The Swedish Disability Movement`s alternative report

on

UN International Convenant on Civil and Political rights

HANDIKAPP-FÖRBUNDEN

SWEDISH DISABILITY FEDERATION
The Swedish disability movement’s alternative report to the UN’s Human Rights Committee

This is the Swedish disability movement’s report to the Human Rights Committee, approved by the Swedish Disability Federation on 29 March 2007.

The object of this report is to give the committee a comprehensive idea of what the situation is like for people with disabilities in Sweden. Via this report, we also wish to set out the disability movement’s recommendations on what measures the Swedish Government should take to enable Sweden to better observe the civil and political rights.

The report should be viewed as a supplement to Sweden’s sixth official report to the UN’s Human Rights Committee. The report follows the guidelines on how the State report should be arranged in order to ease comparison between the reports.

Civil society in Sweden intends sending another alternative report. The other alternative report deals with the situation of other groups within society. The two alternative reports therefore complement one another.

In total, 56 organisations of people with disabilities are behind this report, see Appendix 2

Submitted to the government in May 2007

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THE SWEDISH DISABILITY FEDERATION

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The Swedish disability movement’s alternative report to the UN’s human rights committee

There is a long way to go to achieving integration and equality for people with disabilities. In Sweden, there is unanimous political will to give everyone the opportunities to participate in society. Despite this, girls, boys, women and men with disabilities are discriminated against in relation to the majority of articles in the covenant on civil and political rights.

Preconditions for full participation are lacking

The Swedish disability movement’s alternative report on economic, social and cultural rights sets out that a large number of people with disabilities are not even given the preconditions to participate on equal terms. Preconditions refer to care, rehabilitation, support and service according to the UN’s Standard rules. The failure to give people the necessary preconditions to participate on equal terms also results in people often not been given the preconditions to utilize their civil and political rights. Among other things, this report shows that people with disabilities who are in need of personal assistance do not have an equal opportunity to freely choose place of residence (article 12) or to take responsibility for their families and children (article 23). Sweden has good laws in the area, but unfortunately they are not always followed in practice.

Discrimination

The information in this report shows that the civil and political rights of people with disabilities in Sweden are not guaranteed to the same extent as people without disabilities. Unfortunately, the legislation does not provide adequate protection against discrimination (article 2) and several laws make distinctions between people in a way that cannot be deemed to be compatible with this covenant (article 26). Other cases are when people are excluded in various ways or do not have the opportunity to be an active member of society. Comprehensive statistics show that one in every two people with disabilities feels that he/she is discriminated against! Women with disabilities feel more highly discriminated against than men.

Lack of accessibility

The largest reason by far for people with disabilities not being able to utilize their civil and political rights, and also for the experience of discrimination, is the lack of accessibility to locations, premises, means of transport, information and communication. The lack of accessibility means that people are not able, for example, to take a full part in the political process (article 25), including participation in peaceful gatherings and club activities (articles 21 and 22). Freedom of expression (article 19) is also curtailed when people cannot access information or are not given the opportunity to communicate, and this is a serious obstacle in achieving democracy. The right to freedom of expression, democracy and participation in political life are matters of course in Sweden, however despite this, it does not fully apply for people with disabilities. The national action plan for disability policy stipulates that public environments and public means of transport must be accessible before 2010. The history of disability policy is full of objectives that have not been met and high targets that have not been achieved. At present there is a general indication that the goals in the national action plan – that Sweden must be accessible
by 2010 – will not be accomplished either. The National Board of Housing, Building and Planning’s analysis of easily rectified obstacles from 2005 shows among other things that 68 percent of all landlords are not even aware of the regulations or have only heard about them. The National Public Transport Agency’s assessment of the possibilities of achieving the 2010 interim target is that until then accessibility cannot be satisfactory within the public transport system. With regard to new constructions and extensions, “The Act (1994:847) on Technical Requirements for Construction Works” lays down that such constructions must be made accessible for people with disabilities. (See in addition article 12) The Swedish disability movement can unfortunately give many instances of non-compliance with this law. Among these examples is Hammarby sjöstad and the Clarion hotel in Stockholm. The lack of accessibility excludes people with disabilities from large sections of social life. It is now high time that the government takes substantial measures with the aim of making Sweden accessible, including ensuring that failure to take accessibility measures is deemed to be discrimination, to enable all people to utilize their human rights.

Lack of knowledge and negative attitudes
Another precondition for participation on equal terms is increased awareness. Here, too, Sweden has a long way to go before people with disabilities can participate in society on equal terms. This report shows that there is a great need for more knowledge among, for example, judges, the police, care staff and among those who deal with support and service for people with disabilities (Articles 9, 10, 14, 23 and 24). The media’s representation of people with disabilities also reinforces stereotypes and prejudices. To the extremely small extent to which people with disabilities appear in the mass media, we are often depicted as victims or heroes. It is common for people with disabilities not even to be allowed to express themselves. Others instead talk about the individual. The mass media debate that is conducted regarding people with mental impairments can in many respects be characterised as a drive against the “mentally ill”. A simplified image is conveyed to the general public of mentally ill persons committing crime and violence after “being released from institutional care” – as described, for example, in Stockholm county council’s official publication entitled “The Care Guide”, no. 1 2006. This is the case despite the fact that it is scientifically proven that the mentally ill do not commit violence and crime to any measurable degree more than others.

Abuse and exploitation
The information in articles 6, 7 and 8 in the report show that children and women with disabilities are at a particularly great risk of being subjected to various forms of abuse. The experience of being abused when young also increases the risk of people being subjected to sexual exploitation. The report also shows that it is more difficult for people with disabilities to get adequate support after experiencing abuse. Examples that can be mentioned are deficient accessibility in women’s refuges, difficulties in communicating with the women’s refuge and that the women’s refuges are sometimes not able to offer a place for the individual’s assistant. Further, the information in article 14 shows that equality before the courts does not always prevail. Children and women with disabilities find it difficult to get legal compensation in connection with sexual crimes. One study of how children with disabilities are treated in the legal process shows for example that only in a small number of cases (13 out of 41) have psychological or psychiatric experts been used to facilitate the investigation or assessment of the children’s accounts. The majority of the expert opinion that there was, lacked special elucidation of the disability and any impact it
might have had on the capacity to give an account. In several cases the accounts have been rejected by the court and the accused has been released as the police interrogation has used leading questions to the children despite the fact that in these cases there was no other way of asking the questions. Another illuminating case is a woman who reported being raped in both 2001 and 2002 by two different men. The woman is homeless and has a mental disability. She finds it difficult to give a consistent account and changes her story. The cases were dropped without further action, in the most recent case, despite the fact that she can identify the perpetrator and had injuries to her genitals that indicate that she had been subject to "non-normal sexual intercourse". (Articles 6, 7, 8 and 14)

Deprivation of liberty
A large proportion of people who are deprived of their liberty have some form of mental or neuropsychiatric disability. The disabilities as such do not lead to persons becoming violent or criminal however the disability can entail character traits that increase the risks when there is unfavourable interaction. The information in article 9 shows that among people who have been detained there are a large number who have not received the necessary support and protection of society to enable them to live a life of liberty. Properly functioning care and welfare is thus important in preventing people having to be deprived of their liberty, as is properly functioning collaboration between authorities responsible for correctional care, care of addicts and psychiatry. In Sweden there is both knowledge and political will. Despite this, there are a large number of people who are not given the preconditions to live their lives in freedom.
Unfortunately, disabilities are often not attended to/treated to a sufficient extent to enable individual girls, boys, women and men to be fully reintegrated in society after their time in detention (Article 10).

The rights perspective
In the Ministry of Justice’ report, "An evaluative commentary on the national action plan for human rights", the Disability Ombudsman states that "in its contacts with the state and municipal administration, people with disabilities are still not perceived in the first instance as bearers of human rights but as patients or recipients of society’s welfare contributions. Deficiencies in support and adaptation measures that are necessary to enable people with disabilities to participate in Swedish society are today dealt with as shortcomings in social welfare and not as infringements against their human rights". The title of the national action plan for disability policy is "from patient to citizen". The action plan has now been in place for seven years however the work is proceeding slowly. The Swedish disability movement can observe that the Disability Ombudsman’s statement shows that there is an awfully long way to go before the clearly articulated paradigm shift becomes reality in Sweden.
Conclusion

Despite the intentions of the Swedish Government and Parliament, there is a long way to go before Sweden can be considered to live up to the rights in the covenant on civil and political rights when it comes to people with disabilities. One of the major reasons, which is set out clearly in this alternative report, are the deficiencies in access to both the physical environment, information and communication, but also the presence of discrimination in both legislation and in the practical application of the laws.

For example, it is indefensible that in a country such as Sweden people are arbitrarily deprived of life in the ways that are described in article 6. It is indefensible that so many people have to be deprived of their liberty due to the fact that they have not received the necessary support and protection from society to be able to live life in freedom. It is equally indefensible that people with disabilities are not given the opportunity to participate in the political process.

The disabled movement’s view is that the political will expressed verbally at national, regional and local level is very strong. But the lack of knowledge about our conditions and opportunities, negative attitudes and unequal prioritisations means that Swedish society is continually failing to ensure all people’s equal value and rights. There is also a lack of knowledge and understanding of the consequences that different changes can entail for people with disabilities and many of the laws that regulate the rights and situations for people with disabilities are not followed.

The paradigm shift that was laid down in the national action plan appears to be yet another political target that is not going to be realised. This is demonstrated in both of the Swedish disability movement’s alternative reports. The good political will does not permeate down to the everyday living conditions of girls, boys, women and men with disabilities.

More resources are required, both financial and human, as well as a vigorous political approach, to enable the national action plan, including human rights for people with disabilities, to be accomplished in Sweden. Discrimination is a common occurrence when it comes to people with disabilities, despite this, the government has cut back funding to the Disability Ombudsman, something that the Swedish disability movement considers to be a clear example of a measure that runs completely contrary to the intentions of disability policy. It is indefensible that people with disabilities are discriminated against and are not able to have their human rights met in a welfare state such as Sweden.

This report contains a large number of recommendations for what should be done to improve the situation in Sweden for people with disabilities. However, one overarching recommendation is for increased cooperation with the disability movement at all levels of society. Cooperation with the disability movement is a necessity to bring issues of disabilities into the mainstream in terms of data for making decisions, descriptions of consequences, subsequent legislative proposals and proposals for guidelines.
Introduction

The prime reason why the Swedish Disability Federation has chosen to draw up an alternative report is that we want to draw attention to the fact that full participation and equality have not been achieved in Sweden for girls, boys, women and men with disabilities. Another reason is the absence of a disability perspective both in previous reports from the Swedish Government and in the Human Rights committee’s concluding observations. The Swedish Disability Federation considers that issues relating to human rights for people with disabilities should be highlighted as a natural part of both the Swedish political process and also in the UN’s monitoring system.

Through this report, we wish to contribute to girls, boys, women and men with disabilities in Sweden having their civil and political rights respected and the social systems being further developed in accordance with the recommendations presented. We also hope that we can inspire the disability movement in other countries to produce their own reports.

Organisation of the report
The report starts with a section of background information on disability policy in Sweden, a description of areas that affect all the rights in the Covenant and also some statistics and a description of what groups of people are covered by the term “people with disabilities” in Sweden.

The main chapter of the report deals with all the rights articles in the Covenant, with the exception of articles 1, 4, 5 11, 13, 15 and 27. All articles contain a description of the situation in the country. Each main caption is followed by a section on what the Swedish Disability Federation thinks about the situation. At the end of each article is a list of what recommendations the Swedish Disability Federation gives the State on how the situation could be improved in Sweden and to allow an improvement in Sweden’s observance of the Covenant’s articles. To facilitate an overview of the Swedish disability movement’s recommendations, a summary of all the recommendations is also appended. For footnotes in Swedish, see annex 5.

Background information

Discrimination
A ban on discrimination on grounds of disability is set out in the Swedish Constitution. The provisions of the Constitution cannot be referred to the courts, but no other laws or ordinances may conflict with its provisions. A ban on discrimination in relation to the majority of the civil and political rights is legally regulated by virtue of the fact that the European convention concerning protection of human rights and fundamental freedoms has been incorporated into Swedish law. It should also be added here that there are 4 discrimination acts that affect parts of the economic, social and cultural rights. For more information on discrimination legislation in the country see article 2.
Supervision by ombudsmen and their role
There are 5 different ombudsmen in Sweden: the Equality Ombudsman, the Ombudsman for preventing ethnic discrimination, the Swedish Disability Ombudsman (SDO), the Ombudsman for preventing discrimination on grounds of sexual orientation and the Children’s Ombudsman, whose tasks include monitoring human rights issues and countering discrimination. (The discrimination committee described in article 2 has proposed an amalgamation of the ombudsmen.)

The task of the Swedish Disability Ombudsman (SDO) under the law (SFS 1994:749) is to monitor issues concerning the situation for people with disabilities. Private individuals can approach the Swedish Disability Ombudsman for advice and to report that they have suffered discrimination. The Swedish Disability Ombudsman can then undertake an investigation of the case. In cases where discrimination arises, the Swedish Disability Ombudsman can try to achieve mediation between the parties or to refer the matter to the courts.

General welfare
The approach of Swedish welfare policy can principally be regarded as general, which means that the public services systems and social insurance systems are aimed at the entire population and not just “the needy”. The ban on discrimination and general welfare form two important parts of the Swedish system.

The national action plan for human rights
In spring 2006, the Swedish Government presented the second national action plan for human rights (for the period 2006 – 2009). The plan is intended to provide guidelines and a structure for human rights work and in this way speed up the implementation of the rights. The proposed measures in the action plan are aimed at the entire public administration, at national, regional, local council and municipal level and are based on various discrimination grounds, such as sex, ethnic background, religion or other conception of faith, sexual orientation and disability.

Action plan for disability policy
In 1999, the Swedish Government adopted a national action plan for the disability policy “From patient to citizen” (government bill 1999/2000:79). The action plan extends until the year 2010 and involves all areas of society. The goal of the national action plan is:

- A society with diversity as its basis, that society is shaped to enable all people with disabilities of all ages to participate fully in social life.
- Equality in living conditions for girls and boys, women and men with disabilities.

Disability policy work is to be specifically geared to identifying and eliminating obstacles to full participation in society for people with disabilities, preventing and combating discrimination and giving children, young people and adults with disabilities opportunities for achieving independence and self-determination.

Until 2010, three areas of work are specifically prioritised:
- Ensuring that a disability perspective permeates all sectors of society
- Creating an accessible society
- Improving the treatment of people with disabilities
The national action plan gives the national authorities clearer responsibility than in the past for disability policy work. Fourteen authorities have been designated as “sector authorities” with specific responsibility for implementing disability policy within their respective areas of society. The Standard Rules on the Equalization of Opportunities for Persons with Disabilities for ensuring the participation and equality of people with disabilities underlie disability policy.

A new authority, “The authority for disability policy co-ordination” (Handisam), was established on 1 January 2006. This authority’s task is to promote effective implementation of the national action plan. The work entails, among other things, taking responsibility for the co-ordination of disability policy measures by supporting and encouraging players at various levels to consider disability policy targets in their respective activities.

Follow-up of the action plan
In March 2006 the Swedish government presented its second follow up of the national action plan for disability policy. Among other things, the government observes in its official communication that training and work constitute the very basis for economic and social security but that in recent years the labour market situation for people with disabilities has deteriorated. However, the government writes that a number of important initiatives have been implemented in order to improve the labour market situation for people with disabilities. The situation analyses that the sector authorities have carried out with the aim of identifying the processes within the social sectors that affect the chances of achieving the disability goals, indicate both progressive and counteractive forces. Technical development and internationalisation represent central areas of development that can increase accessibility to both services and products. Demographic development can constitute a driving force for increased accessibility in society, at the same time as increased cost-consciousness within municipalities and county councils represents a challenge. The government also states that a challenge for the continuing work is to develop knowledge and methods to develop both the child- and gender perspective in the disability policy work.

Handisam notes that the sector authorities do not entirely view their role and responsibility as primary, and thus it has not become a natural part of their activities.

Implementation of the action plan
The Swedish disability movement had high hopes of the national action plan for disability policy, but can now state that the work of implementing it in practice is proceeding extremely slowly. It doesn’t look like it will be possible to meet the targets by 2010.
The Swedish Disability Federation considers that:
The government must immediately take effective and vigorous measures to enable
the targets in the national action plan for disability policy to be accomplished by 2010.

- In order to speed up implementation of the action plan, the various parties that are
defined in the plan must be required to take a more distinct responsibility and a
tougher regulatory regime must be established.
- The Swedish social system, at all levels, must accept the shift in perspective
encompassed by the action plan, from viewing people with disabilities as passive
patients to a realisation that they are active citizens.
- In order to demonstrate a real development towards a society with full
participation, indicators need to be established that facilitate a comparison over
time. Sector authorities, and municipalities and county administrative boards must
have measurable goals that are followed up in order to demonstrate a real
development.
- An increased focus on research and methods development is needed. Methods to
identify and eliminate obstacles to full participation are still to a great extent
absent.
- More effort is needed in developing working methods and improving knowledge
with regard to a gender perspective in disability policy.
- The cooperation of different authorities with the disability movement needs to be
improved in order to ensure an appropriate exchange of knowledge and a
satisfactory exploitation of resources.

Local and regional autonomy
In Sweden it is the responsibility of municipalities and county councils that many of
the human rights, in particular many of the economic, social and cultural rights, are
implemented in practice. A local authority represents not only a legal entity but also
the geographic area that forms the local authority and also a municipal autonomous
body. Municipal autonomy is a concept that is firmly enshrined in the Swedish legal
tradition. It is often defined as a principle that indicates the relationship between the
State and the local authority and that is intended to give local authorities an
independent right of determination that is unconstrained within certain limits.¹
Municipal autonomy has been constitutionally enshrined in the Constitution since
1974. The latter also lays down the “Legality principle”, i.e. the fact that public
authority is exercised under the laws. The laws that govern the local authorities are
thus the rules that indicate the framework for municipal autonomy.

Action plans – a natural tool
At not only national but also regional and local level, action plans are a natural tool
for ensuring continuing progress in all sectors of society. There are a number of
action plans at various levels and areas in Swedish society, although these action
plans are often independent. The disability movement’s position is that all policy
areas have a disability aspect to them. The disability movement’s intention is for this
report and also the Committee’s comments to help ensure that all action plans
highlight and address the disability perspective.
Influence and lobbying

The advisory role of the disability movement
Standard rule 18 indicates that: “States should recognize the right of the organizations of persons with disabilities to represent persons with disabilities at national, regional and local levels. States should also recognize the advisory role of organizations of persons with disabilities in decision-making on disability matters.”

User-influence at national level
The Swedish Disability Federation is sometimes a referral body and is thereby able to submit proposals for legislation and national guidelines. However, it is the opinion of the organizations of people with disabilities that our advisory role, our knowledge and experience is not taken into account and/or utilized in a way that is necessary to make issues concerning disabilities mainstream in decision-making data and consequence descriptions and subsequent proposals for legislation and guidelines.

The Swedish Disability Federation is not on all departmental lists of the referral bodies that are to be consulted. This is unfortunate as even issues that are not directly related to disability can be significant for people with disabilities.

Against the background of the fact it is not possible for everyone involved to have all necessary knowledge on which consequences different decisions can bring about, we would also like to emphasize the importance of the disability movement’s advisory role being utilized at a considerably earlier stage than when a proposal has already been tabled.

User-influence at regional and local level
The Swedish Disability Federation would like to stress that user-influence is important when both policy-related and individual decisions are taken. Various kinds of user-influence are common in Swedish local authorities and county councils. More than 90 percent of the municipalities have some form of user-influence. Despite this, only 23 percent of the municipalities meet the requirements for user-influence according to the National Board of Health and Welfare and the county administrative boards’ supervision. Various forms of consultation represent the commonest form of user-influence. The use of special agencies, self-administration bodies in which the user can be given greater influence, is however less common. For other aspects of user-influence in the activities of municipalities and county councils you are referred to the introduction to the Swedish disability movement’s alternative report on economic, social and cultural rights.

The indivisibility principle
The Swedish disability movement would particularly like to emphasize the significance of the indivisibility principle in enabling people with disabilities to make use of their civic and political rights.

In several places in this alternative report reference is made to the Swedish disability movement’s alternative report on economic, social and cultural rights. This report is also available as an appendix to this report.

The Disability Ombudsman’s experience is that the indivisibility of human rights and their mutual dependence on each other has not had a practical impact in Sweden. Furthermore, the Disability Ombudsman states in the Ministry of Justice’s report ”An
evaluative commentary on the national action plan for human rights that: “in their contacts with the state and municipal administration, people with disabilities are still not perceived in the first instance as bearers of human rights but as patients or recipients of society’s welfare contributions.

