service providers the right to receive motivational remuneration and training and implement additional qualification requirements.

Article 21. Freedom of expression and opinion, and access to information

According to the information provided by the Latvian Association of the Deaf, in 2017, the Rehabilitation Centre of the Latvian Association of the Deaf employed 38 sign language interpreters, in 2018 and 2019 – 42 sign language interpreters.¹⁵

The number of sign language interpreters is insufficient. If all the interpreters were working full-time (currently only 19 interpreters are working full-time) and would not be

¹⁵ Following regional location: in Riga (also serving Tukums, Jelgava, Jurmala, Ogre) – 24, in Valmiera – 2, in Rezekne – 2, in Smiltene – 1, in Aluksne – 1, in Daugavpils – 1, in Ventspils – 1, in Kuldīga – 1, and in Liepāja – 2.

working in a second job (now, the pay of sign language interpreters is uncompetitive in the labour market, because prices have not changed since 2015), then their number would be sufficient for a minimum provision of services.

However, to ensure all requests for interpreter services without restrictions, including in primary and secondary education, the number of interpreters should be at least twice as high. At the same time, it is not possible to have more sign language interpreters if the salary is insufficient.¹⁶

The table below gives information on the number of persons¹⁷ who started and completed studies in the sign language interpreter program, as well as continue to work in this profession.

Year	Studies launched	Studies completed	Employment of graduates in specialization
2017	20	4	3 graduates work as the sign language interpreters in the Division of Sign Language Interpreters of the LAD Rehabilitation Centre.
2018	10	7	4 graduates work as the sign language interpreters in the Division of Sign Language Interpreters of the LAD Rehabilitation Centre. 1 graduate works in the Social Rehabilitation Division of the LAD Rehabilitation Centre –the Head of the Division.
2019	13	3	2 are employed. No graduate works in the profession.
2020	6	1	1 graduate works as the sign language interpreters in the Division of Sign Language Interpreters of the LAD Rehabilitation Centre.

¹⁶ Information provided by the Latvian Association of the Deaf (September 2021).

¹⁷ Information provided by the State Social Integration Agency College, which ensures studies in the sign language interpreter program.

Year	Studies launched	Studies completed	Employment of graduates in specialization
2021	10 (as of 07.09.2021)	5	As of 31.08.2021: 1 graduate is employed, does not work in the profession 1 graduate has started studies at the RSU (occupational therapist); 3 graduates plan to go to the LUD Rehabilitation Centre in September/October to discuss job opportunities.

Recommendation: To facilitate the access of hearing-impaired persons to information according to Article 21 of the CRPD through the services of an interpreter.

Article 23. Respect for home and the family

In 2017 it was found that the custody rights of the child's mother were terminated, because, due to her state of health, without the presence of a family assistant of the social service, she was unable to provide full-fledged care for the children, and she lacked the skills and abilities to care for the children. In such cases, the Orphan and custody court, in cooperation with the social service, must evaluate all possible solutions to provide the family with appropriate assistance and services so that children can grow up in the family, yet it was not provided.

Unfortunately, upon reading the judgment of the court, it was established that the court also failed to assess the limited ability of the mother to care for and raise her children in accordance with the CRPD due to the health condition.

The Ombudsman still sees cases when parents are being deprived of their child's custody due to their health condition. Insufficient understanding of the right of a person with disabilities to receive assistance in caring for a child, as the lack of adequate social services in municipalities is the cause of separation of the child from the family, because parents are unable to properly care for the child without support.

Recommendation: To promote the understanding of employees of Orphan and custody courts and social services about the rights of persons with disabilities laid down in th Article 23 of the CRPD and to provide the service of a family assistant in each municipality.

Article 24. Education

1. Possibility for children with special needs to receive education appropriate to their abilities and needs

1.1. The State Audit Office carried out an audit¹⁸ to find out whether children with special needs can receive education corresponding to their abilities and needs.

The following deficiencies were identified:

1.1.1. The process of providing the opinion of the pedagogical medical commission is complicated and does not ensure the receipt of opinions within a reasonable time; the parents of the child and educational institutions do not always receive sufficient information to organize the educational process according to the actual needs of the child.

1.1.2. The reform of educational institutions has facilitated the acquisition of special education in the municipality of the place of residence of the child; however, in several municipalities, children residing there are not provided with special educational programmes the implementation of which does not require significant investments.

1.1.3. In educational institutions, information about the support for a child is general and does not explain possibilities of a personalised approach according to the actual needs of the child.

1.1.4. The best interests of children with special needs are not ensured in boarding schools because the boarding service is not sufficiently regulated. Regulatory enactments establish only hygienic requirements for boarding houses of educational institutions.

1.1.5. The activities of educational institutions offering vocational primary education programmes are not always aimed at ensuring the best interests of young people with special needs: there is a lack of programmes that meet the demand of employers, support for addressing potential employers, as well as an assessment of whether the chosen programme will be suitable for the student.

2. Access to education

During the reporting period, the Ombudsman received an application regarding the violation of the right of the child to receive education according to their state of health, level of development and abilities in the educational institution nearest to their place of residence.

¹⁸ Audit report was published on 26 June 2021. Available at:
https://www.lrvk.gov.lv/lv/getrevisionfile/29455-Asko-F2-FK_-mptgPfFbczGdLSEhczVJ.pdf

Article 54 of the Law on the Protection of the Children's Rights stipulates that a child with special needs has the same right to an active life, the right to develop and acquire a general and professional education corresponding to the physical and mental abilities and desires of the child, and the right to take part in social life, as any other child. Several Latvian national legislative acts establish the right of a child with special needs to obtain high-quality primary and general secondary education in accordance with their physical and mental abilities and desires. To ensure these rights, the parents of the child have the right to choose an educational institution for their child, namely, the child may acquire education corresponding to their abilities, state of health and development in a special educational institution or in a general educational institution that includes children with special needs. Article 17(1) of the Education Law states the obligation of the local government to provide the child with the opportunity to acquire pre-school education and primary education in the educational institution nearest to the place of residence.

That is, the municipality is obliged to provide children living in its administrative territory, regardless of their state of health, with the opportunity to receive primary education in the educational institution nearest to their place of residence. The educational institution closest to the place of residence is an educational institution, geographically located closer to the place where the child lives. In this case, the nearest educational institution did not have a licensed educational program necessary for the child.

After assessing the compliance of the circumstances of the specific situation with the legal framework, it was concluded that the municipality is obliged to ensure the rights of the applicant's child to access quality education in the educational institution nearest to the place of residence on an equal basis with other children. The opposite action should be assessed as a violation of the child's right to education. Consequently, the Ombudsman asked the municipality not to allow the violation of the rights of the child and to take the necessary actions to prevent it.

3. NR 239

The information provided in the NR is partly correct. Higher education institutions should provide access to higher education for persons with special needs, but in some cases this rule does not work. In 2016/2017, the Ombudsman¹⁹ conducted a study "Accessibility of higher education for persons with disabilities. Information about this

¹⁹ In cooperation with the Association of Disabled People and their Friends "Apeirons"

research was provided by the Ombudsman to the UN Committee on 1 July 2019 thus giving additional data at the request of the UN Committee.

The Ombudsman considers it necessary to reiterate the problems identified in the study.

In 2016²⁰, 58²¹ higher education institutions operated in Latvia, eight²² of them noted that for persons with disabilities, studying in the particular higher education institution is not possible due to the service or the specifics of the higher education institution.²³

Monitoring of higher education institutions was carried out in three rounds: a survey of potential students with disabilities; a survey of higher education institutions; and a visit to higher education institutions to verify the accessibility (physical/informative) in practice.