Prerequisites for participation on equal terms
According to resolution 1998/31 on the human rights of persons with disabilities adopted at the fifty-fourth session. It sets out that:
“any violation of the fundamental principle of equality or any discrimination or other negative differential treatment of persons with disabilities inconsistent with the United Nations Standard Rules is an infringement of the human rights of persons with disabilities”.

The UN’s standard rules lay down that rule 1, on increased awareness, rule 2 on medical care, rule 3 on rehabilitation and rule 4 on support and service represent the prerequisites to enable people to participate on equal terms and thereby also to be able to enjoy their human rights.

In the Swedish disability movement’s alternative report on economic, social and cultural rights, the organisations of people with disabilities have been able to observe that in the areas of health, medical treatment, habilitation, rehabilitation support and service, Sweden has good laws, but that they do not function in practice. The unanimous political will is not making an impact in terms of practical implementation – this applies above all in the municipalities. This means that people with disabilities are not always given the necessary prerequisites to exercise their human rights.

Accessibility
Accessibility is central to all people with disabilities, not only for those with a mobility impairment and reduced orientation capacity. Accessibility also concerns groups such as people with allergies, brain injuries, hard of hearing, mental disabilities and difficulties with reading and writing. In addition, it does not concern purely physical ability to get on but also access to information and communication, (UN standard rule 5)

In Sweden, there is already strong legislation that is designed to make society more accessible. This is set out, among other things, in the “Planning and Building Act”, which specifies that easily remedied obstacles in public buildings and in public places must be eliminated. The problem is that such legislation is not observed. Certain laws were enacted several decades ago. A concrete example is the Disability Adaptation of Public Transport Act, which was enacted in 1979. Nonetheless, a great deal has happened in 25 years.

Attitudes and treatment
Attitudes and treatment essentially means that all should be respected as they are. This entails being allowed to live in an accessible society and not suffering discrimination. The national action plan for disability policy specifies that employees’ treatment and ways of working are as important to increased accessibility as access to adapted information and physical environments. Treatment at the individual level is dependent on collective treatment, which is expressed in laws and other rules and in how they are interpreted and applied. Moreover, the “traditional treatment” of people with disabilities that is coloured by a degenderised and deindividualised attitude must be changed as soon as possible. Differences due to gender, along with the fact that
people have different gender identities, must be taken into account and respected. People with disabilities are boys, girls, women or men just as people without disabilities.

In Sweden, ignorance in society, negative special treatment, ostracism and bullying continue to be everyday problems for many people with disabilities. In its turn this leads to boys, girls, women and men, in distinction from people without disabilities, finding it considerably more difficult to have their human rights met. It should be emphasised here that increased awareness of rights, needs, opportunities and of what people with disabilities can contribute, represent a basic condition in enabling everyone to participate on equal terms, (standard rule 1).

In change-oriented work on something as complex as our values, it is important to try to define which institutions in society impart, and thus maintain, our values more strongly than others. It is of the utmost importance that awareness of rights, opportunities and needs for people with disabilities generally increases in Sweden. Greater awareness is also required for participation under equal conditions.

**Statistics**

In Sweden, we have a broad conception of what the term disability means. We would refer to the list of organisations that are behind this report and that form part of the Swedish disability movement. The starting point for determining who is considered to have a disability is the description of the UN Standard Rules and also the individual experience of the situation.

In relation to more traditional functional impairments, national statistics from the Swedish Handicap Institute show that:

- **Fully one million people, or almost one in five people in the 16 to 64 age group have some form of permanent disability**
- **The proportion of people with disabilities and the severity of the impairment increase with age. Between 2000 and 2020, the proportion of people over the age of 65 is expected to rise from around 17 per cent to close on 22 per cent. After 2020, the proportion of people over the age of 80 is expected to rise sharply.**
- **Diabetes, dyslexia, cardio-vascular problems and hearing impairments are more prevalent among men. Mobility impairments and mental disabilities are more prevalent among women.**
- **Around 560,000 people over 16 years of age have mobility impairments. Of these need about 100,000 a wheel chair.**
- **Just over 165,000 people over the age of 16 have visual impairments. Of these, 23,000 are blind or have severely impaired vision.**
- **Around 980,000 people have hearing impairments.**
- **150,000 people over the age of 16 are completely deaf or have severe hearing impairments.**
- **Around 36,000 people are estimated to have some form of development disorder.**
- **Around 2,000,000 people are estimated to have some kind of allergy.**

According to Statistics Sweden’s Surveys of Living Conditions (ULF), 1/5 of those interviewed between the ages of 16 – 64 perceive that they have a disability.

The total population in March 2006 in Sweden was 9,047,752 with 4,561,202 women and 4,486,550 men.
Article 2

1. Discrimination on account of disability

The information in this report shows that the civil and political rights of people with disabilities in Sweden are not guaranteed to the same extent as people without disabilities. One example that can be mentioned is that there is insufficient protection against discrimination in the law and that there are, for example, several laws that differentiate between people in a way that cannot be considered to be consistent with this covenant. Other cases are when people are excluded in various ways or do not have the opportunity to be an active member of society. Comprehensive statistics show that one in every two people with disabilities feels that he/she is discriminated against! Women with disabilities feel more highly discriminated against than men. This is shown by a survey conducted in 2005 by Statistics Sweden on behalf of, among others, the Swedish Disability Ombudsman. Examples are given in each rights article in this report of when people cannot benefit from their rights. Two factors that permeate all rights are issues of accessibility and prerequisites for participation.

Accessibility

A major cause of the experience of discrimination described above and also a major cause of people with disabilities not being able to exercise their civil and political rights is inadequate accessibility in society. More than one in every four people state that they:

- cannot use buildings,
- cannot read information,
- cannot use airplanes/buses/trains.

The Commission on Human Rights resolution 2000/51, Human rights of persons with disabilities, states that: any violation of the fundamental principle of equality or any discrimination or other negative differential treatment of persons with disabilities inconsistent with the Standard Rules on the Equalization of Opportunities for Persons with Disabilities is an infringement of the human rights of persons with disabilities; It must be underlined that standard rule 5 deals with accessibility to both the physical environment and access to information and communication.

The indivisibility principle

Another contributory cause that deprives people with disabilities of being able to profit from their civil and political rights is, as described in the introduction, that many people are not given the preconditions to participate on equal terms, and also that economic, social and cultural rights are often an absolute prerequisite in enabling people to profit from their civil and political rights. As is clearly set out in the Swedish disability movement's alternative report on economic, social and cultural rights, there is a good political will in Sweden and in many cases adequate legislation. There are nevertheless major shortcomings in the implementation of the laws. This leads to people with disabilities not being given the prerequisites to participate on equal terms. In this section prerequisites refers to standard rules 1 -4.
The Swedish Disability Federation considers that:

- All girls, boys, women and men in Sweden must be provided with the conditions to benefit from their civic and political rights.
- Decision makers at all levels in society must integrate the disability perspective in all contexts when decisions are being taken and activities are being implemented.
- Negative attitudes, prejudices and ignorance about people with disabilities must be opposed with the aim of combating discrimination.
- Existing laws in all areas of society must be followed, (see further the Swedish disability movement’s alternative report on economic, social and cultural rights).
- The positive consequences of a society for all must be emphasised more clearly in the general social debate with the aim of combating discrimination. Including the fact that a society that is accessible for people with disabilities is accessible for everyone.

2. Discrimination legislation

A ban on discrimination on grounds of disability is set out in the Swedish Constitution. The provisions of the Constitution cannot be referred to the courts, but no other laws or ordinances may conflict with its provisions.

To further reinforce protection against discrimination there are four laws that ban discrimination on account of disability. As these primarily concern economic, social and cultural rights, reference is made here to the Swedish disability movement’s alternative report on economic, social and cultural rights.

There is already solid legislation with regard to accessibility in Sweden that is designed to make society more accessible. Among other things this is set out in the “Planning and Building Act”, which specifies that easily remedied obstacles in public buildings and in public places must be removed. The problem is that such legislation is not observed. Certain laws were enacted several decades ago. One concrete example is the Disability Adaptation of Public Transport Act, which was enacted in 1979. Despite this there is a long way to go before all public transport is accessible. Inadequate accessibility to public transport results in people with disabilities not being granted their rights according to, for example, article 12 in this covenant. That is to say, making use of their freedom of movement and freely choosing place of residence.

New proposal for laws banning discrimination

On 24 February 2006, a Discrimination Committee appointed by the Swedish Government presented a final report on discrimination legislation in Sweden. In the final report, the committee proposes, among other things, the introduction of a new act relating to prohibition and other measures to combat discrimination. The new act will in large part replace the current discrimination legislation, but also provide extended protection for more people and in a number of areas of society.
The act should have the objective of countering discrimination and otherwise promoting equal rights and opportunities regardless of gender, sexual identity, ethnic background, religion or other faith, physical impediment, sexual orientation or age. The Committee’s point of departure has been that protection against discrimination should be as equal as possible for the various discrimination grounds.

**The accessibility aspect**
The new act relating to prohibition and other measures to combat discrimination proposes that failure to adopt accessibility measures is to be regarded as discrimination. The Swedish disability movement would like to emphasise that at the time of writing this is only a proposal and would therefore like to draw particular attention to the importance of this proposal being implemented.

**Undesirable omissions in the proposed new bill**
In the proposed new bill there is however a risk of undesirable omissions. As the law is, so to speak, comprehensive and only covers the areas of society and discrimination grounds that are expressly mentioned in the text of the law, situations can arise in which discrimination also continues to be permitted due to the fact these situations in particular have not been foreseen when drafting the law. Examples of issues that will end up outside the law’s protection are those that entail discrimination concerning membership and participation in organisations other than those that are mentioned in chap. 3, paragraph 14 of the proposed bill, or discrimination in relation to such official activities that cannot be said to assist the general public.

Many of the rights laid down in the covenant on civil and political rights are also covered by the European Covenant on Human Rights and Fundamental Freedoms. This "European Convention" has been incorporated as Swedish law (see further the next section). The European Convention’s ban on discrimination is general and not exhaustive. With the proposed new anti-discrimination bill we will thus end up in a situation where all people are protected against discrimination in possession of certain civil and political rights, that is in relation to the rights that are enshrined in the European Convention. While discrimination in the other areas covered by the law is only banned if connected with certain specific discrimination grounds. This does not just produce unsatisfactory protection against discrimination, but also a complicated piece of legislation, where the Swedish law does not give an overall picture of current law, but must be read together with a convention text and where the law’s special rules on supervision and legal proceedings apply in certain discrimination cases (those that are linked to one of the law’s discrimination grounds) but not in others.

**Shortcomings in other laws related to the covenant’s rights**
The current discrimination laws are basically only concerned with economic, social and cultural rights (education, work and purchase of goods and services). Sweden also has a number of other laws that affect civil and political rights.

The information in this report provides a good overview of cases where there are gaps in the legal text. Examples that can be mentioned are the need for supplementary text concerning the inhumane treatment of certain prisoners with disabilities, and also cases where people are deprived of their liberty.
The Swedish disability movement’s experience is that the disability perspective is often neglected, and that there is therefore a risk of situations arising that are not covered by legislative protection. One such concrete example is inadequate accessibility, an aspect that is however expected to be rectified by means of the new anti-discrimination law.

The Swedish Disability Federation considers that:

- All forms of discrimination must be banned in Sweden. (See further the Swedish Disability Federation’s submission to the discrimination committee’s report)
- Inadequate accessibility leads to people with disabilities being excluded from large parts of social life. Inadequate accessibility therefore constitutes discrimination of people with disabilities and must be rectified and included in the discrimination laws in Sweden.
- An overview of the laws’ relevance for people with disabilities, (in relation to the covenant’s articles) must be undertaken. Such an overview must take place in collaboration with the Swedish disability movement.

For further, and where appropriate, more detailed information on gaps in the legislation, see the information in this report and also the information in the Swedish disability movement’s alternative report on economic, social and cultural rights.

3. Possibilities for individuals to have their case heard

Many of the rights that are inscribed in the covenant on civil and political rights are also in the "European Convention on Human Rights and Fundamental Freedoms". The European Convention has been incorporated into Swedish law (SFS 1994:1219) since 1995. If an individual considers that the state has violated his or her rights according to the European Convention, in the first instance it is Swedish courts or authorities that have to examine whether a violation has taken place.

A provision has also been introduced in the constitution that states that laws or other regulations may not be enacted in contravention of Sweden’s undertakings in terms of the European Convention. Laws that came into force before the convention was incorporated must be interpreted in accordance with the convention and the practice that is in place. As the human rights committee point out in its comments (concluding observation) to the Swedish government’s fifth report, some of the provisions in the UN’s covenant on civil and political rights do not however have an equivalent in the European Convention. The Human rights committee states that: The State party should ensure that its domestic legislation gives full effect to the rights embodied in the Covenant and that remedies are available for the exercise of those rights. Contact with the Ministry for Foreign Affairs revealed that the department’s understanding is that individuals have the possibility of having their cases heard in all cases covered by the covenant’s rights. The Swedish disability movement’s experience is however that the disability perspective is often neglected, and that there is therefore a great risk of situations arising that are not covered by the legislation and the right to take legal action in the area.
One example that can be mentioned is article 25 which does not have equally extensive protection in the European Convention. Article 25 shows that municipal legislation contains a provision stating that municipalities and county councils must work to enable elected representatives with disabilities to participate in dealing with matters on the same terms as other elected representatives. Unfortunately it appears that it is not possible for individuals who have not been able to participate in the political rule to have their case heard.

**Effective legal redress**

Application in Sweden of the rules in the European Convention seems on the whole to have been uneven, with a tendency to apply these provisions restrictively in Swedish courts. This has been set out in a series of articles in Axplock, a journal of European law. However, since 2005 it seems that the law/convention has started to be used in Swedish courts, but this application of the law is at the time of writing still in its infancy and must be developed.

The Disability Ombudsman can only pursue discrimination cases in relation to the discrimination laws described above. Within the framework of such an action they can also invoke the European Convention, but they can not pursue a case that is based solely on the European Convention legislation. Against the background of the fact that knowledge in different authorities, including personnel in courts, is often insufficient, which is set out in several of the articles in this document, the Swedish disability movement considers that the Disability Ombudsman must be able to pursue discrimination cases that are based on the provisions in the European Convention.

**Individuals’ awareness of their current right to take legal action**

Three different groups that constitute those who are at risk of being discriminated against, (persons who have entered into partnership, have a foreign background or a disability) have responded to a questionnaire about their experiences, and also about their awareness of the legal protection against discrimination. The survey shows that approximately 65 percent of those consulted who have a disability were aware that they could turn to the Disability Ombudsman if they were subjected to discrimination. It should be added here that the survey only applies to discrimination cases covered by the 4 anti-discrimination laws.

It has not been possible to find any studies of awareness about laws other than discrimination laws. Nor has it been possible to find any studies of the extent to which individuals are aware of where they can turn in order to have their case heard in cases other than purely discrimination matters. In conversations with the association’s lawyers and representatives from different organisations of people with disabilities, the answers and experiences are however the same. The majority of people with disabilities are not expected to have knowledge of which rights and obligations there are, and where they should turn in order to have their case heard. All the associations that stand behind this report are of the opinion that measures must be taken with the aim of increasing awareness about different laws and courts of appeal. An element in this is to research the level of awareness among people with disabilities in Sweden. Another circumstance that should be noted is that the above mentioned study shows that almost 70 percent believe that a report might lead to an improvement for others in similar situations. At the same time there is a fear of being marked down as a troublemaker if one makes a report, 80 percent are afraid of this.
Legal aid
In Sweden there are different courts at different levels. This section focuses solely on the individual’s possibility of having their case heard in the general courts, (district court, Court of Appeal and the Supreme Court, and the administrative courts (county administrative court, administrative court of appeal and the Supreme Administrative Court. If someone has committed a crime (criminal case), or if individuals are in disagreement (civil case) the case is heard in the general court. If a person wishes to appeal a decision of an authority, (administrative matters) the case is heard by the administrative courts.

Legal aid is granted according to social protection legislation called the Legal Aid Act, and has the purpose of helping those who are not able to receive legal assistance in any other way. Legal aid covers some of the costs for lawyers or other specialists. Compensation can also be received for, for example, costs for evidence. Legal protection is generally included in household insurance policies. For individuals who have household insurance, the excess is basically the only expenses involved in a legal process. Under some circumstances individuals can get legal aid from the state if the dispute is not covered by the legal protection in the individual’s household insurance.

Legal protection is usually paid in concrete disputes in a general court. However, legal protection does not usually cover disputes involving labour legislation, straightforward divorce or administrative matters. One example to mention is that interference in a person’s private life, including deprivation of liberty and decisions on a trusteeship/executorship are administrative matters and are therefore not covered by legal protection. In practice this can lead to a person who is an inferior financial position being forced to abstain from having their case heard.

The Swedish Disability Federation considers that:
An overview of the existing right of individuals to have their case heard in relation to the covenant’s rights in relation to people with disabilities, must be carried out. Such an overview must take place in collaboration with the Swedish disability movement so that the disability perspective is highlighted in all areas. One consequence of the results of an overview of omissions in legislation will also be to give people the right to have their cases heard by the authority responsible in cases where there is no current legislation and rights. Such an overview should also be made in connection with representatives for other groups who are often discriminated against.

- Individuals must have knowledge about where to turn if they perceive that their rights are not being met.
- The Disability Ombudsman’s possibility of pursuing cases of violations of the European Convention on Human Rights and Fundamental Freedoms must be considered.
- Individuals must be provided with the conditions to have their cases heard in all cases that concern rights in the covenant on civil and political rights. The individual’s financial circumstances must not be a determining factor. People with inadequate financial means must also be granted their full civil and political rights.
Conclusions and recommendations
Despite the ban against discrimination on account of disability, in both the constitution and the anti-discrimination legislations there is insufficient statutory protection. Discrimination on account of disability is still a frequent occurrence in Sweden. It is of the utmost importance that the Swedish Government takes the necessary steps to combat all forms of discrimination of girls, boys, women and men with disabilities. It is also of the utmost importance that the government ensures that laws are followed and people are easily able to find information on where they are to turn in order to have their matter heard if they perceive that their rights have been infringed.

The Swedish Disability Federation recommends the Swedish state to:

- Ensure that failure to take accessibility measures is deemed to be discrimination.

- Review existing laws so that all people are given equal rights and prerequisites to profit from their civil and political rights. Such a review must also encompass the individual’s right to have their case heard in situations that are not currently covered by prevailing options. Such a review must be done in collaboration with the disability movement and other concerned groups.

- Review its public service agreement with Sveriges Television in order to guarantee depiction of people with disabilities that does not reinforce stereotypes that make it more difficult for people with disabilities to participate on equal terms. There are examples of organised diversity work within the public service media in the international arena.

- Undertake an effective information campaign with the aim of distributing knowledge about human rights. In various situations in life people must be provided with easily accessible information on which rights they have, and where they can turn if they perceive that their rights are not being met. Examples of where information should always be available are places where people are present such as in nine-year compulsory school, upper secondary school, waiting rooms at care institutions and libraries.
Article 3

Swedish equality policy
Since 1994 the objective of Swedish equality policy has been that women and men should have the same rights, obligations and opportunities in all spheres of life\(^6\). In the government bill on equality policy entitled “Divided power – divided responsibility”\(^7\), the Swedish Government stated that equality should permeate all areas of policy and all activities.

The targets for the national action plan for disability policy from 1999, in which the government also observes that the gender aspect is not taken into consideration within the disability area. In a report issued by the National Board of Health and Welfare dating from 2004\(^8\), it is apparent that there is very little knowledge of whether men or women with disabilities are discriminated against on grounds of their gender. The National Board of Health and Welfare observes that more recent studies of people with disabilities often also lack a gender perspective. People with disabilities are perceived in studies and research as "sexless". The National Board of Health and Welfare also states that living conditions are primarily considered to be affected by disability.

In its communication to the Swedish Parliament in 2002 concerning follow-up of the action plan for disability policy, the Swedish government declares that women and men do not achieve participation under the same conditions, that opportunities for influence are not the same for both sexes and that independence does not have the same significance for women with disabilities as for men. It is further stated that the roles and living conditions of women and men differ in many ways. This means that rules, routines, assessments and interpretations of the law have differing consequences for women and men.

The Swedish disability movement can unfortunately observe that the work of achieving equality is proceeding very slowly. In the second follow-up report from 2006, the government observes “…that a challenge for the continuing work is to develop knowledge about and methods for developing both the child- and gender perspective in the disability policy work.

The government’s bill of 2005/06:155 lays down new goals for equality policy. The overarching goal is that women and men should have the same power to shape society and their own lives. There are four intermediate goals in the bill:

- An equal division of power and influence. Women and men shall have the same rights and opportunities to be active members of society and to shape the conditions for decision making.
- Economic equality. Women and men shall have the same opportunities and conditions in terms of education and paid work that provides life-long financial independence.
- An equal division of the unpaid home- and care work. Women and men shall take the same responsibility for housework and have the opportunity to give and receive care on equal terms.
- Male violence against women must cease. Women and men, girls and boys, shall have the same rights and possibilities for bodily integrity.
The Swedish Disability Federation considers that:
Sweden has had high equality targets for a long time, however there is still a long way to go before equality prevails in Sweden.

- The goal that has long been in place that women and men should have the same rights, obligations and opportunities in all spheres of life must be realised. It is time to move from words to actions! We welcome the new bill but consider that concrete methods to achieve the goals must be developed as soon as possible.

- Implementation and follow-up of measures within equality policy and within disability policy must always include both the gender and the disability perspective.

- Methods to draw attention to, record and put an end to frequent discrimination must be further developed.

Rights from an equality perspective
In the information we have found, we can observe that there are differences between the way in which women and men with disabilities are treated within several rights in the covenant on civil and political rights. This section deals with the rights from an equality perspective.

Article 6 (the right to life)
The information in article 6 shows that women run a greater risk than men of being arbitrarily deprived of life.

Studies from 2005 show that women with cardio-vascular illnesses die more frequently than men while being treated with the important medicine digitalis⁹. It also transpires that there are not enough women in the trial groups when researching cardiopathy. Women sometimes exhibit different symptoms than men and these are not generally known and can be misinterpreted, which leads, among other things, to deficiencies in care within the health service.

Every year 20-40 women are subjected to lethal violence in Sweden. In 2003 there were 1,849 reports of gross violation of a women’s integrity – an increase of 18 percent compared with 2002. This is set out in Amnesty’s report “Male violence against women”.

Article 7 (ban on torture and cruel and degrading treatment)
The facts presented in article 7 in this report, along with the facts presented in article 10 in the Swedish disability movement's alternative report on economic, social and cultural rights clearly show that women with disabilities are at a greater risk of being subjected to various forms of cruel and degrading treatment. Furthermore, a study¹⁰ shows that among other things, 41 % of the women interviewed who had been subjected to assault reported that they needed further help and support to come to terms with the experiences and problems. Also the Swedish disability movement's alternative report on economic, social and cultural rights shows that there are major difficulties for women with disabilities to get the necessary support after having been subjected to assault.
Article 8 (ban on slavery and slave trafficking)
Women and children with disabilities run an increased risk of being utilized for commercial sexual exploitation. The National Criminal Investigation Department’s latest report “People trafficking for sexual purposes”, (RKP 2004:2) reveals that people trafficking for sexual purposes is also suspected to have increased in Sweden.

Article 9 (deprivation of liberty)
The Swedish disability movement has not been able to find any facts that show that there is any difference between women and men when they have been deprived of their liberty.

Article 10 (treatment of detainees)
The Swedish disability movement does not have a point of view with regard to article 10.

Article 11 (ban on imprisonment on the ground of inability to fulfil a contractual obligation)
The Swedish disability movement does not have a point of view with regard to article 11.

Article 12 (freedom of movement)
By way of introduction it should be emphasised that possession of economic, social and cultural rights often constitutes an absolute precondition in enabling people with disabilities to exercise their rights according to article 12. As set out in article 3, (point 11) of the Swedish disability movement’s alternative report on economic, social and cultural rights, there are gender differences in the assessments of what social support is need by women with disabilities and men. This applies in particular to vehicle support, special transport service, and assistance according to LASS as women receive less and men are allocated more benefits. This has negative consequences for women and means that women are not given the same conditions as men to benefit from their right to move freely and to freely select place of residence.

Article 13 (expulsion of foreigners)
The Swedish disability movement does not have a point of view with regard to Article 13.

Article 14 (equality before the courts)
The information shows that women find themselves in a particularly disadvantageous position when it comes to investigations and court proceedings with respect to sexual offences. A number of examples are given, including a woman who reported being raped in both 2001 and 2002 by two different men. The woman is homeless and have a mental impairment. She finds it difficult to give a consistent account and changes her story. It transpired that she had reported a further twelve rapes since 1994 and that the cases had been dropped without further action, in the most recent case despite the fact that she could identify the perpetrator and had injuries to her genitals that indicate that she has been subject to "non-normal sexual intercourse".11
**Article 15 (penalties)**
The Swedish disability movement does not have a point of view with regard to Article 15.

**Article 16 (the right to be regarded as a person in the legal sense)**
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 16.

**Article 17 (encroachment on privacy)**
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 17.

**Article 18 (religions and freedom of belief)**
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 18.

**Article 19 (freedom of expression)**
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 19.

**Article 20 (ban on war propaganda)**
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 20.

**Article 21 (freedom to demonstrate)**
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 21.

**Article 22 (freedom of association)**
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 22. However, the disability movement does note with satisfaction that last year the Swedish government and parliament substantially increased the support for women’s organisations, that women with disabilities are able to benefit from this support through their organisations, and that Forum Women and Disability has been awarded state funding through this form of support.

**Article 23 (The right to enter into marriage and found a family)**
To enable parents with disabilities to share full responsibility for their children, individually adapted support or personal assistance is sometimes needed. (See prerequisites for participation on equal terms according to the UN’s standard rules). As already described under Article 12, there are differences in the allocation of support and service between men and women. This leads to women not being given equal conditions with which to enjoy their right to enter into marriage, and to found and take care of a family.
Article 24 (protection for children)
The section shows that children are not being given the protection they need in several areas. One aspect that the Swedish disability movement can observe is that the gender perspective is often conspicuous by its absence when it comes to surveys of living conditions for children and young people. Against the background of the fact that there are often gender differences with regard to utilization of human rights between adult women and men, there is an increased risk of there being gender differences in the protection that children and young people receive from society.

Article 25 (the right to participate in the political process)
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 25.

Article 26 (equality before the law)
The Swedish disability movement can, under Article 26, observe that inequalities do occur before the law in Sweden. However these inequalities apply regardless of gender.

Article 27 (minorities)
The Swedish disability movement has not been able to observe that there are any differences on account of gender with regard to article 27.

Conclusions and recommendations
The Swedish Disability Federation can observe that women and men do not have equal opportunities to enjoy their civil and political rights, as enshrined in this covenant. A contributory cause is that neither women nor men are given equal conditions in which to profit from their economic, social and cultural rights.

The Swedish Disability Federation recommends the Swedish state to:

- Work to ensure that the gender and disability perspective permeates studies, planning, implementation, evaluation and revision of all social initiatives at all levels of society and when research is carried out.
- Initiate a study that thoroughly investigates and documents to what extent women and girls with functional impairments are discriminated against compared with men and boys with functional impairment. As well as in relation to girls, boys, women and men without disabilities. Such a survey must be carried out in all areas that are covered by this covenant, as well as by the rights of the covenant on economic, social and cultural rights. The committee’s findings must then form the basis for the implementation of the Covenant’s rights.
Article 6 – The right to life

As Sweden does not have the death sentence, only the first point will be dealt with in this article. The Swedish disability movement does not have any points of view on current legislation in Sweden that concerns this article. There are however circumstances and in some cases shortcomings in the social system that contribute to people nevertheless being deprived of life. The Swedish disability movement is of the opinion that many of these circumstances can be rectified and considers that the prevailing circumstances therefore constitute an arbitrary deprivation of life.

The cases where people are deprived of life that the Swedish Disability Federation has selected to focus on in this article are:

- Death after injuries and accidents that could have been prevented
- Deficiencies within health care and medical treatment that lead to death
- Lethal violence

Arbitrary deprivation of life (concerning point 1 in the article)

Injuries and accidents that can be prevented

The majority of the approximately 4,500 people per year who die from injuries, 60 percent, die as a result of accidents. Approximately 1,200 die through suicide and approximately 100 as a result of violence. About 80 percent of the accidents take place in the home, at schools and in recreational environments, the remainder in traffic and work environments. The National Rescue Services Agency state that unless something radical is done the number of dead and injured and the costs to society will continue to rise. The National Institute of Public Health observes that the task of preventing injuries within work- and traffic environments has been successful. An equally satisfactory development has not taken place within the housing- and recreational environments.

The Protection Against Accidents Act (SFS 1/1 2004) contains provisions on the measures that state and municipality must take as protection against accidents. It is important that municipalities and state fully comply with the law so that people, especially the aged, are not deprived of life in ways that currently occur.

The Swedish Disability Federation considers that:

We welcome the National Rescue Services Agency’s work on preventing the risk of accidents, but we would also like to emphasise the importance of the municipalities complying with “The Protection Against Accidents Act”. Many lethal accidents can be prevented using simple measures. A successful example is the "Fixar-Malte" operation. It started in Höganäs municipality when it employed a caretaker to help the elderly with everyday problems such as changing bulbs, putting up curtains or in other situations where there is a substantial risk that elderly people can harm themselves. Fixar-Malte’s services are free. This operation has subsequently spread to more municipalities.
**Deficiencies within health care and medical treatment that lead to death**

The disability organisations are aware that from an international perspective we have a well functioning health service in Sweden. Despite this, there are deficiencies in the health service that lead to people being deprived of life. The National Board of Health and Welfare estimates that incorrect medication, mishaps and complications are the cause of several thousand deaths per year in care. It might for example involve combinations of medicines that react badly together or that nursing staff do not receive the correct information on time.

In this section the organisations of people with disabilities would like to present examples of a number of cases that could have been prevented as well as the structural shortcomings that exist in the system.

**Case reports**

A man suffering from heart disease passed away when the staff in the ambulance in Dalarna that was going to take him to hospital interrupted the journey when their shift came to an end. After changing personnel and transfer to a new ambulance the man deteriorated and he died on arrival at the hospital. A 49 year old man was sent home from Ystad’s general hospital when the doctors diagnosed his chest pains to be an upset stomach. The man died two days later of a heart attack.

One of the hospital staff assumed that a burst appendix was winter vomiting sickness. When the father contacted the hospital he was informed that they were worried about winter vomiting sickness and that they were therefore not permitted to come in. The girl died of a burst appendix.14

Further cases are when people with mobility impairments have not been properly examined despite pain symptoms. The hospital staff associate pain with the mobility impairment and the consequences such as repetitive strain injury that accompany it instead of the person receiving a proper examination for other possible causes. A man with cerebral palsy, who had severe stomach and back problems, died as a result of this. The doctor thought that the pain was due to the cerebral palsy. A few days later the man died of a heart attack.

**Hazards within the care services**

In the report "Patient safety and patient safety improvement"15 the National Board of Health and Welfare has listed the most serious hazards within health care and medical treatment. In first place are errors in medication. According to the report, at least a couple of thousand deaths a year can be partially or entirely explained by errors within medication.

Another example is a survey from the Society of Cardiology in which it is claimed that 650 patients per year die unnecessarily in Sweden due to inadequate procedures in cases of sudden, unexpected heart failure.
The National Board of Health and Welfare’s report on patient safety and patient safety improvement also reveals that a major risk is care-related infections, VRI. During a period of one year 600 patients died with VRI as the crucial factor. VRI contributed to premature death in a further 1,900 cases. The general assessment among hospital hygienists is that approximately a third of VRIs could be avoided by consistently applying generally recognised, partially empirically-based methods within hospital hygiene.

**Fall accidents with a lethal outcome**

A form of injury whilst in care that has increased is fall accidents. Approximately 2,600 fall accidents occur each year within special housing in Swedish municipalities, and about a hundred fall injuries are reported annually from institutionalised hospital care. It involves falling out of bed, wheelchairs or seating furniture and tripping on doorsteps and carpets, and in connection with showering etc. Overall about 70,000 fall accidents occur every year among the over 65s that are so serious that the person is treated and admitted to hospital. Those who are "only", for example, put in plaster and sent home are not included. 1,106 people died due to fall injuries in 2001, in 2003 the number had increased to 1,295.

The National Rescue Services Agency is currently working in conjunction with bodies including the National Board of Health and Welfare on a method handbook aimed at those who work with the elderly. It will offer tips and advice on how fall accidents can be reduced, what measures are effective and how, for example, care institutions can systematically work towards increased safety. As it is common that old age brings with it disabilities of various kinds, it is of the utmost importance that different disabilities are considered in the method handbook.

**Reporting of errors within the care services**

In order to receive information about the extent to which shortcomings in the care services lead to death, it is of vitally important that there is a functioning reporting system. At present there are various modes of procedure for reporting incidents.

In Sweden around 1,000 discrepant incidents in the care service are reported annually to the National Board of Health and Welfare according to the so-called Lex Maria regulations. Lex Maria entails an obligation on the part of the carer to notify the National Board of Health and Welfare if a patient suffers from, or is exposed to the risk of, serious injury or illness in connection with care, treatment or examination.

- Approximately 3,500 incidents are reported each year to HSAN, the disciplinary board for health care and medical treatment. Reports to HSAN are made by patients or close friends and relatives.
- Approximately 22,000 incidents are reported annually to the county councils’ and regions’ patient advisory committees. Patients, relatives and staff can turn to these committees if problems arise within care.
- Patient liability insurance receives approximately 9,000 claims a year for compensation.
- According to some estimates, ten percent of all care days in Sweden’s medical clinics go on care of patients who have been wrongly prescribed medicine.
A nationwide review carried out by the National Board of Health and Welfare reveals that the staff at some 60 percent of the reviewed units are aware that discrepancies have occurred that should have been reported but have not been, often due to fear. 35 percent of the psychiatric non-institutional care surgeries examined have no functioning procedures at all for reporting discrepancies, so that, for example, suicide can be prevented.

We do not need to know any more facts about injuries and incidents whilst in care than we do at present to realise that preventive patient safety improvement is necessary to prevent people being unnecessarily deprived of life. To evaluate the contributions that are being made it is also worthwhile to be able to use statistical data. Among other things this requires that discrepancies that occur really are reported by medical staff, that they are compiled and analysed by carers and that all incidents where patients receive or run the risk of receiving serious harm are reported. With effective handling of discrepancies as a basis, it is possible to develop an improved and more streamlined patient safety procedure to the benefit of the patients, hospital staff and an appropriate utilisation of the health service’s resources.

The shortage of beds
The number of beds has substantially decreased within all areas of medical activity in recent years, this also applies to beds for old people and within psychiatry. The number of beds in Sweden is also low in international terms. A comparison between a number of countries in Europe carried out by OECD shows that Sweden, along with Finland, has the lowest number of beds within short-term care. The Swedish Medical Association has carried out a series of interviews with doctors within various specialities. The interviewees reveal that when there is a shortage of institutional beds, patient safety is at risk. "It often entails taking chances in sending patients home too early, one is forced to take decisions that are not for the patients' best." "You suddenly have a patient who is in urgent need of a respirator without there being any available places.”

According to the National Board of Health and Welfare, schizophrenics have a 1.6 times greater risk of dieing early, compared with the rest of the population. Researchers who have been following 30,000 patients with schizophrenia in Malmö for almost the last 100 years have been able to observe that mortality has substantially increased since the early 1990s. This happened at the same time as the number of beds for patients with schizophrenia was drastically reduced. In line with cutbacks in 24 hour psychiatric care, increasing numbers have died prematurely. People who are suffering from schizophrenia in Malmö now run a 10 times greater risk of dieing prematurely.

The Swedish Disability Federation considers that:
- Regardless of who has carried out the research, the feedback to the health service, along with measures and decisions are two of the most important cornerstones in reducing deaths within care. If the discrepancy has a general interest for medical and dental services in the country, there must also be a nationwide feedback system to enable patient safety to be uniformly safeguarded.
- The reporting- and notification system must be disengaged from the responsibility for discipline so that more people are prepared to report harm or the risk of harm in care.

- All mishaps within the care services must be reported and not just those that are serious as is the case at present.

- The use of national guidelines and a quality register must be expanded so that the causes of malpractice and mortality can be evaluated. National guidelines provide increased uniformity and prevent malpractice that can lead to death. Quality registers provide both medical staff, politicians and decision makers with the opportunity to evaluate and follow up decisions and measures.

- The entire legislative body of regulations that surrounds issues of patient safety must be reviewed.

- A system for following up visits to the doctor must be produced in order to if possible reduce incorrect medication. This requires a new approach to how human resources are to be utilized within the health service. Furthermore, supervision from the National Board of Health and Welfare and the Medical Products Agency must be reinforced.

- Place of residence or negative attitudes among doctors must not influence chances of survival. All people, regardless of functional capacity, age, gender, residence or living conditions must receive equal care.

- The number of beds must increase so that all people receive the life-sustaining care that is necessary. The number of beds must correspond to the need.

- The disability organisations’ advisory role according to the UN’s standard rule 18 must be safeguarded when the rules and regulations for patient safety and quality assurance are being developed.

**Lethal violence**

**Women**

Every year 20-40 women are subjected to lethal violence in Sweden. In 2003 there were 1,849 reports of gross violation of a women’s integrity – an increase of 18 percent compared with 2002. This is shown in Amnesty’s report “Male violence against women”. The Swedish Disability Federation has not been able to find any facts on how many of the women who were subjected to lethal violence have disabilities.

Both the police and the regional public prosecution office are criticised by Amnesty. The municipalities are also criticised. There is no information material for vulnerable woman, and few social services offer protected accommodation. Instead they put their trust in the women's refuges. As set out in article 10 of the Swedish disability movement’s alternative report on economic, social and cultural rights, it is especially hard for vulnerable women with disabilities to receive support and protection.
Children
In the last ten years the number of children who have been the victim of lethal violence has decreased. On average five children are killed each year which is half in comparison with the previous period. It is primarily preschool child in the one - six age group that has decreased in number from an average of six to fewer than two children per year. The proportion has decreased from 55 to 30 percent.

With older children, 7-14 years old, there has also been a decrease from three to two children per year. Proportionally this group has increased from 27 to 39 percent.

For the youngest children, those who are under one year old, there is no change. The figure remains at two children per year. The proportion has increased from just under 20 to 30 percent.21

Mikael Rying, who carried out the research, claims that a possible cause of the decrease is that we have a well developed child care system with child clinics and preschools. The report does show however that this type of crime usually occurs in families that are marginalised. - The breeding ground for violence against children can sometimes be social destitution. The researcher feels that in addition the new generation of antidepressant drugs, so-called SSRIs, may have played a role in the reduction. The dominant underlying cause of lethal violence against children is namely depression or mental illness in the offender. A total of 90 percent of the perpetrators have a mental illness or derangement and this has not changed over time.

The survey does not indicate how many of the children have a disability. However, as set out in article 10 in the Swedish disability movement’s alternative report to the committee for economic, social and cultural rights, the risk of abuse increases if the child has a disability.

The Swedish Disability Federation considers that:

- Every person who is killed is one person too many. It is good that the number of children who die on account of violence is reducing, but society must demand zero tolerance. Further measures must be taken to reduce the number of children and adults who die each year as a result of lethal violence.

- We refer you here to the Swedish disability movement’s opinions in article 10 in the alternative report on economic, social and cultural rights.

Conclusions and recommendations
The Swedish disability movement does not have any points of view on current legislation in Sweden that concern this article. The information in this section does however show that there are circumstances and in some cases shortcomings in the social system that contribute to people nevertheless being deprived of life. Among these circumstances are shortcomings in the health service and the occurrence of lethal violence. The Swedish disability movement is of the opinion that a lot of these circumstances can be rectified and considers that the current circumstances therefore constitute an arbitrary deprivation of life.
The Swedish Disability Federation recommends the Swedish state to:

- Review the entire body of legal regulations that surround issues of patient safety with the aim of reducing mortality within the care services. This includes:

- Ensuring that there is greater willingness to report incidents in both hospital staff and patients so that shortcomings in health care are always noted.

- Developing a system to utilize these points of view so that the quality of all care can be systematically guaranteed.

- Putting in place a nationwide feedback system so that patient safety can be uniformly ensured throughout the entire country.

- Ensuring that violence against and abuse of children, young people and adults with disabilities can be identified and that the necessary support can be obtained. This issue should be specifically identified in national training events for staff groups in the care, school, police and legal systems.