The Ombudsman monitored 43 higher education institutions: 164 buildings, including 81 higher education institution study buildings, 42 higher education institution libraries and 40 dormitories.

Main conclusions:

1. More attention is paid to the physical accessibility, less to the information accessibility (including the accessibility of educational materials), which creates a new stereotype that accessibility applies to people with reduced mobility and limits the possibilities of students with sensory disorders to obtain higher education.
2. The physical accessibility is not always adjusted in accordance with regulatory enactments.
3. There are very few accessible dormitories, consequently, a student with a disability has limited opportunities to choose the most preferred higher education institution or study program. Thus, a student may have to study at a higher education institution located in the city where he or she lives, or not receive higher education at all.
4. The inaccessibility of higher education institutions' libraries can lead to the situation that a student with a disability cannot meet the requirements for studying the curriculum.

²⁰ Ministry of Education and Science. Higher education institutions. Available at: <<http://www.izm.gov.lv/lv/izglitiba/augstaka-izglitiba/augstakas-izglibas-iestades>>[17.06.2016]

²¹ In 2019, 46 higher education institutions, 6 higher education agencies, and 2 branches of foreign universities operate in Latvia.

²² The State Border Guard College, the Fire Safety and Civil Protection College, the Latvian Maritime Academy, the State Police College, the Novikontas Maritime College, the Liepaja Maritime College, the National Defence Academy of the National Armed Forces of Latvia, the Olaine Mechanics and Technology College (it teaches specialists in chemistry, thus vision and hearing are an important part of studies and work).

²³ In 2016, the Art Academy of Latvia was involved in proceedings about the inaccessibility of the academy building.

5. Only one higher education institution²⁴ has developed guidelines for teachers for work with students with visual, hearing, movement disorders, students with dyslexia and dyspraxia.

Recommendations:

[1] To immediately improve the capacity of the State Pedagogical Medical Commission and ensure the accessibility of the State Pedagogical Medical Commission.

[2] To provide adequate funding to educational institutions to ensure the implementation of the support measures recommended for children with special needs.

[3] To promote the involvement of parents in the development of an individual education programme learning plan by informing also about the support measures for the student in obtaining education. To ensure supervision over the quality and implementation of the developed individual educational programme learning plans.

[4] To elaborate a legal framework with the necessary requirements for the provision of staff in boarding schools of educational institutions.

[5] To elaborate and develop vocational primary education programmes for young people with special needs required in the job market.

[6] To ensure the accessibility of higher education institutions and the accessibility of the teaching process for persons with various types of disabilities.

Article 25. Health

Information included in the NR contains on the measures in health care is not complete. The Ombudsman has highlighted several significant shortcomings in the provision of health-care services, which are adversely affected by insufficient remuneration and lack of human resources and funding.

NR 244 notes that mental health is one of the priorities of the Ministry of Health and it is planned to develop outpatient care for mental health and to improve the interdisciplinary approach and involvement of the multidisciplinary team. The Ombudsman has concluded that in many health care institutions children still cannot receive psychiatry services due to the lack of specialists, the number of services is limited and is not equally available throughout the territory of Latvia. Timely diagnosis is not provided, which creates problems in the further development of the child.

²⁴ Riga Stradiņš University

In 2018, the Adolescent Resource Centre was opened; it implements a prevention-type, community-based outpatient support program for adolescents aged 11 to 18 years with harmful substance abuse or dependent behavioural disorders. Currently, there are such centres in seven cities of Latvia, which is good, but it is insufficient to ensure the availability of psychiatric services for adolescents. In 2018, the Ombudsman conducted inspection visits to six Latvian hospitals, which provide inpatient psychiatric treatment for children. Several systematic deficiencies in inpatient psychiatric treatment of children were observed, including unavailability of outpatient services, lack of social rehabilitation services, lack of child psychiatrists, and excessive medicine treatment. The Ombudsman has updated the problem of risks for children to enter psychiatric hospitals. To assess the developmental or behavioural disorders of the child, it was planned to create support services employing specialists (educational and school psychologist, special educator, speech therapist). However, the government does not support the creation of new services, thereby hindering the implementation of the project.

Even though free dentistry for children is provided in the country²⁵, for several years the Ombudsman sees the unavailability of the State-paid dental services for children, in some places children have to wait up to two years for the service. In 2019, the Ombudsman asked the Ministry of Health to develop a mechanism for complete compensation of visits to dental specialists by the State. The Ministry of Health does not find immediate solutions due to lack of funding and administratively complex process. Although, compared to the previous reporting period, the situation with timely access to health care services has improved, many patients are still forced to pay for individual State-funded planned health care services (examinations, surgeries, etc.) as otherwise they may have to wait a long time. For example, the patient must wait up to 122 days for an endocrinologist's consultation in certain medical institutions, or from 67 to 320 days for neurography, and there is also no timely access to child psychiatry (inpatient), which is a particularly acute problem at the moment.

The issue of payment for medicines and medical supplies remains relevant. Medicines and medical devices that are included in the List of the State Reimbursable Medicines are paid in amount of 100%, 75%, and 50% depending on the patient's diagnosis. For low-income patients, in the case of 50%, 75%, or 100% compensation, the cheapest

²⁵ Regulation No 555 "Procedures for the organisation of and payment for health care services" adopted by the Cabinet of Ministers on 28 August 2018 [Available at: <https://likumi.lv/ta/id/301399-veselibas-aprupes-pakalpojumu-organizšanas-unsamaksas-kartiba>]

medicine is fully paid²⁶. In turn, people must purchase medicines not included in these lists. Municipalities are entitled to grant health care benefits to their population. However, this benefit is symbolic in many municipalities, mostly reimbursing expenses related to patient co-payments, inpatient treatment, dental services such as dental prosthetics, and the purchase of medicines and medical devices.

Recommendations:

- [1] To ensure the availability of a multidisciplinary team of child psychiatrists and other specialists for children throughout the territory of Latvia.
- [2] To increase the State funding for dental services for children to improve their accessibility for children throughout the territory of Latvia.
- [3] To increase funding for healthcare.

Article 26. Habilitation and rehabilitation

NR 255

Information provided in the NR regarding the implementation of Article 26 is not complete. NR indicates that persons with disabilities have access to social rehabilitation service from the State budget. It should be noted that the regulatory framework establishes a restriction on the receipt of social rehabilitation services. So, only persons of working age and employed persons after working age (employees or self-employed persons) are entitled to social rehabilitation services²⁷.

The Ombudsman has received complaints, indicating that the medical rehabilitation service for people with disabilities is not available either in a timely manner due to the long queues or in the amount required. For example, according to publicly available information, the waiting time in the queue for receiving the State paid services of functional specialist in the Outpatient Rehabilitation Clinic of the National Rehabilitation Centre "Vaivari" is 180 days²⁸.

²⁶ Compensation procedure. <https://www.vmnvd.gov.lv/lv/kompensacijas-kartiba>

²⁷ It follows from Paragraph 1.2 of Regulation No 578 "Regulations regarding receipt of social rehabilitation service from the State budget funds in a social rehabilitation institution" adopted by the Cabinet of Ministers on 3 December 2019. Available at: <https://likumi.lv/ta/id/311143-noteikumi-par-socialas-rehabilitacijas-pakalpojuma-sanemsanu-no-valsts-budzeta-lidzekliem-socialas-rehabilitacijas-institucija>

²⁸ http://www.rindapiearsta.lv/lv/mekle_isako

Article 27. Work and employment

From 1 July 2021, Article 20⁴(1) of the Law on State Social Insurance (hereinafter – the Law) provides that the minimum object of mandatory contributions in a quarter shall be three minimum monthly wages specified by the Cabinet. If the person is an employee at several employers or simultaneously an employee and a self-employed person, the objects of mandatory contributions declared to the person shall be summed up.