- Ensuring that the social services and health care and medical treatment services draw up strategies and methods to draw attention to the occurrence of violence and modes of procedure to support girls, boys, women and men with disabilities who have been subjected to different forms of abuse.
Article 7 – Ban on torture, cruel and degrading treatment

In this article the organisations of people with disabilities would like to elucidate the following circumstances:

- Vulnerability to abuse among people with disabilities
- The existence of rights-free zones
- The occurrence of medical interventions

Vulnerability among people with disabilities

Article 10 of the Swedish disability movement’s alternative report on economic, social and cultural rights that was submitted to the monitoring committee in Geneva in July 2006 describes what a vulnerable situation people with disabilities find themselves in. The report deals solely with violence in close relationships. By way of summary it can be said that:

Children with prolonged illnesses or disabilities are clearly at a much greater risk than others of being abused by parents and siblings. Boys with disabilities were more vulnerable to bullying and abuse than girls. For children who had DAMP, mental disability or obesity, the risk of being subjected to such treatment increased by 25 per cent.22

During the last 12 months, 9 percent of deaf people have been subjected to violence resulting in injuries that required attention by a doctor, dentist or nurse. This can be compared with a figure of 0.9 per cent of Sweden’s total population in the same age group stating that they had been subjected to violence requiring medical treatment.23

Women with mental disabilities are a particularly vulnerable group. A survey from 2005 shows that 63 percent had been subjected to an assault after the age of 16. The equivalent figure for last year was 31 percent.24

Research has also shown that women with mental illnesses and disabilities risk being subjected to crime on more occasions than others25. In one Swedish self-assessment study, 67 per cent of the women questioned stated that they had been subjected to abuse on more than one occasion.

In spring 2007 the HANDU research institute presented a report from the project, Male Violence against Women with Disabilities, regarding women with intellectual disabilities, mobility impairments or visual impairments. 1,200 interviews were carried out within the framework of the project with a random selection of women aged between 18-64 who have mobility impairments, intellectual disabilities or visual impairments. The report reveals that one in three women have experienced threats, violence or sexual harassment from men. One in seven women have been physically harmed by men who subjected them to violence and sexual assault. The violence is usually not an isolated incident.
The perpetrator is usually a man with whom the woman cohabits or is acquainted, but it also the case that nursing and transportation staff, for example, abuse them in various ways. A minority of the women who are abused come into contact with care services, the police or social services. Those who do receive help are often dissatisfied with the support they receive. It also occurs that women’s children are affected. Four out of ten women state that they tried to commit suicide or considered it. This applies in particular to those women who have been subjected to physical violence by men.

Studies show that homosexual and bisexual men run a considerably higher risk of being subject to violence than heterosexuals. Homosexuals also suffer harassment and bullying in workplaces and schools more often than the general population. Large numbers of young homosexual, bisexual and transsexual people have mental difficulties, of which a substantial number present a risk of suicide. It has not been possible to find any studies concerning homosexuals with disabilities.

The Swedish Disability Federation would like to refer to the opinions that are to be found in article 10 of the Swedish disability movement’s alternative report on economic, social and cultural rights.

**Rights-free zones**

Violence against adults and children with disabilities is covered by the same laws as others. For abuse to be a criminal offence, the incident must be covered by a law that makes it possible to take legal proceedings. Even if an incident is a criminal offence, the question is whether it will be regarded as such. Studies carried out by Barbro Lewin and Astrid Kubis show that there is a tendency within the care services to consider abuse that occurs between staff and residents, or between residents, as care issues, and not as legal issues. Lewin demonstrates in her study that reports are sometimes not forthcoming due to hierarchical structures. These can mean that subordinate personnel do not dare to talk about/notify incidents, or do not get involved for reasons of loyalty. Astrid Kubis studied abuse in special housing in her dissertation. She shows that ”rights-free zones” occur in the accommodation. This applies in particular when the person who carries out the incident is disabled him/herself. It might involve physical and mental abuse between residents, blows, pushing, threats or insults of all possible kinds. Violations are often explained away with “he didn’t mean it, he doesn’t understand what he’s doing, or he’s usually so nice”. Instead, those who are abused have to learn to live with it.

**The Swedish Disability Federation considers that:**
- Staff at various types of accommodation must take action to prevent abusive situations arising.

**Medical intervention**

**Electroconvulsive therapy**

Electroconvulsive therapy, e.g. electric shocks (ECT) is used as a form of therapy in Sweden. It is hard to produce statistics concerning the occurrence of therapies such as this as psychiatrists have no mandatory reporting requirement. It is accordingly not clear whether electric shock therapy takes place voluntarily or under compulsion.
The Swedish Disability Federation considers that:
- With the aim of reducing the risk of electric shock therapy taking place under compulsion, the personnel administering the treatment, among whom are psychiatrists, must be duty-bound to report it. A system for utilizing these reports must be developed in order to clarify the occurrence of such treatments and whether electric shock therapy takes place voluntarily or under compulsion.

Conclusions and recommendations
The Human Rights Committee noted the occurrence of violence and in its concluding observation of 21 April 2002 articulated the following:

"7. The Committee notes with concern the persistence of domestic violence despite legislation adopted by the State party (articles 3 and 7 of the Covenant). The State party should pursue its policy against domestic violence and, in this framework, should take more effective measures to prevent it and assist the victims of such violence." The Committee for the Elimination of Discrimination against Women (CEDAW) has made a similar statement. In connection with reviewing Sweden’s fourth and fifth periodic reports to the UN in July 2001, CEDAW stated that

"35. The Committee urges the Government to continue to collect data on the nature and scope of violence against women, in particular within the family, and to continue its efforts to implement and strengthen current policies aimed at combating violence, with special attention given to women with disabilities and migrant and minority women."

The information in this section reveals that people with disabilities still run greater risks than others of being exposed to various forms of cruel and degrading treatment. The information also shows that assaults that take place within the care system and special housing is not always reported and regarded as a crime. Hierarchical structures within the care system contribute to care staff not always reporting incidents that have occurred. The risk of the incident not being reported also increases if the person who has perpetrated the incident has a disability.

Abuse must be reported and viewed as an assault, regardless of who carried it out. Moreover, as set out in the Swedish disability movement’s alternative report on economic, social and cultural rights, it is especially difficult for people with disabilities to get adequate support from society after having been abused.

In its Concluding observation of 24 April 2003, it also stated that

"The Committee notes with concern cases of female genital mutilation and “honour crimes” involving girls and women of foreign extraction practices." The Swedish disability movement has not been able to find out any facts concerning the extent to which girls and women with disabilities are subjected to abuse of this kind. However, the Swedish disability movement would like to emphasise the importance of all girls and women, regardless of functional capacity, receiving the necessary protection and support in order to progress in life. If a girl or a woman who has not been given sufficient protection is subject to honour-related violence or female circumcision, the disability must be taken into account when support is provided.
The Swedish Disability Federation recommends the Swedish state to:

- Ensure that violence against and abuse of children, young people and adults with disabilities can be identified and that the necessary support can be obtained. This issue should be specifically identified in national training events for staff groups in the care, school, police and legal systems.

- Ensure that social services, healthcare and medical treatment sectors formulate strategies and methods for supporting girls, boys, women and men with disabilities who have been subjected to different forms of abuse.

- Ensure that crisis centres for women and men are made accessible for disabled people, with regard to physical accessibility, information and communication.

- Review existing guidelines for care personnel with the aim of bolstering expertise and ability to intervene when abusive situations arise at different forms of accommodation.
Article 8 on slavery and forced labour

1. Slavery and the slave trade (concerning point 1 in the article)
Sexual exploitation of girls, boys and women

It is not possible to assess the extent of sexual exploitation in Sweden. According to the National Criminal Investigation Department, in 2002 it involved between 300 and 600 women. With regard to children’s vulnerability to sexual exploitation, ECPAT Sweden carried out a study on awareness about exploitation of minors. Within the framework of this study 2 surveys were undertaken.

The first, which was undertaken by the National Council for Crime Prevention examined 70 judgements between 2000 and 2003 that had elements of commercial sexual exploitation of children. The results of the examination showed that:

- About half of the children, 151, were under 13 years of age.
- 70 percent of the children had been abused by a person who they knew in some way or with whom they were acquainted.
- 40 percent of the boys, as opposed to only a small percentage of the girls, had been abused by a person who had come into contact with the children via their professional role.

The second investigation examined the young people’s sexuality and attitudes to and experiences of sexual exploitation. The study, which is based on a questionnaire among 4,343 18 year olds from five different municipalities in Sweden, shows that:

- 1.4 percent of young people who are in the third year of upper secondary school in Sweden have at some time sold sexual services.
- More boys than girls have at some time received payment for sexual services
- The proportion who has been subjected to sexual abuse was larger among those who had sold sexual services compared with those who had not sold sexual services.

In Svedin and Priebe’s study 49 (80 percent) of the 60 young people who had taken payment for sex stated that they had been subjected to sexual abuse during childhood. A government report (SOU 2004:71) on sexual exploitation of children and people trafficking in Sweden emphasises that "As with sexual abuse, the visible part of sexual exploitation of children, i.e. crime statistics and information from authorities and organisations, is probably just the top of the iceberg.”

Elements of risk
The government report mentioned above identifies a number of factors that lead to an increased risk of children and young people being drawn into commercial sexual exploitation. Among these are cases where children are not coping at school, are on the run, are homeless, have intellectual disabilities, as well as children whose parents have intellectual disabilities. The government report observes that it is primarily children who do not have adult protection who are in the risk zone.
An interview survey of 23 women who had left prostitution shows that many of them had left home early due to problems in the parental home. Some describe repeatedly running away from home at the age of 13–14. Most of those interviewed had left home by the time they were 17–18 years old, some as early as fifteen.

**Vulnerability among people with disabilities**

Research shows that people with disabilities run an increased risk of being subjected to sexual abuse both as children and adults. As described above, the risk of children, young people and adults being drawn into the sex trade increases if they have previously been subjected to abuse. Children with intellectual disabilities are particularly vulnerable, partly due to the fact they find it difficult to assess risks and determine when a sexual relationship is exploitative, partly because they find it difficult to be believed when they report abuse. As people with learning difficulties are deemed to be less credible and find it difficult to describe an incident in the way required by the judicial system, they are rather "safe" victims. For people with normal intelligence, it can be comparatively easy to manipulate a person with diminished faculties who is unsure about what normal sexuality is and who is looking for confirmation that he/she is the same as everyone else.

**The vulnerability of children when there is inadequate support or supervision**

Personal accounts and interviews with professionals in the book, Children of Parents with Learning Difficulties (Hindberg 2003) describe how unfamiliar people come and go in the families, something which constitutes a clear risk for the children. For a person with an intellectual disability it can be hard to determine whether a relationship is healthy and based on reciprocity, and when it is a question of exploitation. Some of the fathers of the interviewed children have criminal records or are addicts, which mean that the children automatically end up in risky environments. Even in families where the parents do not have addiction problems, mental or intellectual disabilities etc. there can be a lack of supervision and protection that results in the children being particularly vulnerable. It is therefore of the utmost importance that families receive the necessary support in order to give the children a safe upbringing. For more information on support to families, see article 23 and the Swedish disability movement’s alternative report on economic, social and cultural rights, article 10.

According to the action plan for human rights from 2006, the government is working on the production of a national action plan in relation to all forms of people trafficking. The Swedish disability movement cannot stress enough the importance of the action plan taking the above mentioned risks particularly into account and the vulnerable situation in which people with disabilities find themselves. Finally it must also be noted that Sweden is used as a transit country for foreign women and children who are en route to other countries to be exploited in various ways including prostitution.
The Swedish Disability Federation considers that:

- An element in the work of preventing all forms of sexual exploitation must be early identification of sexual abuse. Also that boys and girls receive the necessary protection and support to progress in life. The Swedish disability movement would like to offer a special reminder that girls, boys, women and men with disabilities are at a particularly great risk of being subjected to different forms of abuse, and that the disability must be taken into account when support and protection are provided.

- Families with disabled members must receive the necessary support to provide the children with a healthy and safe upbringing. (See further article 23)

- The production of a national action programme against all forms of people trafficking must pay particular attention to the vulnerability of women and men with disabilities.

2. Servitude (concerning point 2 in the article)

The Swedish disability movement has no points of view on how Sweden lives up to point 2 in article 8.

3. Forced labour (concerning point 3 in the article)

It has not been possible to find any concrete facts or statistics regarding the extent to which forced labour occurs in Sweden. The Swedish Disability Federation has however received anecdotal evidence and therefore fears that such involuntary, forced labour does occur.

The point of departure for the way in which the Swedish disability movement has dealt with this right is to be found in the "Abolition of Forced Labour Convention" (1957 (No. 105), ILO convention (1930) and also ILO’s recommendations concerning centred workshops.

The anecdotal evidence that the Swedish Disability Federation has received describes examples such as people with severe disabilities being forced into so-called daily activities despite them wanting to perform a proper job. For those people who would rather work, these daily activities are perceived to be meaningless and forced.

The Swedish Disability Federation considers that:

- It is good that there is a variety of forms of daily activity for people who are not able to work in the open or segregated labour market.

- The capacities and knowledge of all people must be viewed as a resource in society and more jobs must be generated. However, it is important that people who have the knowledge, desire and capacities to perform a job do not need to devote themselves to forced daily activities.

- A survey of how individuals perceive the daily activity should be undertaken with the aim of combating all forms of forced labour.
Conclusions and recommendations
At the very beginning of this section it was stated that it is not possible to assess the extent of commercial sexual exploitation in Sweden. In order to be able to put the correct measures in place we need to know the extent of sexual exploitation. The lack of statistics on how many children are subjected to sexual exploitation in Sweden was also pointed out as recently as January 2005 by the UN’s committee on children’s rights in the "Concluding Observations of the Committee on the Rights of the Child.

The National Criminal Investigation Department’s latest report “People trafficking for sexual purposes”, (RKP 2004:2) states that people trafficking for sexual purposes is also suspected to have increased in Sweden.

The government report (SOU 2004:71) on sexual exploitation of children and people trafficking in Sweden states that isolation, the absence of parental supervision and protection and the occurrence of abuse in childhood leads to an increased risk of being drawn into commercial, sexual exploitation. The information in this report shows that different forms of abuse are more common among children with disabilities, and that parents, especially parents with intellectual disabilities do not always receive the support they need in order to provide their children with a secure upbringing. It means that people with disabilities and their children are an especially vulnerable group that risk being exploited for commercial sexual exploitation.

The Swedish Disability Federation recommends the Swedish state to:
- Institute vigorous measures with the aim of identifying sexual abuse among girls, boys, women and men with disabilities. Also ensure that those who have been subjected to different forms of abuse receive the necessary protection and support to progress in life. See also the recommendations in article 7.
- Ensure that families with members with a disability receive the necessary support to give their children a healthy and secure upbringing.
- Undertake a national survey of commercial sexual exploitation in Sweden.
- Undertake a survey of how individuals perceive the ”daily activity” with the aim of reducing the occurrence of forced activities.
Article 9 - Deprivation of liberty

1. Deprivation of liberty with the support of the law
   (concerning point 1 in the article)
   According to Swedish law people may be deprived of their liberty on account of:
   - Crime or suspicion of crime.
   - Compulsory care.
   - Risk of spreading an illness that is a danger to the public.
   - Detention of foreigners (custody - usually in connection with the person receiving a decision on refusal of entry or deportation and where the Swedish Migration Board has reason to believe that the person will go into hiding. An asylum seeker can also be placed in custody if there is uncertainty regarding identity).

Deprivation of liberty on account of crime or suspicion of crime
In connection with a person committing a crime or being suspected of having committed a crime, the person can be arrested, taken into custody and imprisoned. When and how it may take place is regulated in the Code of Judicial Procedure, chap. 24. The penalties that a person who commits a crime can receive are set out in "the Criminal Code", BrB (chap. 1, para. 3). These are: fines, prison, suspended sentence, probation and committal for special care. A prison sentence and committal for special care, and to some extent probation, constitute deprivation of liberty. There are 57 prison institutions in Sweden and in 2003 there were 4,460 places within the prison service. The estimated throughput of people sentenced to prison is 13,000 – 14,000 per year.

Special provisions regarding penalties
There are restrictions in the system of penalties in "the Criminal Code" applying to offences committed under severe mental illness and if the perpetrator is under 15, 18 and 20 years old respectively.

According to BrB, chap. 30, paragraph. 6, people who have committed a crime under the influence of severe mental illness may not be sentenced to prison. The legal text also sets out that: "If in such a case the law finds that no other penalty should be imposed, the defendant shall not be penalised."

The provision is supplemented with the following text in BrB, chap. 30, paragraph. 3: "If the person who is suffering from severe mental illness commits a crime for which it is deemed the penalty of fines is insufficient, the court may commit him for forensic psychiatric care if with respect to his general mental state and personal circumstances it is required that he is admitted to a hospital for psychiatric care, that is combined with deprivation of liberty and other compulsion".

People who have committed offences while mentally ill can thus be deprived of their liberty in order to be treated within forensic psychiatric care. Every year approximately 370 people are committed by the courts for forensic psychiatric care.
In 2005 the average number in care was 825 persons of which 13 percent were women. More detailed provisions on special care as a consequence of crime are set out in the Forensic Psychiatric Care Act.

Until 1965 persons who committed crimes were acquitted if they were adjudged not to be responsible for their actions at the time of the crime. It was subsequently introduced that all citizens, even persons with intellectual disabilities, are responsible for their actions and for being aware of and complying with existing laws and ordinances. It was then possible to place this group of offenders in certain hospitals that came to be known as "special hospitals". Until 1992 offenders with intellectual disabilities could be sentenced to confinement in a special hospital. Persons with intellectual disabilities were subsequently given prison sentences or alternatively forensic psychiatric care on the same grounds as other criminals.

In 1999 the government decided to set up a parliamentary committee, "the Committee of Mental Responsibility", to examine issues of responsibility and penalties for offenders with mental disabilities (here also including developmental disorders). Against the background of current problems relating to "ordinary" sentencing rules for persons with mental or intellectual disabilities, one of the tasks was to take a position on whether there was a requirement for special sentencing rules. The committee’s proposed bill with regard to this reads: "A new form for implementing prison, closed accommodation, will be introduced for certain people with disabilities. The model shall be closed sheltered housing arranged according to the principles in LSS. The staff is to have special knowledge of people with disabilities and the residents will be offered habilitation- and rehabilitation measures. The decision on whether a prison sentence shall be served in closed accommodation will be taken by the Prison Service (SOU, 2002:3, p. 165)". However, thus far, the proposals have not come to anything.

Institutional youth care
According to the Criminal Code, chap. 1, para. 6, a person who commits an offence before the age of 15 may not be given a penal sentence. For young people who commit crimes before they are eighteen years old, the court may give a prison sentence only if there are special circumstances (BrB, chap. 30, para. 5). Chapter 31 lays down that in the first instance the court must give a sentence consisting of institutional youth care instead of prison. Para 1 a. Institutional youth care is consequently a fixed term penalty, but at the same time means that the concept of treatment is emphasised, as the time in which the person sentenced spends in the institution is used for care and treatment.

The Swedish Disability Federation considers that:
- All people, regardless of functional condition shall be responsible for their actions. The sentencing system must however take into account people’s different functional condition and need of care.
- The Committee of Mental Responsibility’s proposal on closed accommodation for certain offenders is a good one and should be implemented. It is very important that this form of accommodation is formulated in accordance with the principles in LSS, so that it does not entail a gradual retrogression to the special hospitals.
**Offenders with disabilities who are deprived of their liberty**

When it comes to offenders with disabilities who are deprived of their liberty, there are a number of groups who are particularly vulnerable; persons with mental disabilities, persons with intellectual disabilities and persons with neuropsychiatric disabilities. The disabilities as such do not lead to persons becoming criminal, however the disability can entail character traits that increase the risks when there is unfavourable interaction.\(^3\)

The number of serious violent crimes with a lethal outcome has been fairly stable at around 100 cases per year for the last twenty years. Studies show that approx. 10 percent of the most serious violent crimes are committed by persons who have mental illnesses.

Between 1 January 2000 and 20 March 2001, 114 persons with intellectual disabilities passed through the Prison Service. Of these, 13 persons were sentenced to care in a prison institution. The conference report "When the intellectually disabled break the law" presents a study from Canada that shows that there is a five times greater risk of a person with a intellectual disability committing a crime than a person without.

About 25 percent of inmates in prisons have ADHD. This has most recently been confirmed in a research study on Kumla prison which shows that 55 percent of the most serious violent criminals in the country have had ADHD in childhood. Half of those who are currently sentenced to life still conform to the criteria for the diagnosis. This should be compared with the fact that it is expected that around 5 percent of all school-age children have ADHD. There are no reliable statistics regarding adults. Many young offenders have ADHD or related neuropsychiatric disabilities. This applies to a particularly great degree to those who get caught up in addiction and criminality at a very young age. A study examined the occurrence of ADHD among pupils at Lövsta approved school, an SiS –institution\(^3\) for highly criminalised young people. The study showed that the majority of the inmates had ADHD+ CD and that the intensity of the crime fluctuated in accordance with the intensity and duration of the ADHD symptoms.\(^3\) More recent inventories of SiS have produced similar results. A similar study was also carried out among the inmates in the prison on Gotland; 25 percent fulfilled the criteria at the time of the survey and a further 25 percent were deemed to have fulfilled them earlier in life. In none of the cases was the disability diagnosed. Characteristic for the ADHD prisoners was an early criminal debut and a high intensity of crime with continual relapses.\(^3\)

**Adequate care can prevent criminal tendencies and reduce deprivation of liberty**

Among people who have been detained there are a large number who have not received the necessary support and protection of society to enable them to live life in freedom. The right intervention on the right occasion can prevent the risk of society having to deprive people of their liberty. Research\(^3\) suggests that mental disabilities in combination with addiction is the best explanation for the increasing risk of violence in people with mental disabilities. Properly functioning treatment of addicts is thus important in preventing violence, along with a properly functioning collaboration between authorities responsible for correctional care, care of addicts and psychiatry.
Psychiatric reform
Deinstitutionalisation has been taking place in Sweden since the 70s and the mental hospitals have been shut down. In order to ensure that the people who would previously have ended up in these institutions receive the support they needed to be part of society, in 1994 a psychiatric reform was implemented/commenced in Sweden. The reform entailed county councils and municipalities taking a joint, shared responsibility for providing the care and welfare needed by people with mental disabilities. The municipalities were given the responsibility for housing, employment/daily activities, care and health care initiatives up to and including nursing level in special accommodation and daily activities. The county councils are responsible for diagnostics, treatment and medical rehabilitation. The idea was that the care of people with mental disabilities should increasingly take place in society. The aim of the reform was to improve the living situation for people with mental disabilities and increase the chances of them participating in communal and social life. Unfortunately, the psychiatric reform has still not been fully implemented.

The number of patients who seek care within psychiatry has increased markedly during the last ten year period. Within psychiatry for children and young people the influx of new patients has doubled in some places, within general psychiatry the increase is also marked. With an unchanged level of resources there is a resulting shortage situation. Many municipalities lack both the financial resources and expertise to be responsible for high quality care for people with mental disabilities. There is often a lack of planning and follow-up in the operation and there is poor coordination between different parts of the operation within the municipality but also between municipalities and county councils. The lack of adequate psychiatric care aggravates the illness and the disability. In all too many cases the lack of preventive care leads to very serious ill-health that entails an increased danger for both individuals and their surroundings. There is an increased risk of individuals having to be deprived of their liberty partly on account of compulsory care but also due to crime.

"Antisocial personality disorder", ASP, can be traced as early as childhood, when it is known as conduct disorder. When the problems remain beyond 18 years old it is classified as ASP. About half of all individuals with ASP also have other congenital mental disabilities, primarily ADHD, which are characterised by concentration difficulties, hyperactivity and impulsiveness. The increased risk of offending and addiction is to be found in the interplay between constitutional, psychological and social risk factors. There is therefore justification that ASP is included in the arsenal of psychiatric diagnoses. In practice ASP is seldom noted in child, youth and adult psychiatry. ASP also receives a low priority within the care services. The perception that the care services have little to offer tends to become self-fulfilling. The less clinical involvement there is, the less the problem is noted in research and method development. The increased knowledge about causes of personality disorders and their treatability justifies a greater involvement on the part of psychiatry. It is not ethically defensible that the consequences of the diagnosis are only revealed at the end of the road, or that people are deprived of their liberty because they didn’t receive the necessary care and support from society. Comprehensive and persistent habilitation efforts and psychiatric treatment can counteract antisocial development, or mitigate it if it has had the time to become established. Coherent support and treatment from childhood into adult life – sometimes very extensive, but in the long-term cost effective – can prevent high-risk children ending up in addiction and
criminality. Attending to the mental vulnerability of those with ASP and ADHD who have already got into difficulties also has a crucial effect on increasing the chances of becoming free of addiction and finding a place in society. However, interest within addiction treatment, corrective treatment and psychiatry has thus far been conspicuously low.

Similar problems apply to an even greater degree in the concept of psychopathy, which is almost always used in connection with risk assessments within forensic psychiatry and corrective treatment. Psychopathy is less anchored in research than most other psychiatric diagnoses. Against the background of the weak validity of the diagnosis, it is unfortunate that psychopathy is almost stereotypically regarded as an untreatable condition. Among those who are classified as psychopaths there are, for example, no shortage of undiagnosed, treatable, neuropsychiatric disabilities. 41

**The Swedish Disability Federation considers that:**
- The intentions of psychiatric reform are good and must be fully implemented so that people with mental disabilities receive the care and support they need. Adequate care and support reduces the risk of mental illness intensifying and thereby also the risk of violent acts that result in individuals having to be deprived of their liberty.
- Available knowledge about the causes and treatability of personality disorders must be utilized with the aim of reducing imprisonment of people with neuropsychiatric disabilities and double diagnosis.

**Deprivation of liberty on account of care**
In certain cases people in Sweden can be deprived of their freedom despite not having committed any crime. This applies primarily to persons who are taken into compulsory care. When a person receives voluntary care and treatment at a clinic it is called outpatient care. When a person is admitted to hospital the care received is called inpatient care. Inpatient care is therefore not the same as compulsory care. According to the law, compulsory care may occur in the following cases:
- The Compulsory Psychiatric Care Act, LPT
- The Care of Addicts Act, LVM
- The Care of Young Persons Act, LVU.

Compulsory care exists in order to protect both the individual and others in society. Compulsory care may not be administered for longer than is necessary, and the doctor must decide on an ongoing basis whether treatment is needed.

**Compulsory psychiatric care**
People who are suffering from a serious mental illness can be deprived of their liberty against their will in order to be treated. However it must be necessary, taking into consideration the person’s mental state and personal circumstances, that he or she receives expert, round the clock, psychiatric hospital care. For example, the individual’s own life or health, or the safety and physical or mental health of other people, must be at risk. A requirement is also that the person does not want to be treated in this way.
The organisations of people with disabilities consider that the option of deprivation of liberty on account of compulsory care for psychiatric illness must be in place, and also that the prevailing criteria for compulsory care are appropriate. However, what the disability movement opposes is that the lack of adequate preventive care far too frequently leads to people’s mental illness becoming so serious that they have to be sectioned.

**Care of young people**

If the parents of a person who is under 18 years old are not able to provide the support he or she needs, or if the young person is leading a destructive live involving addiction or criminality, the young person can be taken into care according to the "Care of Young Persons Act", LVU. Where appropriate, the Act includes people up to 20 years old. The county administrative courts hear cases concerning LVU.

The municipalities' social welfare board decides how the care is to be arranged and where the young person is to live during the period of care.

In the report, "We have so much to say!" , some 70 children and young people between the ages of 11 to 18 years old who live in care homes, special housing or special institutions for young people, responded to questions from the Children’s Ombudsman and the County Administrative Board in Skåne on how they feel their voices can be heard. The report reveals that the majority understand why they are in a youth institution. A large number are motivated to live there. Some even consider that the institution is the best home they have ever had. But many of the young people also state that decisions are made about them without them being consulted. It is noteworthy that one in six states that they seldom or never have contact with their social welfare secretary. Contact between the young people and their social welfare secretary is very important as it is the social welfare secretary who has the decisive influence as to whether care is going to carry on, be discontinued or altered. Many young people feel that they do not have any opportunity of changing the situation in which they find themselves.

**Care of addicts**

The county administrative court can decide that an addict is to receive care even though he or she doesn’t want it. The addict can then be sentenced to care according to LVM. The purpose of this is to interrupt a life-threatening addiction to, for example, alcohol or narcotics, and to motivate the person to receive treatment voluntarily.

The prerequisite for care according to LVM is that an addiction is the cause of a person needing care to escape that addiction. A requirement is also that it is not possible for the care to take place voluntarily, and that as a consequence of the addiction the person is exposing him/herself to serious danger, is at a distinct risk of destroying his or her life or of severely harming him/herself or persons close to them.

In 2005 the total number of residents at LVM homes was 987 persons. Of these, 30 percent were women. A large number of studies from various countries indicate that one in three addicts who abuse a mixture of substances, and one in five alcohol addicts, has ADHD. To a large degree the addiction has the character of self-medication. Some of the addiction clinics within the National Board of Institutional Care (SiS) have started to observe that ADHD is also a common occurrence among their clients.
Statement by the UN
To put Swedish compulsory care into an international perspective, but also to get a clearer picture of what is compatible with this article, we refer here to what has been stated by the UN.

Article 4 in the Declaration on the Rights of Mentally Retarded Persons, prescribes among other things the following:

4. Whenever possible, the mentally retarded person should live with his own family or with foster parents and participate in different forms of community life. The family with which he lives should receive assistance. If care in an institution becomes necessary, it should be provided in surroundings and other circumstances as close as possible to those of normal life.

Article 9 in the Declaration on the Rights of Disabled Persons also deals with the right of people with disabilities to be able to live with their families:

9. Disabled persons have the right to live with their families or with foster parents and to participate in all social, creative or recreational activities. No disabled person shall be subjected, as far as his or her residence is concerned, to differential treatment other than that required by his or her condition or by the improvement which he or she may derive therefrom. If the stay of a disabled person in a specialized establishment is indispensable, the environment and living conditions therein shall be as close as possible to those of the normal life of a person of his or her age.

The Swedish Disability Federation considers that:

- The criteria for Swedish compulsory care are satisfactory, but the government must put measures in place with the aim of preventing people being unnecessarily deprived of their liberty.

- People with mental and neuropsychiatric disabilities must have access to adequate preventive care, habilitation and rehabilitation.

- The occurrence of double diagnosis must be attended to and causal connections investigated so that individuals receive adequate treatment in connection with compulsory care. This is with the aim of reducing the risk of being detained again, and to increase the possibilities for reassimilation into society.

- With mental illness and addiction, so-called double diagnosis, the responsibility for medical treatment and rehabilitation lies with the head of health care services. Treatment must take place simultaneously for both conditions. It is also important that there is subsequent cooperation between municipalities and county councils so that there is no gap in the care – welfare – rehabilitation-chain.

- The basic idea behind the psychiatric reform is in line with the UN’s declarations on “Mentally Retarded Persons, and disabled persons”. However, we consider that the fact that the reform has still not been fully implemented as well as that people are deprived of their liberty as a result of not receiving necessary preventive care, is not consistent with the declaration’s intentions.
2. Persons who have been arrested (concerning point 2 in the article)
When people with disabilities are informed of the reasons for their arrest, it is very important that the information is provided in a way and in a language that the individual understands. The disability movement would here like to make particular reference to "the European Convention for the Protection of Human Rights and Fundamental Freedoms", article 5.2, which lays down that: "2. Everyone who is arrested shall be informed promptly, in a language which he understands, of the reasons for his arrest and of any charge against him". The UN’s standard rules also confirm this.

In connection with exercise of official authority, that is to say in such activities where the authorities decide on an individual’s obligations or on intervention in an individual's freedom or property, in Sweden, the provisions of the Administrative Procedure Act apply. Paragraph 8 of the Administrative Procedure Act states that: "When an authority is dealing with someone who does not understand Swedish or who has a severe hearing or speech impediment, the authority should engage an interpreter". However, this provision does not give people with disabilities sufficient entitlement to have access to information.

One man requested to have his sentence from the county administrative court recorded onto cassette. The county administrative court checked with the National Courts Administration and subsequently informed the man that they had no obligation to offer this alternative. The man reported the matter to the Disability Ombudsman who had received several similar reports.

The members of the Swedish national association, Attention, have neuropsychiatric disabilities and are often double diagnosed (their members are a high risk group for deprivation of liberty). Attention has noted that it is common that people with neuropsychiatric disabilities frequently do not receive information as to why they have been deprived of their liberty in a language they understand.

The Swedish disability movement would like to emphasise that legal security for persons with disabilities is being jeopardized when they are impeded from accessing information that concerns them. As people take in information in different ways, when necessary printed information must be prepared in different formats, for example recorded onto cassette or in Braille. Established methods for how information can be conveyed are available and must be used.

The Swedish Disability Federation considers that:
- People with disabilities must receive information on why they have been deprived of their liberty in a language they understand and in such a way that they can take in the information.
- At the same time, groups of personnel within the prison service must be made aware of how information is conveyed in an accessible manner.
3. Legal proceedings within a reasonable time  
(concerning point 3 in the article)  
The Swedish disability movement does not have a point of view on how this right is observed in Sweden.

4. The legality of deprivation of liberty  
(concerning point 4 in the article)  
It is possible to appeal the county administrative court’s decision on compulsory care at the administrative court of appeal. Requests can also be made at the county administrative court that forensic psychiatric care shall cease or for permission for leave of absence outside the care institution. The Swedish disability movement does not have a point of view on the law’s provisions with regard to reconsideration of the legality in cases of deprivation of freedom. One circumstance that must however be elucidated and remedied concerns the impartiality and independence of judges who deal with cases of deprivation of liberty for the purpose of care. It is very important that the judge considers what is best for the patient, and does not simply follow the medical report. Two researchers, the sociologist Johan Svensson in Stockholm and the communication researcher Stefan Sjöström in Umeå, have examined psychiatric cases in the county administrative courts. Both of them observe that it is extremely rare that the court decides against medical opinion. Both point out that the court often presuppose that which they have to take a position on, namely the patient’s mental illness. It becomes a catch 22 situation; if the patient accepts that she is ill then she is ill, if she says the opposite then it is interpreted as a lack of insight into the illness, says Stefan Sjöström.

The Swedish Disability Federation considers that:  
- Judges who preside over cases concerning compulsory care must have the necessary knowledge about different mental disabilities so that these can be put in relation to the individual’s circumstances and overall living situation.

5. Damages for incorrect deprivation of liberty  
(concerning point 5 in the article)  
"The Act concerning damages for restriction of liberty and other coercive measures" (1998:714) regulates the possibilities for damages for incorrect deprivation of liberty. The Swedish disability movement does not have a point of view on how this right is observed in Sweden.

Conclusions and recommendations  
The information in this section shows that people are at a substantially greater risk of being deprived of their liberty if they do not receive adequate care. The fact that existing care methods are not used sufficiently, and that the planned psychiatric reform has still not been implemented as planned, contributes to the fact that many people are unnecessarily deprived of their freedom.
The Swedish disability movement is absolutely convinced that the cases in which people have to be deprived of their liberty due to not receiving the care, rehabilitation, support and service they need, is a direct violation of article 9.

With the point of departure in the UN’s standard rules 2, 3, 4 and 5, the Declaration on the Rights of Mentally Retarded Persons, and also in the Declaration on the Rights of Disabled Persons, we submit the recommendations below.

The Swedish Disability Federation recommends the Swedish state to:

- Implement the proposal of the committee of mental responsibility on "closed accommodation for certain people with disabilities".

- Ensure that the psychiatric reform is fully implemented so that girls, boys, women and men with mental illnesses and disabilities receive adequate care, habilitation, rehabilitation and support so that unnecessary deprivation of liberty does not need to take place.

- Ensure that judges who preside over cases concerning compulsory care have the necessary knowledge about different mental disabilities so that these can be put in relation to the individual’s circumstances and overall living situation. The judge must consider what is best for the "patient", and not simply follow the medical report.

- Review, clarify and reinforce the existing laws so that individuals with disabilities are guaranteed the right to be informed of the reasons for their arrest. Both written and verbal information in alternative formats or via an interpreter must be available.
Article 10 – Treatment and rehabilitation while deprived of liberty

All points in article 10 are dealt with in this section, including the part in point 3 that concerns the fact that juvenile offenders who are sentenced for crimes shall be kept apart from adults. The reason is that the Swedish disability movement feels that the Swedish state must consider lifting the reservation. The rules and regulations that constituted the basis for the reservation are not being observed.

1. Treatment of detainees (concerning point 1 in the article)
Article 9 deal with the extent to which deprivation of liberty takes place in Sweden. The disabilities organisations have also described therein the increased criminal tendency among certain groups of people with disabilities, and also emphasised that the correct treatment of people with conditions including neuropsychiatric and mental disabilities can lead to fewer people being deprived of their liberty. The continuously inadequate treatment of the particularly vulnerable groups detailed in article 9 unfortunately also remains during the actual detention. This is described in the section below.

One of the major problems within the framework of the systems wherein people are deprived of their liberty is that disabilities are often not attended to. In its turn this leads to people within different correctional facilities or within compulsory care not being treated in a dignified manner by either the other prisoners or by the personnel. The lack of knowledge about individuals’ disabilities also leads to them not receiving adequate and necessary treatment.

Detained offenders with neuropsychiatric disabilities
With regard to treatment of prisoners with neuropsychiatric disabilities, it is of great importance that these offenders receive individually adapted treatment and rehabilitation. Attention, the Swedish national association for people with neuropsychiatric disabilities, feels that it is usually only the antisocial personality disorders, "incurable" psychopaths or addicts who receive attention, while the functional impairment ADHD is disregarded. Addiction treatment that is conducted within the Prison Service still makes no attempt to meet the needs that people with neuropsychiatric disabilities have.

Detained offenders with intellectual disabilities
It emerged in the government report, SOU 2002:3 that one of the problems within the Prison Service is that it is not always noticed that inmates have a intellectual disability. This is partly due to a lack of knowledge, partly that some people with intellectual disabilities try to conceal their disability. The committee that compiled the report considers that there is much to indicate that the group with intellectual disabilities within the prison system is larger than had previously been believed.

The committee states that: "Neither within current correctional treatment nor in forensic psychiatry are there sufficient resources to provide the necessary help in these respects. Nor is the environment within correctional treatment and forensic psychiatry adapted to the needs of people with intellectual disabilities.
The National Society for Persons with Intellectual Disability, FUB, considers major problem in connection with depriving people with intellectual disabilities of their liberty is also the lack of knowledge about disability among both the police, the judicial system and within the Prison Service.

A study was carried out in 2005 detailing the experiences a number of prison psychologists had had of people with intellectual disabilities who are sentenced to prison. The study is extremely limited, but it can nevertheless be seen as an indication of what the situation is like for these detainees. One of many questions that were put to the psychologists was whether there were any special problems surrounding the group of detainees with intellectual disabilities. The responses show that the inmates risk being exploited in the institutions. Inmates with intellectual disabilities can be more easily manipulated into assisting the criminal activities that take place inside institutions. For example, an inmate might be promised a reward by other prisoners if he takes part in smuggling. The above mentioned SOU displays similar results and also describes the fact that this exploitation sometimes leads to the person relapsing into crime and thus being detained again.

In one case the psychologist and staff said that, in their judgement, the person in question was functioning at the level of a child. For example, purely intellectually he is not able to take part in the behavioural science therapy in prison. The inmate functions at a very concrete level and sticks to certain principles, irrespective of what it involves. He usually does what he is told to do, such as owning up to crimes he did not commit. The report also shows that many of the “backward” individuals are also bullied and alone without understanding why. Within prison establishments there are a lot of unspoken rules that people with intellectual disabilities often find it difficult to understand.

Detained offenders with visual, hearing and mobility disabilities
Contact with the National Prisons and Probation Administration revealed that there are people with visual, hearing and mobility impairments within the correctional facilities, but that there are no statistics on this. There is no information on how common it is that people have some form of disability beside those that are mentioned in the section above.

In communication No. 616/ 1995, Hamilton v. Jamaica, (treatment of detained persons with humanity) to disabled prisoners, the committee states that inadequate accessibility is to be considered inhumane. The answer to the question of whether the correctional facilities can be deemed to be accessible was that physical accessibility is taken into account in connection with new building and extensions and that the institutions always try to meet the individual person’s needs. Whether institutions are physically accessible is therefore extremely unclear. Some of the Swedish Disability Federation’s member organisations have however heard from people with disabilities who have experiences of detention. Some of them bear witness to the fact that they have not been able to serve their sentence or be remanded in custody due to inadequate accessibility in premises. Others describe their perception of being ridiculed by the police and care personnel. One person describes how the police did not believe that he had committed the crime, and that this was due to the fact that the person in question had a disability.
Conversations with the National Prisons and Probation Administration’s coordinator for basic training within correctional facilities reveals that the courses include issues of treatment of both people with mental disabilities and people with neuropsychiatric disabilities and in particular ADHD. There is, however, no aspect of the basic training that deals with treatment of people with, for example visual, hearing or mobility impairments. It appears however that neither was such information asked for by personnel within the correctional facilities.