Article 20⁴(4) of the Law specifies groups of persons for which minimum mandatory contributions are not required. People with group I and group II disability are included in the list of persons for whom making minimum mandatory contributions is not necessary. People with group III of disability are not included in the scope of persons for whom the employer may not make the minimum mandatory contributions. The Ombudsman finds a significant flaw in the regulatory framework regarding this matter. In the Ombudsman's view, such regulation will not promote inclusive employment. The Ombudsman drew attention to the fact that due to functional limitations and their degree, and the extent of loss of ability to work, a part of people with the group III disability cannot work full-time. Consequently, such a procedure may create a significant risk to the employment of persons with group III disability, namely, reduce the level of employment of persons with group III disability.

In 2020, the Ombudsman conducted a study “The prevalence of discrimination in the employment in Latvia. Comparative study, 2011 and 2020”. The aim of the study was to research the spread of discrimination in workplaces in Latvia and how it manifests itself, as well as to find out how the situation has changed since 2011.

Compared to situation nine years ago, employees are significantly less likely to provide potential employers with information that can constitute a basis for discrimination. The number of people who consider it necessary to inform the employer about their state of health and other sensitive signs has decreased by 2-3 times. Also, less often employers ask potential employees questions on these topics. The results of the study showed that the state of health (disability) is one of the main factors causing discrimination in the workplaces in Latvia. Discriminatory treatment most often comes from the immediate supervisor (46 %), as well as other colleagues and company management, less often – from clients or cooperation partners.

3. NR 257, 259

The NR states that various improvements have been made in recent years to promote the inclusion of persons with disabilities in the labour market²⁹.

Statistics on unemployment of people with disabilities³⁰ and the complaints the Ombudsman has received indicate the difficulties of people with disabilities in entering the labour market. The complaints are about the State's insufficient support for the promotion of employment of people with disabilities. The applicants consider that the range of support measures provided to employers should expand. For example, employers should receive tax incentives when employing people with disabilities. Also, the Ombudsman receives complaints about insufficient State support for the promotion of employment for people with very severe disabilities. Applicants complain that specialized workshops are not available for people with disabilities who need such a service.

The Ombudsman sees problems in the range of available services provided by the State for people with severe disabilities who are unable to move, work, and study outside the home. The Ombudsman cannot identify any service for people with severe disabilities who are unable to move outside the home, which would be aimed at enabling such people to develop and use their creative, artistic, and intellectual potential, including having a paid work. Due to the lack of relevant services, people with severe disabilities may feel isolated or separated from society.

Recommendations:

[1] To make amendments to the regulatory framework and include persons with group III disability in the scope of persons for whom the employer is exempt from the minimum mandatory contributions.

[2] To actively develop new services so that the largest possible number of people with disabilities can fully enter the labour market. To evaluate the range of services for the reduction of the consequences of disability provided by the State to people with severe disabilities who are unable to move outside the home.

²⁹ Paragraph 259 of the National Report.

³⁰ Paragraph 257 of the National Report.

Article 28. Adequate standard of living and social protection

The Ombudsman has achieved significant improvements over the past year; but the level of social security is still insufficient for people to meet their needs at least at a minimum level, including persons with disabilities.

1. Compared with the previous reporting period, the amount of social security benefit and disability pension, were revised in 2020 (the NR 277). From 2020, the Cabinet of Ministers increased the amount of the State social security benefit from 64 euros to 80 euros. However, such an increase in the benefit was insignificant and did not improve the situation of the beneficiaries. In 2021, after the judgment of the Constitutional Court, the amount of State social security benefit was amended repeatedly³¹.
2. The Parliament raised the amount of the minimum disability pension and the amount of the State social security benefit and set a different amount of the benefit for employed and non-employed persons with disabilities from 1 January 2021. The amount of the State social security benefit for persons with group I and group II disabilities depends on the fact of employment. The amount is larger for non-working beneficiaries since an additional payment is granted (NR 281).
3. Based on the judgements of the Constitutional Court (NR 279), from 1 January 2021, the guaranteed minimum income level has been increased: EUR 109 for the first or only person in the household and EUR 76 for the other persons in the household. In turn, the income threshold of a poor household is EUR 272 for the first or only person in the household and EUR 190 for the other persons in the household.
4. The decision of the legislator to increase the minimum income levels is positive; however, a serious concern is that the legislator has chosen to specify in the laws the amount of concrete minimum amounts rather than the principle of determining the minimum income thresholds, as well as refused the annual revision of the minimum income thresholds, stipulating that the minimum income thresholds are reviewed not less than once every three years. Already in 2021, the planned allowance in amount of EUR 109 has been calculated taking into consideration the median of income in 2018.

³¹ Judgment made by the Constitutional Court on 9 July 2020 in case No 2019-27-03 [Available at: <https://www.satv.tiesa.gov.lv/cases/?case-filter-years=&case-filter-status=&case-filter-types=&case-filterresult=&searchtext=2019-27-03>]

5. Certain benefits have still not been reviewed for a long time. For example, the allowance for the compensation of transport costs for persons with disabilities who have difficulty in moving (EUR 79.68 for each full six-month period) has not been revised since 2007. Also, the amount of the benefit for persons with group I visual disability for the use of the assistant service (17.07 euro/week) has not been revised according to changes in the national minimum wage since the introduction of this benefit in 2015. The amount of the benefit 17.07 euro/week does not correspond to the objective pursued by this benefit, namely, to ensure that persons can receive a benefit for the use of an assistant for 10 hours per week, choosing the specific assistant by themselves³². Due to the increase in the minimum wage and the minimum hourly tariff rate, in 2021, the amount of the benefit allows a person to use an assistant for only 5 to 6 hours a week instead of 10 hours a week³³.

Recommendation: To increase the level of social protection.

³² Article 12(1)2 of the Disability Law. <https://likumi.lv/ta/id/211494>; Regulation No 698 “Regulation on the benefit for the use of an assistant for persons with group I visual disability” adopted by the Cabinet of Ministers on 10 November 2014. <https://likumi.lv/ta/id/270262>

³³ For example, in 2021, the amount of the minimum wage set in the country is EUR 500 and the minimum hourly rate is between EUR 2.71 and EUR 3.12 per hour depending on the number of working hours per month.

Summary

The Ombudsman does not deny that during the reporting period the institutions involved in the implementation of the CRPD have worked to improve the situation of persons with disabilities in the country; this is confirmed by both the NR and the survey of persons with disabilities³⁴; within the framework of this survey respondents with disabilities have pointed to certain improvements in some areas.

The Ombudsman points out that the CRPD provides for the provision of actual, rather than formal, equality for persons with disabilities. Formal equality can be observed in various laws or regulations of the Republic of Latvia. The actual equality is manifested in the implementation of these laws and regulations in practice in accordance with the nature and purpose of the CRPD, as well as in compliance with the principle of non-discrimination.

Therefore, the Ombudsman emphasizes the need for the UN Committee to draw attention to compliance with the regulatory framework in practice.

The Ombudsman encourages to lay down the following recommendations to improve the situation of persons with disabilities:

Article 4. General obligations

To provide the introduction of new approaches to the evaluation of the child's functional disorders as soon as possible.

Article 7. Children with disabilities

[1] To ensure that the website of each municipality contains easily accessible and clear information about municipal services for families raising children with special needs.

[2] To establish and provide in each municipality a single set of services for children with disabilities and their families.

[3] To promote and implement good practices of inclusive education thus building in municipalities understanding of inclusive education through concrete examples of good practice.