It is worth noting that several organisations of people with disabilities consider that there is a lack of knowledge among both the police and within the Prison Service as to how they should treat people with various disabilities.

**Women in institutions**
Approximately 6 percent of people who are taken into custody and placed in institutions within the framework of the Prison Service are women. It seems however that there are no figures as to how many of these women have disabilities. However, through the Swedish Disability Federation’s member organisations we do know that there are female offenders who have disabilities. Our aim is to contribute to the human treatment of all women, regardless of functional condition, and we have therefore chosen to give an account of the information that is available.

There are 58 institutions in Sweden and of these five are for women. According to a study of women in institutions, women experience parts of their stay in prison as being very inhumane. The cell doors in the Hinseberg women’s prison are locked at eight in the evening. If an inmate has to go to the toilet the guards have to be summoned. One inmate recounts the following: “The door to the cell is closed at eight ‘o clock. Sometimes it takes such a long time for the guards to come that people wet themselves, or worse.” When it comes to the way the staff treat the women, the perception of the majority of the women is that: “The staff often talk to us as if we were children in a day nursery. We are adult women and want to be treated as such.” During the interviews with the women it emerged however that there were a number of both inexperienced and experienced guards who displayed clear ambitions to provide treatment and a positive attitude. The problem is that according to the women these people become overworked and some quit. “Those who are willing to help us are overworked as all the inmates seek them out. After a while they quit as they can’t cope and get no support from other more experienced staff.”

In the Swedish National Audit Office’s (2003) review it emerged that there is a relatively high turnover of personnel within institutional care. However, there was no discussion in the review of explanations for the turnover in staff.

**Treatment within compulsory care**
With regard to compulsory care, there are circumstances that were partially dealt with in article 9 as well as in the text above. To sum up, it can be said that within both care of young people and addicts, different disabilities are not always taken into account. In its turn this leads to people within compulsory care not receiving adequate care and treatment.

Patients who are treated within compulsory psychiatric care receive treatment in the same place as people who are receiving forensic psychiatric care. Patients who have not committed a crime are mixed with patients who have committed a crime.
The view of organisations of people with disabilities is that those who haven’t been sentenced should be kept apart from those who have been sentenced, and that compulsory psychiatric care should be available in close connection to non-institutional care.

The Swedish Disability Federation considers that:

- The current failure to take disabilities into account in people who are deprived of their liberty must be considered as inhumane treatment!
- With the aim of detecting and preventing disparities, facts about any disabilities among detained women and men must be produced.
- Personnel within the police, the judicial system and the prison service must have more knowledge on how people with disabilities should be treated, and on the different possibilities, needs and preconditions different disabilities can entail. Training courses must be developed in cooperation with the Swedish disability movement.
- The Prison Service’s responsibility to attend to individuals’ needs must be regulated in law.
- In its current state, the sanction of prison is not appropriate for people with intellectual disabilities. The proposed sanction of “closed accommodation centres” (see article 9) provides people with intellectual disabilities with considerably better conditions in which to serve their sentence under humane conditions as well as the possibility of being rehabilitated into society.
- All people should have equal rights and responsibilities. This means that it should also be possible to make people with disabilities responsible for their actions, which includes being arrested, detained, taken into custody and sentenced for crimes they have committed. Places for detention must therefore be made accessible for all people. Accessibility refers here to the standard rules’ definition.
- An overview of accessibility in the country’s detention centres and prisons must be carried out.
- People within compulsory psychiatric care should be kept apart from people who are receiving forensic psychiatric care. Forms of care for the two groups are different and must take place in different establishments.

2. Accused persons should be kept separate
   (concerning point 2 in the article )

The disability movement does not have a point of view on how Sweden lives up to the provisions in article 10 point 2 of the UN’s covenant.

3. Treatment, improvement and rehabilitation into society
   (concerning point 3 in the article )

According to “the Prison Treatment Act” the detainee shall be given the opportunity to work, tuition, education and job training. Specially arranged activities with the aim of combating crime or addiction and which improve the prospects of the inmates conforming to society after release. The Swedish Disability Federation can unfortunately state that relapse into criminality is very common. Among the inmates
who have ADHD, 81 percent relapse into criminality. The report on the situation for women in institutions shows among other things that 43 percent of the women were recidivists. The tendency to relapse is highest among women who are sentenced for theft, who have previously been in prison, have been released from a medium length prison sentence and are between 25 and 44 years old. This group shows a relapse rate of 81 percent. Another group with a high relapse rate is women who are sentenced for narcotics offences and who had previously been in prison (79 percent).

**Education within the correctional facilities**

In recent years the Prison Service has been assigned by the government to reinforce the elements of basic, practical and theoretical education so that inmates who need it can be offered GSCEs and A-levels. Despite these clearly ambitious signals, the correctional facilities have not been able to increase their educational activities. Against the background of the fact that a large number of inmates in the correctional facilities have disabilities, it is very important that the Prison Service can offer flexible education.

According to "The Prison and Probation Service’s Official Statistics 1999" only about 15 percent of the clients were studying. The clients’ educational needs are very varied. From very basic needs to a requirement for specialised skills development. The report "Studying in prison" sets out that people who are in prison often have a poor experience of their own time at school and thereby also inadequate schooling. For example, many of the inmates state that they are not able to spell. The reasons for them not completing their basic education varies. However it should be added here that the proportion of people with dyslexia/ reading and writing difficulties in prisons appears not to be different than the proportion of people outside the institutions.

The National Board of Health and Welfare’s report shows that it has become harder to get a good overview of education within the prison establishments due to the fact that increasing numbers of education coordinators have been contracted in accordance with the Public Procurement Act. Possibilities for continuity in studies have changed, at the same time as there has been a decrease in the number of internal educational managers. Clients who are moved while they are engaged in learning to read and write often experience problems in the new establishment due to a lack of continuity between the institutions.

The clients in many institutions feel that there is an almost destructive environment when it comes to studying. They feel that it is due to the fact that neither the other clients nor the guards are interested in studying. Allowing the clients to pursue independent studies is tantamount to leaving them to their fate in this environment. One client describes how he is trying, more or less on his own, to study Spanish. Studying a foreign language on your own is however very demanding. People who have been inside institutions that have study departments describe this system with great enthusiasm. The teachers in the Prison Service do not however have the right to give the clients formal certificates. They can only get a certificate by contacting a study organisation outside the prison.
Many students, in particularly increasing numbers of younger men, are at upper secondary school- or university level and for them leave of absence can have crucial significance for their education. At present, with the restrictive policy on leave of absence, they can be forced to choose between meeting their family or doing exams, going on study visits, taking part in seminars or lectures.

Rehabilitation of female inmates
At "Båtshagen", the open department that is part of Hinseberg women’s prison, there is a sewing workshop where the women do work such as making bibs and other simple needlework.

The staff describe the job training as an important part of the inmates’ rehabilitation. They feel that many of the inmates are not used to getting up in the morning and do not have the perseverance to work for a full day. According to the staff, the women therefore have to be trained in being able to handle simple tasks. However, in response to the question of whether the women consider that the tasks at Hinseberg prepare them for a life outside prison, 52 out of 56 women feel that the work has no rehabilitating effect in the sense that it prepares them for life outside. Examples of the comments that were expressed are as follows: "The work here does not have much in common with reality. I would like to have the opportunity for a qualitative occupation with a therapeutic purpose as the usual activities feel meaningless." "I would shut down the cottage industry and throw all the shoelaces in the lake. People get occupational injuries, wrists and backs are regularly damaged." 

Rehabilitation into society
Despite the fact that several reports stress the importance of starting to plan for release at an early stage, a large number of inmates feel that the planning started too late and did not work. One report follows up a group of clients who were given conditional release from prison. The aim was to examine what their situation was like after release and what help they received to enable them to become rehabilitated into society. The survey group consisted of 95 persons, four of whom were women. At the time of release barely 20 percent had their own accommodation. After six months the situation had improved somewhat as 40 percent had their own accommodation. Only one in five had employment or a permanent job and after six months social benefits were the most common source of income. Two thirds stated that they had addiction problems both before being released and after six months. The probation service was to a large extent absent in the process of improving their clients’ network of social contacts. The results showed few improvements after six months with regard to degree of employment, financial situation and health.

Of the women who participated in the "Women in institutions" study and who had been in prison previously (26), 6 women responded that the planning had been poor and 14 that it had been very poor. For example, several women bear witness to the fact that when they were released they had nowhere to go. When the women at Hinseberg are asked why they relapsed, they answer: "You go back to what you feel safe with. I believe that if I had received support from the authorities, a job, perhaps it would have worked out".
Young people in prison

Swedish has reserved the right to not apply article 10 point 3 in so far as it refers to the requirement that juvenile offenders are to be kept apart from adults. Against the background of the fact that the rules and regulations that comprise the basis for the reservation are not observed in Sweden, the Swedish disability movement considers that the Swedish state must consider lifting the reservation. The reason for the reservation is set out in the bill 1971:125:

"The provisions of the covenant have a very limited application in Swedish circumstances as according to chap. 26, para. 4 of the penal code, juveniles under 18 years old are not sentenced to prison unless there are exceptional reasons for doing so. Restrictive use of prison sentencing is also prescribed for those who are 18 but not 21 years of age. According to para. 25 of the (1964: 541) Prison Treatment Act, it furthermore applies that in terms of allocation and treatment of inmates, account shall be taken to factors including age. Nevertheless, can it ever be compatible with the interests of a young offender that he is put in prison together with older offenders? In any case, should not an undertaking in this covenant commit itself to refraining from applying the sort of criminological treatment methods that result in young and old offenders being mixed with each other. A Swedish proviso on this point would therefore seem to be justified".

The provision in para. 8 of the "Act (1974:203) on correctional treatment in institutions" stipulates that: "An inmate who is eighteen but not twenty one years old shall, unless special reasons indicate otherwise, be kept apart from such inmates who can have an injurious effect on his assimilation into society".

"Those who have are not twenty one years old and who are not put into an open institution shall preferably be placed in an institution with a special regime for younger inmates"

A survey in January 2001 regarding the number of inmates under 21 years of age indicated that there were 217 inmates in prison and 19 awaiting sentence in detention. A comparison of the number of inmates under 21 years of age in prison on 1 October 1999 and the number on 1 October 2000 shows that the number increased by almost 30 percent.

A survey in November 2000 revealed that inmates under 21 years old were placed in 44 different institutions. As an additional element in the analysis of the current situation, visits were made to 17 institutions and five prisons. The analysis of the current situation shows that only one institution and one prison have special departments with special regimes for inmates who are under 21. The Prison Agency that carried out the study "Young men in prison" summarises the prevailing situation as follows: "What can be interpreted from this is that directing young detainees to special closed institutions is not working, and not all institutions that have special places for young people have a special regime aimed at the target group".

The report sets out that what both institutions and prisons have in common is a lack of resources for initiatives for young people. Another problem that has been noted is that at the institutions and prisons visited it is hard to differentiate young people from other inmates purely in terms of premises.
As set out in article 9, it is common that young people who are deprived of their liberty have neuropsychiatric disabilities. The Prison Services’ report “Young men in institutions and prisons (2001)” describes how young people with mental or neuropsychiatric disabilities do very badly in a prison environment. The fact that introverts are mixed with extroverts and that personnel within the Prison Service do not often have knowledge about which needs and conditions people with different neuropsychiatric disabilities have, makes the situation more difficult.

The Swedish Disability Federation considers that:

- The country’s prisons must fully comply with the act on correctional treatment in institutions.
- The country’s prisons must improve the opportunities for inmates to receive basic education.
- It is necessary to create smaller departments with a well structured regime, timetabled activities, a calm and safe environment, distinct boundaries and resources that facilitate a high degree of staff participation and use of specialists. This requires a high degree of continuity in the staff group, who must work in a structured manner with clear instructions to the inmates and a supportive attitude where encouragement is given in order to boost the self-esteem of the inmates.
- To ensure that the courses have an effective outcome and are of benefit to the individual, it is important that all institutions cooperate with the study organisation and, for example, Komvux. Aspects of social care are also required to achieve the subject goals.
- In connection with detention, an individual plan must be drawn up of what treatment the individual is to receive. Within the framework of producing such a plan, the causative connections that led to the detention must be examined to enable adequate care and treatment to be given. The plan must also be implemented.
- The Prison Service must develop a considerably better system in connection with release of inmates.
- Before release the Prison Service must give detained offenders with disabilities information on the support that society can give, as well as on which bodies can provide support for people with disabilities.
- The government must institute vigorous measures so that young people in prison receive the care and support they need to enable re-assimilation into society.
- Young offenders, regardless of the form of sanction must be offered a psychiatric assessment.
- All those who come into professional contact with young offenders must receive training in the neuropsychiatric disabilities. Development of interdisciplinary knowledge must be encouraged.
- In order to reduce the risk of relapse into severe mental illness, there must be functioning transitions between different care initiatives.
- The government should consider lifting the reservation in article 10 point 3.
Conclusions and recommendations
The information in this section shows that there are still major shortcomings in Swedish compulsory- and correctional treatment. A major problem is that disabilities are not attended to/treated sufficiently to enable girls, boys, women and men to be fully reintegrated into society. In relation to article 10, the human rights committee has stated in its concluding observation from 24 April 2002 that: Sweden should also guarantee better training in human rights for police personnel. The Swedish disability movement would like to emphasise here that the disability perspective must be present within the framework of such training. Finally, the information shows that the rules and regulations that constituted the basis of Sweden’s reservation in point 3 are not being followed. And also that young people with mental and neuropsychiatric disabilities in prison are having a hard time.

With the UN’s standard rules 1, 2 and 3 and 5 as the point of departure, the Swedish disability movement offers the below recommendations.

The Swedish Disability Federation recommends the Swedish state to:

- Ensure that the Prison Service’s responsibility for attending to the needs of individual girls, boys, women and men are regulated in legislation.
- Ensure that personnel within the police, the judicial system and the prison service are aware of how to treat girls, boys, women and men with disabilities. And also of the different opportunities, needs and conditions that different disabilities can entail.
- Take necessary measures to make places for detention accessible for all people.
- Ensure that girls, boys, women and men within compulsory psychiatric care and all people who receive forensic psychiatric care are kept separate. The forms of care for the two groups are different and must take place in different establishments.
- Take vigorous measures to ensure that girls, boys, women and men who have been deprived of their liberty receive the treatment they need to be able to return to and become reintegrated into society after being in custody. The treatment must be adequate and individually adapted.
- Ensure that the country’s prisons fully comply with the law on correctional treatment in institutions.
- Consider lifting the reservation in article 10 point 3.
Article 12 - Freedom of movement

The point of departure for the description of how Sweden lives up to the right in this article is that people with disabilities shall have the same rights and opportunities as people without disabilities to move freely and change place of residence. In Sweden there are no direct legislative writs stating that people with disabilities should not be able to move freely in the country or freely select place of residence, however there are a number of obstacles, both practical and due to legislation, to these rights being afforded to all people in Sweden in practice.

1. The right to move freely and the right to select place of residence (concerning point 1 in the article)

The right to move freely in the country

For people with disabilities to have an equal opportunity to move freely, certain conditions must be fulfilled:

- Means of transport must be accessible.
- The physical environment must be accessible.

Under both these points, accessibility is understood by reference to the UN's standard rule 5.

The national action plan for disability policy stipulates that public environments and public means of transport must be accessible before 2010. The history of disability policy is full of objectives that have not been met, and high targets that have not been achieved. At present there is a general indication that the goals in the national action plan – that Sweden must be accessible by 2010 – will not be accomplished either.

Accessible means of transport

Since 2002, the National Public Transport Agency, the Traffic Administration and the National Board of Housing, Building and Planning have been carrying out annual surveys of the possibilities for people with disabilities to make use of the transportation system. The results of the survey applying to 2004 show, as does the previous survey (2003) that a lot of people with disabilities regularly use public transport in the form of buses and trams, but also that the majority state that they are not able to travel using these means of transport. It applies in particular to people with mobility and visual impairments with more than one disability. In comparison with the results from 2003, there are more people with visual impairments who state that they have difficulties in travelling. It is also people with visual impairments who in 2004 state that they have the most difficulty in travelling by both train, plane and boat. The deterioration is greatest in the case of boats. Only 73 percent of those who have visual impairments state that they are able to travel by boat with or without problems. This should be compared with the corresponding proportion in 2003, which was 93 percent. The Swedish Association of the Hard of Hearing emphasises the lack of textual displays/visual information in public transport, at stations, airports etc. This applies to both general information such as stops, departure times, and to messages about delays and change of trains. Not being able to get access to such information makes travelling more difficult, and in some cases, impossible.

The National Public Transport Agency’s assessment of the possibilities of achieving the 2010 interim target is that until then accessibility cannot be satisfactory within the
public transport system. The National Public Transport Agency estimates that the prerequisites are in place to accomplish satisfactory accessibility to common functions for all kinds of transportation such as information, ticket- and booking systems and a well functioning personal service and coordination between different parties within the transport sector. Whether the goal can be met in these respects is however primarily an organisational question that requires general transportation coordination. However, the National Public Transport Agency considers it to be highly doubtful whether this can be achieved solely on voluntary grounds. To some extent this may require compulsory measures or control instruments to achieve an arrangement that is of sufficiently high quality and that is sustainable over time.

The physical environment

For people with disabilities to be able to move freely in the country but also to be able to get to and from the means of transport, streets, public places and premises, including train stations, must be accessible. In Sweden there is an obligation according to the Planning and Building Act to remove easily rectified obstacles in public places and in public premises. The National Board of Housing, Building and Planning’s analysis of easily rectified obstacles from 2005 shows that:

- 68 percent of all landlords are not aware of the regulations or have only heard about them.
- 37 percent of municipal, county council and government landlords are not aware of the regulations or have only heard about them.
- Of those who are to some degree aware of the regulations, there is a further 28 percent who do not know whether they have obstacles of the kind indicated.
- 35 percent of all landlords who responded to the National Board of Housing, Building and Planning’s questionnaire and a total of 17 of 20 municipalities that the National Board of Housing, Building and Planning interviewed do not think, or do not know whether, they will have time to implement the necessary measures by 2010.
- Only 5 percent of the landlords who have, or are uncertain whether they have, public premises or public land have thus far rectified any obstacles.

With regard to new constructions and extensions, "The Act (1994:847) on Technical Requirements for Construction Works" lays down that such constructions must be made accessible for people with disabilities. The Swedish disability movement can unfortunately give many instances of non-compliance with this law. Among these examples is Hammarby seaport and the Clarion hotel.

An additional circumstance that should be noted here is the increasing presence of non-ionized radiation. The Swedish disability movement largely welcomes the technical development but would like to emphasise the importance of taking into account the varied health of people. The current development and trend that more and more electronic and technical products are becoming cordless, is making the situation more difficult for people who are hypersensitive to electromagnetic fields. The development of the cordless society is making it more difficult for those who have electromagnetic hypersensitivity to utilise their freedom of movement as well as the right to freely select place of residence.
The Swedish Disability Federation considers that:

- Measures must be put in place as soon as possible to achieve the disability policy goals of accessible means of transport so that people with disabilities are provided with the same opportunities as people without disabilities to enjoy their right to move freely.

- The National Board of Housing, Building and Planning must institute substantial measures to enable the provisions of the Planning and Building Act on the removal of easily remedied obstacles to be observed.

- Easily remedied obstacles where the general public have access and in existing public places must be rectified before the end of 2010.


- An action plan that encompasses the entire transport sector with respect to public transport must be established and followed. One such action plan must cover planned initiatives, resources and a timetable for its implementation in conformity with the action plan that the National Rail Administration drew up for its internal operation. The action plan should have the support of the respective traffic authority’s management. The action plan must also contain plans for following-up.

- The primary consideration must always be the living environment/people’s health. The Environmental Code’s paragraphs and precautionary principles shall be observed by all, including the authorities.

Changing place of residence

In its general comment no. 27, The Human Rights Committee, HRC states that: "6. The State party must ensure that the rights guaranteed in article 12 are protected not only from public but also from private interference. "The committee continues: "In the case of women, this obligation to protect is particularly pertinent. For example, it is incompatible with article 12, paragraph 1, that the right of a woman to move freely and to choose her residence be made subject, by law or practice, to the decision of another person, including a relative".

Prerequisites for changing place of residence

For people with disabilities to be able to enjoy their freedom of movement, including their rights to freely select place of residence, the individual must be able to obtain support from society in the new location that is of at least equal quality. The type of support that the individual can receive is usually decided by the municipality, that is to say by someone else.