[4] To ensure the availability of day-care centres for families raising children with disabilities by paying particular attention to the location of day-care centres, the availability of infrastructure (accessible), and access to rural areas.

³⁴ Study "Evaluation of the implementation of the United Nations Convention on the Rights of Persons with Disabilities". Available at:
<http://petijumi.mk.gov.lv/sites/default/files/title_file/BISS_Gala_zinojums_LM_ANO_konv_30062020red_13072020%20%281%29.pdf>

Article 9. Accessibility

To establish a system of accessibility consistent with Article 9 of the CRPD and General Comment No 2.

Article 12. Equal recognition before the law

To ensure the service of the support person by providing the financing from the State budget.

Article 13. Access to justice

[1] For the State to ensure that in practice also in criminal cases, where the issue of the determination of compulsory measures of a medical nature is decided, persons with disabilities are fully ensured the right to a fair trial, including participation in court proceedings, ensuring appropriate adjustments, support in pre-trial and court proceedings, if necessary.

[2] To regularly educate employees of care institutions who can provide daily help to persons with disabilities in identifying situations when it is necessary to apply for legal aid and to provide the necessary support so that the person could receive the legal aid.

[3] To adapt prison infrastructure to the needs of persons with reduced mobility.

[4] To take measures to ensure the provision of a caregiver (assistant) in places of detention, who, if necessary, provides daily assistance to persons with disabilities.

Article 14. Liberty and security of the person

The country must establish a coordinating mechanism to ensure that a person with a disability who has committed a criminal offence is given the assistance and support it needs (not just a medical advice) to stop committing new offences and to be able to live fully in community.

Article 19. Living independently and being included in the community

[1] To provide a wide range of community-based services throughout the territory of the State, including funding from the State budget.

[2] In the foreseeable future (the Ombudsman has already requested even up to a specific date – until 1 January 2024) to completely stop placing new clients in the State social care centres and to ensure the provision of appropriate social services in community for every person with disabilities.

Article 20. Personal mobility

To give assistant service providers the right to receive motivational remuneration and training and implement additional qualification requirements.

Article 21. Freedom of expression and opinion, and access to information

To facilitate the access of hearing-impaired persons to information according to Article 21 of the CRPD through the services of an interpreter.

Article 23. Respect for home and the family

To promote the understanding of employees of orphan's courts and social services about the rights of persons with disabilities laid down in Article 23 of the CRPD and to provide the service of a family assistant in each municipality

Article 24. Education

[1] To improve immediately the capacity of the State Pedagogical Medical Commission and ensure the accessibility of the State Pedagogical Medical Commission.

[2] To provide adequate funding to educational institutions to ensure the implementation of the support measures recommended for children with special needs.

[3] To promote the involvement of parents in the development of an individual education programme learning plan by informing also about the support measures for the student in obtaining education. To ensure supervision over the quality and implementation of the developed individual educational programme learning plans.

[4] To elaborate a legal framework setting out the necessary requirements for the provision of staff in boarding schools of educational institutions.

[5] To elaborate and develop the most popular vocational primary education programmes in the job market for young people with special needs.

[6] To ensure the accessibility of higher education institutions and the accessibility of the teaching process for persons with various types of disabilities.

Article 25. Health

[1] To ensure the availability of a multidisciplinary team of child psychiatrists and other specialists for children throughout the territory of Latvia.

[2] To increase the State funding for dental services for children to improve their accessibility for children throughout the territory of Latvia.

[3] To increase funding for healthcare.

Article 27. Work and employment

[1] To make amendments to the regulatory framework and include persons with group III disability in the scope of persons for whom the employer is exempt from minimum mandatory contributions.

[2] To actively develop new services so that the largest possible number of people with disabilities can fully enter the labour market. To evaluate the range of services for the

reduction of the consequences of disability provided by the State to people with severe disabilities who are unable to move outside the home.

Article 28. Adequate standard of living and social protection

To increase the level of social protection.