The Swedish Disability Federation is aware that parts of the support that is needed to enable people with disabilities to live an independent life, to enjoy their human rights and to participate on equal terms are covered by economic, social and cultural rights, including the right to satisfactory housing. In these cases, the so-called indivisibility principle is highly relevant. For people with disabilities, economic, social and cultural rights are sometimes an absolute prerequisite to enable their civil and political rights to function.
With regard to support and service including mobility aids and assistance, these are described in the UN’s standard rules. It should be emphasised here that the UN has stated that: “any violation of the fundamental principle of equality or any discrimination or other negative differential treatment of persons with disabilities inconsistent with the United Nations Standard Rules is an infringement of the human rights of persons with disabilities”. The standard rules set out that increased awareness, medical care, rehabilitation and support and service constitute the prerequisites for enabling people with disabilities to participate on equal terms and to utilize their human rights, including their freedom of movement.

The disability movement in Sweden considers there to be deficiencies in the laws that regulate the support that girls, boys, women and men with disabilities need to be able to move freely in the country or change place of residence in the same way as people without disabilities. These deficiencies are described in point 3 below.

Another factor that must be noted here is that some municipalities use housing solutions that are based on disabled persons having to move to other forms of accommodation on the basis of their current functional level. A so-called housing chain model. The Swedish disability movement has not been able to find any overall national statistics on this. However, we are aware of a large number of cases where people are compulsorily transferred from their residence on account of their disability. One phenomenon in the big cities is that people who receive assistance due to their mental disability are not able to select their housing. On many occasions individuals have to accept a residence outside of their own municipality or county. 40 percent of these people (in Stockholm) were residing outside the county in 2001-2002. Being forced to move is an example of an administrative attitude to people’s housing and the freedom to personally select one’s place of residence being disregarded.

Inadequate accessibility in many housing areas
As an element in the issue of adequate housing mentioned above, it must be emphasised here that a precondition for enabling people with disabilities to change place of residence is that there are accessible housing areas. The inadequacy of accessibility is a major problem for people with disabilities in Sweden and must be rectified. The National Board of Housing, Building and Planning’s report: "Modifications for sustainable development in different housing environments” from 2005, sets out that there are shortcomings in terms of accessibility in all the housing environments that were surveyed. The National Board of Housing, Building and Planning is of the opinion that state support is needed to increase accessibility for the aged and for people with disabilities in the older sections of the housing stock. The National Board of Housing, Building and Planning also emphasises that "The municipalities’ preconditions for tackling the increased requirements placed on the provision of housing and urban renewal needs to be reviewed."

The Swedish disability movement would like to stress that it can not be solely the house building companies that have to deal with increased accessibility in existing housing areas. It must take place in collaboration with various parties such as the housing companies, the town planning offices, local transport companies, local businessmen, tenants’ associations and disability organisations and parties such as small-scale traders and landlords. A common effort is needed on all levels in accordance with a common action plan.
The Swedish Disability Federation considers that:

- Adequate support, service, care and rehabilitation is an absolute precondition to enable people with disabilities to have equal opportunities to profit from their rights according to article 12 in the covenant on civil and political rights. The Swedish disability movement would like to refer here to the UN’s standard rules 1, 2, 3 and 4, and also to underline the importance of the recommendations in articles 11 and 12 in the Swedish disability movement’s alternative report on economic, social and cultural rights being implemented.

- A common action plan for all parties that are involved in housing, construction, streets, squares and transportation must be formulated. Such an action plan must encompass planned initiatives, resources and a timetable for implementation.

2. The freedom to leave the country
(concerning point 2 in the article)

Under Swedish law there is no direct ban on people with disabilities leaving Sweden, however the practical possibilities are often limited. Under this point, the Swedish disability movement’s point of departure is also that people with disabilities must be given the same opportunities to exercise their rights as people without disabilities. For people who are in need of an assistant, interpreter or guide, the opportunities are extremely limited.

The organisations of people with disabilities’ experience is that it is difficult to get support if you are covered by "the Social Services Act" (SoL) and "the Act on support and service"(LSS). SoL only gives the right to reasonable circumstances, while LSS gives the right to satisfactory living conditions. In other words, it is easier according to LSS, however, the decisions are taken by the municipalities and they have a range of practices. There are better opportunities when it comes to "the Personal Assistance Act" (LASS), but here the employer also plays a role. If the employer is the municipality it is more difficult. If you employ yourself there are better options.

In the legal case RÅ 2003 ref. 79 the Supreme Administrative Court lays down that when assessing whether a person is in need of a contribution towards his/her way of life according to LSS, a comparison must be made with the way of life that can be deemed normal for people of the same age. Consideration shall also be taken to whether the individual has previously (the same year or the year previously) been awarded support for foreign travel. The National Board of Health and Welfare, which has been requested by the Supreme Administrative Court to express an opinion on the matter, states that it must be considered "to be part of a normal way of life to go on holidays abroad." "People without disabilities can select where they wish to spend their holidays themselves and can travel abroad if they have the financial wherewithal to do so." "The National Board of Health and Welfare wishes to emphasise that great importance shall be placed on the person’s own wishes in the formulation of the contributions according to paragraph 6 of LSS. A.H. has personally saved the money to make this trip together with his friends. It would therefore be unreasonable with respect to the goals of LSS if he was not to be able to undertake a trip to Denmark."
If the companion service cannot be granted for trips abroad, it means that people with disabilities do not have the same opportunities to live as others do. To restrict the companion service to solely encompassing activities in the local environment conflicts, in the opinion of the National Board of Health and Welfare, with LSS’s aim that people with extensive disabilities shall be given the opportunity to live as others do."

The Supreme Administrative Court laid down that A.H. should be granted support to undertake a trip abroad.

**Interpreters**

To enable people who are deaf, deaf-blind or severely hard of hearing to travel abroad requires in most cases a sign-language interpreter in order to undertake the journey. In Sweden it is the Interpreters Centre in each county council that is responsible for the interpreting service within the framework of "the Health Care Act" (HSL). The interpreter centres do not offer any interpreting service for foreign travel of a private character such as charter travel for individuals, couples or a number of deaf people in a group. Special exemptions can occur in certain county councils, but it then depends on the generosity of the manager of the centre and bending the rules. The experience of the Swedish National Association of the Deaf is that the funds that are set aside for interpreting services are extremely limited, and the county councils are constantly forced to make savings.

Below are some illustrative examples of when deaf people have not had the same opportunity to leave the country as people who can hear. In the first case the user had participated in a study circle on the nation of Israel, Israel’s history and religion. The study group planned to make a trip to Israel. The user’s application for an interpreter from the interpreters centre in Västernorrland was rejected. The manager stated that the reason for the refusal was the lack of financial resources and that interpreting resources in Västernorrland were insufficient to be able to offer a service that was outside HSL’s parameters.

In 2005 the Deaf Church in West Sweden planned to make a group journey to Norway. The purpose of the trip was to make a study visit to homes designed for elderly deaf people. The interpreters centre refused the booking for the trip to Norway.

To sum up, it can be said that users of interpreters have no legal rights to receive assistance in the form of interpreting. In many cases this means that trips have to be cancelled. In general, for all "disability groups" it is considerably easier to get support to be able to travel abroad if the trip is connected with work. For example, the Labour Market Administration reimburses interpreting expenses, travel costs, daily expenses allowance for county councils for interpreters who accompany the user on foreign business trips.
The Swedish Disability Federation considers that:
- We would like to underline the National Board of Health and Welfare’s pronouncement in the legal case RA 2003 ref. 79, but we consider that the court’s statement, despite a positive decision, unjustifiably restricts freedom of movement for people with disabilities compared with the possibilities for people who can travel independently of assistance, interpreters or companions. The individual’s living situation and financial circumstances must be the governing factors.

3. Shortcomings in the law (concerning point 3 in the article)
The “Act (1993:387) on support and service for certain functionally disabled persons” (LSS) and “the Act (1993:389) on assistance compensation” (LASS) came into effect in 1994. These acts are very important for people with disabilities, however the system for granting assistance is designed in a way that leads to legal uncertainty and restricts the right of individuals to select place of residence. According to LSS the municipalities must provide the services that people with disabilities are entitled to. The problem with this is that one and the same person can have his or her requirements for support and service dealt with differently by different municipalities. A person who has support according to LSS in one municipality but who wants to change place of residence cannot be certain to receive the same or even similar support from the new municipality. (The individual is however entitled to an advance decision).
The fear of losing necessary support or having it restricted contributes to people with disabilities not being able, or not daring to, freely select place of residence.

One of many examples is a survey that deals with experiences of people who are deaf-blind. Among other things the report shows that half of those who have been in contact with a municipality or Regional social insurance office concerning LSS or LASS feel that it was difficult to obtain help. Just over a third of people who receive assistance respond that they receive less assistance than they need. The report sets out that municipalities make different assessments. In several cases when deaf-blind people have moved between areas within a municipality a new assessment is made. It is then not unusual that the “new” officer makes a different assessment of the need than that which had previously been made.

The Swedish Disability Federation considers that:
- The government must review the provisions in the “Act (199:387) on support and service for certain functionally disabled people” or alternatively construct guidelines for how the act is to be interpreted so that individuals, regardless of which municipality they live in or want to move to are given an equal opportunity to freely select place of residence.

Conclusions and recommendations
The information in this section shows that people with disabilities are not given the same conditions as people without disabilities to exercise their rights to move freely, to freely select place of residence or to leave the country. The greatest obstacle consists of the fact that the physical environment and the means of transport are not or are not being made fully accessible for people with disabilities and where appropriate that the rights of individuals to freely select place of residence or to leave the country are sometimes restricted due to differences in municipal practice, will or
capacity to grant housing adaptation, support and service for people with disabilities. According to the Swedish disability movement’s alternative report on economic, social and cultural rights, it appears in addition that there are gender differences when support and service are granted. The Swedish disability movement would therefore like to particularly emphasise here that all people, regardless of gender and functional capacity must have an equal opportunity to exercise their rights according to article 12.

With the point of departure in the standard rules 4 and 5, the Swedish disability movement offers the following recommendations:

**The Swedish Disability Federation recommends the Swedish state to:**

- Ensure that an action plan that includes the entire transport sector with respect to an accessible public transport system is drawn up and followed.

- Adopt vigorous measures so that the provisions of the Planning and Building Act on easily remedied obstacles and the Act on Technical Requirements for Construction Work are followed.

- Ensure that the national environmental target “Safe radiation environment” is given high priority and is supplemented with an environmental quality standard that is based on the most sensitive people, that is to say those with electromagnetic hypersensitivity and those who are allergic to micro-organisms.

- Immediately allocate funds for interdisciplinary research and empirical surveys within the field of radiation, electromagnetic hypersensitivity, electricity, magnetic fields and health effects.

- The government must review the provisions in the “Act (199:387) on support and service for certain functionally disabled persons” or alternatively construct guidelines for how the act is to be interpreted so that individuals, regardless of which municipality they live in or want to move to are given an equal opportunity to fully utilise their freedom of movement.
Article 14 – Equality before the courts

Introduction
The Swedish disability movement chooses not to express an opinion on the purely "procedural" provisions in Sweden. The information in this section deals with the actual opportunities for all people to be equal before the courts. The sections of the article that are dealt with are points 1, 2 and 3. An account is also given of Sweden’s reservation concerning point 7.

The point of departure for the information in this section is that people with disabilities must have the same opportunities as people without disabilities to participate fully in the judicial process and thereby to be given full legal security. For this to be possible there must be functioning opportunities for communication. Further, everyone involved in the legal process must have adequate knowledge of what different disabilities can entail and how people with different disabilities are to be treated. Women, men, girls and boys with disabilities must not be subject to discrimination on any other grounds during the course of the proceedings. Furthermore, both the information, and the physical environment in courts and other locations for the judicial process must be accessible.

The point of departure for how the Swedish disability movement deals with this article is the UN’s standard rules 1 and 5.

1. Equality before the courts (concerning point 1 in the article)
Impartiality
As has previously been detailed in this report (in articles 9 and 10 ) but also throughout the Swedish disability movement’s alternative report on economic, social and cultural rights, awareness of the rights, opportunities and conditions that people with different disabilities have is highly inadequate within many areas of Swedish society. Lack of knowledge, negative attitudes and prejudices in judges, prosecutors, lawyers, the police and others within the judicial system entail a risk that impartiality cannot be maintained.

The "Survey of victims of sexual crime" reveals that in the experience of both the Disability Ombudsman and the organisations of people with disabilities there is a lack of understanding about disability and its consequences. This can lead to a decrease in credibility for the victim or the perpetrator of the crime. The report also sets out that no account is taken of the consequences entailed by different disabilities. Such as difficulties in sitting still for a longish period or the need for breaks to eat, take medicine or go to the toilet for example. The fact that people’s needs are not taken into account can lead to a decrease in the individual’s concentration, mental presence and possibility of describing what has happened. And thereby also the right to a fair trial.

According to the Disability Ombudsman, more knowledge is needed on whether a particular disability affects the subject’s perception of time and place or possibility of responding to questions and giving a coherent account. Increased knowledge is also needed to interrogate and communicate with people with different functional conditions.
Children and young people with disabilities

As presented in article 7 there, is a greater risk of children with disabilities being subjected to abuse. One study from 2004 examined how children with disabilities are treated in the legal process. The study reviews 41 cases at Swedish district courts where children with disabilities were the plaintiff. The majority of cases (33) involved sexual abuse and the majority of victims (27) were girls. The study shows that psychological or psychiatric experts have only been used in a small number of cases (13) to facilitate the investigation or the assessment of the child’s account. The majority of the expert opinion that there was, lacked special elucidation of the disability and any impact it might have had on the capacity to give an account. Nor did the court take any particular account of these children’s difficulties. The children were treated in the same way and according to the same model as children without disabilities. The investigator Ann-Kristin Cederborg observes that as most of these children have communication difficulties, it is even harder for them to provide a "reliable testimony". Furthermore, it appears that the courts often treat intellectual disabilities in the child as an aggravating circumstance. In several cases testimonies have been rejected by the court and the accused has been acquitted. These include cases in which leading questions were put to children under police interrogation despite the fact that in these cases there was no possibility of asking questions in any other way.

The legal case RH 1995:14 is also an illustrative example that disabilities in children give rise to special difficulties in connection with investigations and trials. In this case, a divorced father was sentenced for sexually abusing his 9 year old son over a 5 year period. Suspicion of the crime had emerged when the boy told the staff at his after-school centre about the different sexual acts he had performed with the father. The staff perceived the boy to be "extreme" in his behaviour. And the assumption could certainly be made that he was exaggerating due to minor brain damage, however on the basis of the boy’s account, and a police interrogation that was videoed, the father was sentenced. After sentencing, a professor in child psychiatry claimed that the boy had Tourette’s Syndrome and on the basis of this expert opinion the father requested a retrial. After a new trial in the court of appeal the father was acquitted. The case shows what judgements can be like when a person has intellectual disabilities. This disability can produce an over sexualised attitude, and accounts of sexual acts can be a manifestation of the compulsive need to express oneself in sexual terms. If the victim has Tourette’s syndrome, the disability results in it being extremely difficult to make the testimony a basis for a conviction. People with this syndrome therefore also become unprotected victims if and when they are subjected to abuse.

Women with disabilities

The fact that people with disabilities find themselves in a particularly disadvantageous position when it comes to investigations into sexual crimes also applies to women with disabilities. In several surveys, including Naiti del Sante’s review of rape reports in Uppsala (1999 -2002) and in Anastasia Swärd’s equivalent review in Stockholm City (2001 -2002). In the material from Stockholm there are a number of examples, including a woman who had reported being raped in both 2001 and 2002 by two different men. The woman is homeless and mentally ill. She finds it difficult to give a consistent account and changes her story. It transpired that she had reported a further twelve rapes since 1994 and the cases were dropped without further action. In the most recent case, despite the fact that she can identify the
perpetrator and has injuries to her genitals that indicate that she has been subject to "non-normal sexual intercourse".\textsuperscript{56}

In Jennie Dackmar's review of rape cases in Södertörn's police district (2003) there are also several cases where the investigation was closed due to the fact that the police were not able to assess the veracity of the woman's account. A woman who had minor learning difficulties and autism claimed to have been raped by her former boyfriend, but changed her story several times. Another woman, with a slight intellectual disability, reported that she had been raped at the psychiatric emergency department of a hospital by another patient. However, according to the staff at the hospital, if that had been the case there would have been witnesses. A third woman, with severe mental disability, reported that she had been raped on several occasions five years previously by a friend of her then boyfriend. All three cases were dropped. It was deemed to be impossible to clarify whether there had been any sexual activity between the parties involved, and therefore completely impossible to prove any crime. They didn't even take the trouble to question the suspect.

Rights-free zones
Article 7 outlines the problem of so-called "rights-free zones". The situation when a person with a disability commits a crime against another person who has a similar disability represents a particular problem, for example in sheltered housing. There is a tendency for the staff to have an indulgent or conciliatory attitude towards these crimes, that the actions are not perceived as a crime at all but as a manifestation of a pathology and a relationship problem. The person affected is thereby not recognised as a victim either.\textsuperscript{57}

If occasionally a prosecution does come about, there appears to be the same conciliatory attitude in the judicial system. A case from Örebro in 2003 represents an example of this problem. A deaf 17 year old was sentenced for raping a deaf female classmate (in a school for the deaf) of the same age, with whom he had previously had a relationship. The sentence was 40 hours youth service, which is uncommonly lenient, and it appears that there were not even any damages claimed for the aggrieved party.

Access to judgements
Point 1 in article 14 stipulates that judgements “pronounced in criminal cases or civil actions” shall be made public. The Swedish disability movement would like to emphasise that all people must have the same opportunities to acquaint themselves with the judgements. Article 9 in this report describes how people are refused access to judgements.

The Swedish Disability Federation considers that:
- The treatment of people with disabilities must be improved in a legal context. Personnel concerned should find out to what extent people with disabilities need special support and/or adaptation before and during the judicial process. Where necessary, it must be possible to obtain special support, available information and communication in connection with police questioning, investigations and legal proceedings.
The police and legal system should, together with the disability movement, develop information and training opportunities for personnel concerned. The training events should focus on treatment issues and the specific needs that the functionally impaired may have and how these needs should in purely practical terms be addressed during the judicial process.

The physical accessibility to courts and other locations for the judicial process must be reviewed. Shortcomings in accessibility must be remedied.

When necessary judgements must be produced in different formats, for example recorded onto a cassette, or in Braille. Current legislation must be reviewed and reinforced.

2. **Presumption of innocence** *(concerning point 2 in the article)*
The Swedish disability movement would like to strongly criticise the media’s way of dealing with suspected criminals. Further information will not be presented in this section.

3. **Minimum guarantees** *(concerning point 3 in the article)*
**Access to an interpreter**
People who have disabilities might need an interpreter or other technical solution, both to be able to report matters, but also to be able to participate fully in subsequent criminal investigations and the legal process.

As described in article 9, there are a number of provisions specifying when interpreters can be arranged. However, the survey of victims of sexual crime⁵⁹ shows that there is no information about the extent to which the provisions are observed or whether they are adequate. In addition it sets out that the lack of competent legal interpreters means that the subject cannot always get an interpreter in whom they have confidence and to whom they can tell everything.

**The Swedish Disability Federation considers that:**
- The government must commission the concerned authorities to detail how the current provisions on access to interpreters is applied, and which measures have been taken to increase communicative accessibility to the legal process for people with disabilities.

7. **Sweden’s reservation** *(concerning point 7 in the article)*
Sweden has reserved the right not to apply the final paragraph (14.7). The reason is the Swedish “resningsinstitutet” – that is to say the possibility of reopening a case even though the period for appeal has elapsed. The Swedish disability movement has no points of view concerning this reservation.
Conclusions and recommendations

The facts presented in this section show that not all people in Sweden are equal before the courts. Negative attitudes and a lack of knowledge leads to legal uncertainty and to the courts’ impartiality. With the point of departure in the UN’s standard rule 5 on accessibility, and the UN’s standard rule 1 which lays down that awareness about disabilities is a precondition for participation on equal terms, the below recommendations are offered.

The Swedish Disability Federation recommends the Swedish state to:

- Commission the concerned authorities within the judicial system to specify how current provisions on accessibility to physical environments and information, and also to communication, understood as access to interpreters, is applied and which measures have been taken in order to increase accessibility.

- Review, clarify and reinforce existing laws to guarantee individuals the opportunity to obtain both written and verbal information from the courts and the administrative authorities in alternative formats or via an interpreter.

- Commission the National Police Board to specify how girls, boys, women and men with disabilities are looked after in that part of the legal process for which the police are responsible with regard to how, where and by whom people with disabilities are interrogated.
Article 16 – A person from a legal point of view

Legal entity, legal capacity and legal capacity to act
The point of departure in Sweden is that all persons are legal entities. All legal entities have legal capacity, that is to say can be bearers of both rights and responsibilities. On the other hand, not all persons have legal capacity to act, that is to say capacity to undertake a legal act, for example enter into an agreement. A child cannot go to the bank alone and withdraw money from an account that is in the child’s name. As a legal entity the child can have an account, but does not have his or her own legal capacity to act. Full legal capacity to act is only acquired on reaching majority, that is to say at the age of 18. Declaration of incapacity is now completely abolished in Sweden. Help and protection for those who would previously have fallen into this category can instead be achieved in another way, for example by authorizing an executor or trustee.

Power of attorney, executor or trustee
In cases where individuals are not able to look after all their affairs on their own, this is usually dealt with in the first instance by means of a power of attorney, that is to say that the individual enters into an agreement with another individual that he/she can or will take care of various matters. When the individual is too ill or has a comprehensive disability and is not personally able to issue a power of attorney it remains to appoint an executor or a trustee.

The executor will, for example, look after the sick person’s rights, manage the individual’s assets and make provisions for the sick person. Persons who are empowered with the capacity of trusteeship must accept it, unless the person’s condition prevents it. Individuals who acquire a trustee retain their legal capacity to act. In other words, the trustee may not act contrary to the principal’s wishes. This is on condition that the principal’s condition does not hinder him/her from saying what he or she thinks.

A trusteeship can be said to be less personal and more focused on representation in terms of the law on property. To some extent, people who have a trustee lose their legal capacity to act. If, for example, the trustee’s commission entails administering a property, the person who has a trustee is not permitted to sell the property or parts of it.

The effect of agreements entered into
A large component of the legal capacity to act is having the possibility of entering into various agreements. The right to make agreements is based on the principles that everyone is entitled to freely enter into agreements and the obligation of the contracting parties to fulfil the agreement. In "The Act on Contracts (1915:218) and other legal acts in the field of property law " (the Contracts Act) there are general provisions on entering into agreements, and when agreements are invalid. Among others, the Contracts Act protects persons who have entered into an agreement against their will (through threats or compulsion) or comprehension (through fraud or in contravention of good faith). (The Contracts Act is supplemented by several other laws. The Swedish disability movement has no points of view on the laws as such and has therefore decided not to provide further description of them.)

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Acting under mental illness
However, a law that concerns legal acts undertaken by persons who are acting under mental illness is of particular interest. The name of the law is "The Act (1924:323) on the effect of agreements entered into under the effect of mental disturbance". The Act states that such agreements are not valid. This does not mean that all agreements entered into by a person with a mental disability are invalid. Somewhat simplified, one can say that the agreements that are invalid are those that the private individual would not have entered into if she had been in "in full possession of all her faculties". The intention of the act is primarily to protect the "sick", however to some extent also the person with whom the sick individual has entered into a legal act; for example made a transaction that cannot be completed.

Shortcomings in the prevailing system
In cases where individuals are not able to take care of all their affairs on their own, responsibility as described above can be delegated to another person by means of a power of attorney, to a trustee or an executor. Agreements entered into by principals who have a trustee can be declared invalid. The problem with the prevailing system for trusteeship is that it risks becoming more or less "permanent". This applies in particular to persons with intellectual disabilities. A medical opinion is required for a person to be able to have a trustee. Once such a medical opinion has been written, it is hard to revoke the trusteeship, as the intellectual disability has not improved from a medical point of view. Due to the medical statement persons with intellectual disabilities risk having a trustee for longer than is practically necessary. In reality this means that people cannot enter into agreements in the way that the individual would wish to. In situations such as these the individual is not recognised as a person in the legal sense. The law must clearly set out that a trusteeship should be replaced by a custodianship or other less interventionary assistance when the individual is no longer in need of a trustee. For example, younger people with mild intellectual disabilities might need an executor for financial affairs for a period, for example for a number of years, to enable the trustee, together with the individual and relatives or a custodian to assist the principal to build up a safe way to manage his/her economic situation. During this period the individual might mature and learn how to prevent him or herself being exploited. There is thus a need for some people to have a form of representation with the trustee's authorisation for a period. Power of attorney is not an alternative as the principal is not always able to understand its significance. It is however important that the option of shorter trusteeship such as this does not mean that the legal rights of the individual are diminished with regard to the arrangement of a trusteeships, that is to say the process of obtaining a trustee must still be preceded by a thorough inquiry. In our opinion setting a date for a review could also be beneficial.

Lack of restrictions in trusteeships
Another problem with the prevailing system is that administering the task is not always restricted in accordance with the law. The Children and Parents Code, chap. 11, para. 7, sets out that "the trustee's commission should be adapted to the needs of the individual in each particular case and must be limited to certain assets or affairs or property in excess of a certain value". The needs of the individual must govern the commission that the trustee has.
The experience of the National Association for Intellectually Disabled Children, Young People and Adults is however that trusteeship is not always adapted in accordance with the law (i.e. to the individual’s needs in each particular case). This leads to individuals being deprived of their opportunities and rights to act to a greater extent than is necessary.

**Examples from reality**

Whether people with disabilities are considered as persons in the legal sense in practice is a difficult question. The Disability Ombudsman has been notified of cases where, for example, a person with an intellectual disability has been discriminated against in connection with purchasing property. It emerged in a seminar on discrimination that people with disabilities have been disqualified from taking out bank loans or that they have been questioned in a way that is perceived to be highly insulting. People have been refused insurance policies. The majority of these cases are covered by the law on discrimination. However, the law on discrimination does not provide equal protection for all the discrimination grounds that the law covers. However, these shortcomings in the law are described in article 26.

**The Swedish Disability Federation considers that:**

- Restrictions on the individual’s legal capacity to act must not be more all-embracing than is absolutely necessary.
- The provisions of the Children and Parents Code on trusteeship should be supplemented with provisions enabling trusteeship to be reviewed at regular intervals.

**Conclusions and recommendations**

The information in this section shows that persons who are deprived of their legal capacity to act can run the risk of the scope and tasks of trusteeship becoming too extensive. Private individuals are sometimes deprived of their legal capacity to act in a way that is perceived to be not consistent with this article.

**The Swedish Disability Federation recommends that the Swedish state:**

- Ensures that the provisions of the Children and Parents Code regarding trusteeship are supplemented with provisions enabling trusteeship to be reviewed at regular intervals.
Article 17 – intrusion into private life

Only point 2 in the article will be dealt with in this section

The Swedish disability movement would like to address here the restrictions on privacy that are permitted in Swedish law.

Shortcomings in the protection of the law
(concerning point 2 in the article)
In the summer of 2006 the Government decided to make amendments to “the Compulsory Psychiatric Care Act (1991:1128)” (LPT) and "the Forensic Psychiatric Care Act (1991:1129)” (LRV) that make it possible for the chief medical officer to:

- restrict a patient’s right to use mobile phones and other electronic communications services
- monitor a patient’s transmissions.

The amendments came into effect on 1 July 2006 and mean that decisions on restrictions or monitoring may be made if it is necessary, taking into consideration the care or rehabilitation of the patient or to avoid damage to any other person.

The decision is limited in time and applies for two months. The Chief Medical Officer must regularly weigh up whether the restriction and the monitoring should cease. The patient may appeal the decisions at the County Administrative Court.

The technical equipment may be confiscated during the period that the decision on restriction is in force. A decision on monitoring may not restrict the patient’s right to freely communicate in writing with lawyers or public counsel, supervisory authority or other authority as well as with international bodies that have authorisation from Sweden to receive complaints from individuals.

The Swedish Disability Federation considers that:

- The purpose of the protective measure, that is to say preventing patients putting themselves or others into danger via electronic communication or transmission, justifies introduction of the new rules. However, the disability movement can only accept the provisions of the law if the rules include stipulations on thorough supervision of the application, and also that the Chief Medical Officer must consult with patients and their relatives before making the decision on restrictions.

- With the aim of reducing the risk of unwarranted intrusion into a person’s private life, an analysis must be made of how the courts assess cases involving intrusion in people’s private life, deprivation of liberty and forced medication. What independence do the courts demonstrate in relation to the doctors/psychiatrists? The gender aspect must also be taken into account in any such analysis.
Conclusions and recommendations

The Swedish Disability Federation recommends the Swedish state to:

- Reduce the risk of unwarranted intrusions into people’s private lives by supplementing the “Compulsory Psychiatric Care Act (1991:1128)” (LPT) and "the Forensic Psychiatric Care Act (1991:1129)" with provisions that the Chief Medical Officer must consult with patients and their relatives before the decision on restrictions and that the consultation and decision are logged and reported to the supervisory authority. The law must also include provisions on regular compulsory supervision of how the organisations are applying the law.

- Appoint a commission to review and analyse how the courts are judging cases that involve intrusion into people’s private lives, deprivation of liberty and forced medication. Such an enquiry must also consider any gender differences. It is of particular importance to analyse the level of independence shown by the courts in relation to the doctors/psychiatrists.
Article 18 - Freedom of religion

1. Freedom of thought, conscience and religion in Sweden (concerning point 1 in the article)
In Sweden there are no direct prohibitions on people practicing a religion. However, for people with disabilities there are practical obstacles and shortcomings in legislation that result in them not being given the same opportunity to practice a faith as people who do not have a disability. Point 3 deals with the practical opportunities for people with disabilities to practice their religion and faith. The point of departure is the UN’s standard rule 12.

In a multicultural country such as Sweden there are a large number of different religious affiliations. The most widespread is Christianity, the Evangelical-Lutheran doctrine. Figures from the Swedish Church show that approximately 84 percent of the Swedish people, about 7.5 million, belong to the Swedish Church. Statistics from the government authority "The Commission for State Grants to Religious Communities, SST", show that 34 different denominations received state grants in 2006. The total membership of denominations entitled to state grants in 2004 was 770,631 people. The denominations that have the most registered members are:

- The Swedish Mission Church: 127,753
- The Pentecostal Movement: 122,972
- Islamic congregations: 100,000
- The Roman Catholic Church: 100,000
- The Evangelical Free Church: 50,599

2. Compulsion that restricts freedom of religion (concerning point 2 in the article)
The Swedish disability movement has no points of view on how Sweden lives up to point 2 in article 18.

3. Limitations on freedom of religion (concerning point 2 in the article)
When it comes to the opportunity to actively practice one’s religion and religious freedom, issues of accessibility are of the highest importance. For people with disabilities to have equal opportunity to practice their religion, religious texts, information, verbal accounts and locations must be accessible. The point of departure for the description below is the UN’s standard rule 5.

Accessibility, information and communication
It has been hard to find information on the denominations’ possibilities for allowing all people regardless of functional capacity to participate in religious gatherings. The Swedish Disability Federation is aware of various examples of denominations that work on making their meetings, texts and information accessible for people with disabilities. Some positive examples are the Swedish Church’s work on making confirmations accessible for people with different needs. The same goes for the "Double jeopardy" project which illustrates the difficult situation faced by immigrants with disabilities and their families. The project was implemented in collaboration between Sweden’s Muslim Council, Stockholm’s Catholic diocese, the Syrian-
Orthodox Church in Sweden, the Swedish Institute for Special Needs Education, the Swedish Disability Federation, the special school in Södertälje and Botkyrka, along with the habilitation unit in Södertälje and Botkyrka. The Swedish Christian Council was in charge of the project.

Something that can be gleaned from the "Double jeopardy" report is that issues surrounding disabilities have received very little attention within the non-Swedish denominations that the project contacted. The report also shows that there is a need for increased knowledge and understanding of how people with disabilities should be treated.

Something that seems to apply to all denominations in Sweden is that the texts used at services are not accessible for people who are not able to read "ordinary" writing. Experiences from people with visual impairments is that they often have to participate without having access to the texts that are read and psalms that are sung. The lack of accessible information means that it is hard to participate fully in services. Methods must be developed to enable people with disabilities, including people with visual impairments, to share in the texts and pamphlets used in services.

Loops and sign language interpreters
In 1999 the Swedish Association of Hard of Hearing People carried out a survey in which trial groups of people with hearing impairments who used hearing aids had to describe and test options for them to participate in different activities. Among the activities that were surveyed was participation in municipal- and county council politics, club activities, cultural activities and possibilities of participating in religious gatherings. The survey was based on a total of 241 tests in Sweden's 24 residential locations. The results of the survey showed that 45 percent of the test group felt fully involved in the church’s activities. This is a considerably higher degree of perceived participation than for the other areas investigated by the trial group.

When it comes to access to sign-language interpretation there are excellent opportunities for deaf people to participate fully. The Swedish Church and in particular the Deaf Church that is part of the Swedish Church and that works especially on ensuring that activities are available for deaf people, has come a long way in its work. For example, people who need sign-language interpreting can phone in advance and say that a sign-language interpreter is needed. Both the Swedish Church and the Pentecostal Church have a number of clergy who are proficient in sign-language. Sign-language services are sometimes also broadcast on television. The Swedish Church has also, together with others (including the Pentecostal Church), worked on and translated some parts of the new testament/Bible into sign-language. In cases when religious activities are not accessible for deaf people, interpreters can also be booked where appropriate.

Physical accessibility to the denominations’ premises
It has not been possible to find any overall information on whether places and premises for religious purposes are accessible for people with disabilities. Accessibility inventories were carried out in various congregational halls and churches within the framework of the "Double jeopardy" project. Questionnaires were sent to Catholic churches, chapels, missions, dioceses and monasteries, among others. The answers show that the situation is very different in each location. Many churches and monasteries are located in old buildings, but despite this the Catholic
Church is trying to do its best to make the premises accessible. Some churches and monasteries, including in Lidköping and Skövde, have recently made their premises accessible. Other premises were already accessible when they were built as in Trelleborg, Ystad, Jakobsberg and Heliga Hjärtas Monastery in Omberg. However, many of the Catholic Church’s premises are in great need of being adapted so that they are accessible for people with disabilities.

The Swedish Church is the largest religious denomination in Sweden by far. There are about 2,500 churches in Sweden and many of them date from the Middle Ages. The churches are divided among 13 different dioceses. Some of these dioceses have started extensive work on accessibility, but there is still a great deal to do. It is important that all dioceses carry out an accessibility inventory and implement the measures that are necessary.

The provisions of the Planning and Building Act on "easily rectified obstacles" apply to all owners of properties and buildings, including landlords of public places and premises where people can practice their religion. The National Board of Housing, Building and Planning is one of the sector authorities that has special responsibility for implementing disability policy. It is the authority that has special responsibility for issues concerning social planning, urban- and land development, construction and administration and for housing issues. The National Board of Housing, Building and Planning undertakes continuous measurements of the extent to which the law is observed and easily rectified obstacles are removed. It is notable that the National Board of Housing, Building and Planning’s measurements do not shed light upon accessibility in places for religious gatherings.

**Participation, attitudes and treatment**

The Swedish disability movement would like to emphasise the importance of denominations complying with current legislation in the area, including the provisions of the Planning and Building Act on easily rectified obstacles. However, the Swedish disability movement would also like to emphasise how important it is that people who work within the different denominations’ activities acquire knowledge of people’s different circumstances and needs so that activities become accessible for more people in society and that people with different needs can feel that they are involved and welcome. Some congregations arrange special "disability days". The Swedish disability movement naturally appreciates the fact that people’s different needs are taken into consideration. However, it considers that temporary solutions and arrangements such as this reflect an attitude where people with disabilities are seen as a collective. The invitation smacks of charity. The church’s activities should instead be sufficiently accessible that all people, regardless of functional condition can participate in activities such as singing in choirs, going on excursions, taking part in Bible studies and other gatherings.
The Swedish Disability Federation considers that:

- All denominations must take measures to make their activities accessible for all.

- The different churches must provide clear information as to which services people with different needs can obtain from the congregation to enable them to participate and practice their freedom of religion and faith.

- All denominations must create opportunities for all people to participate fully in different gatherings. For this to be possible, different religious texts, for example, must be available in accessible forms and be on site.

- The National Board of Housing, Building and Planning must include places for religious gatherings in their surveys concerning the extent to which landlords follow the provisions of the Planning and Building Act and the National Board of Housing, Building and Planning’s own regulations.

4. The opportunity to select moral and religious education  
(concerning point 4 in the article)

Alongside the public education system in Sweden there are also independent schools. These schools can have a special religious or ideological basis. A distinctive feature of these schools is that they have another principal (owner) than those set up by municipalities or county councils. There are a total of 58 independent nine-year compulsory schools with religious affiliations in Sweden. Of these 47 schools have a Christian affiliation, 7 Islamic and 3 Jewish. There are also 6 independent upper secondary schools that have a Christian affiliation.

These independent schools are supposed to be open to all. A clause in the Schools Act means that it is nevertheless still possible for a free school to deny a student entry if he or she needs substantial extra resources. This might, for example, be if the student needs an assistant or if the school has to be converted in order to become accessible. This restriction results in parents of children with disabilities not being given equal opportunity to select a school that has a religious and moral education that corresponds with their own convictions.

The Swedish Disability Federation considers that:

- The clause in the Schools Act must be removed so that free schools have no possibility of being able to refuse to take on pupils with functional impairments. All parents must have equal opportunity to select a school that has a religious and moral education that corresponds with their own convictions.

Conclusions and recommendations

We can observe that there is good will, in particular within the Swedish Church, to make religious activities accessible for people with disabilities. The Swedish disability movement hopes that there is an increased will within other religious denominations as well to meet all people’s different needs of service and adaptations. The Swedish state must give the religious denominations adequate support to make activities, premises and information for religious practice accessible for all people in Sweden.

With the point of departure in the UN’s standard rules 5 and 12, the following recommendations are offered:
The Swedish Disability Federation recommends the Swedish state to:

- Entrust the Commission for State Grants to Religious Communities with the task of placing demands on the denominations to draw up and implement action plans for increased accessibility to ensure that girls, boys, women and men with disabilities have real opportunities to participate in the activities of religious communities on the same terms as others.

- Review the provisions in the Education Act which allow independent schools to refuse entry to pupils that need extensive support during their schooling, and set requirements on physical accessibility for approval of permission to start and operate free schools.
Article 19 - Freedom of expression

1. Freedom of opinion (concerning point 1 in the article)
The Swedish disability movement does not have a point of view on the prevailing freedom of opinion.

2. Freedom of expression (concerning point 2 in the article)
For people with disabilities to be able to search for, distribute and receive information to the same extent as people who do not have a disability, requires that both information and communications channels are accessible. The point of departure for the information in this section is the UN’s standard rule 5, “The human rights commission’s Resolution: 2004/42 The right to freedom of opinion and expression” and “the Declaration of Principles and the Plan of Action adopted at the first phase of the World Summit on the Information Society”.

Opportunities to search for information
In today’s information society access to the Internet, among other things, has become increasingly important. Many groups of people with disabilities welcome the opportunities afforded by technology to make the information more accessible. Unfortunately, the use of and the references to information on the Internet mean at the same time that various groups are excluded from the information society. The reason is that the information is not made accessible. Another example is the use of complicated systems for interactive voice response with a large range of options which for many people make the possibilities of getting information by telephone more difficult.

Opportunities to receive information
An inaccessible range of media
Media such as radio, TV, newspapers and the Internet are important channels for receiving information. The technology is developing at an ever increasing pace. It is equally possible to access content through a TV, computer or mobile phone. At present many people are prevented from partaking in what is on offer because the content is presented in forms that are not accessible to all. Examples of this are disturbing background noise and lack of subtitles on TV which excludes people with hearing impairments. The lack of sign-language interpreting is an obstacle for people who are deaf and the shortage of alternative reading aloud impedes those who have reading and writing difficulties.

Information from authorities
The lack of accessible information can lead to legal uncertainty. In article 14 there is an example of individuals not even receiving information about their own legal judgements via accessible media.

Opportunities to distribute information
In recent years the possibilities for citizens to express their opinions to the general public have increased, primarily through the development of the Internet. Interactivity between media and citizens has also increased and in many cases the actual interactivity constitutes a prerequisite for parts of what the media offers. Examples
that can be mentioned are radio programmes where people phone in and express an
opinion or debate various issues and the constantly expanding opportunities for
people to phone into live TV broadcasts to put questions to the participants in the
programme. It is important that the interaction and options include all radio and TV
consumers.

There is a clear element of democracy surrounding interactivity, for example when it
comes to opportunities for communication before elections, in debates and so on.
Inadequate access to radio and TV programmes means that large numbers of
disabled people are impeded from being fully active members of society. Many
people are not given the opportunity to participate on equal terms and are thereby
impeded from exercising their freedom of expression as it is regulated in this article.

With regard to development of new technologies, there are a large variety of
interested parties. Parties with commercial interests must cooperate to ensure
accessibility to information and communications for people with various disabilities.
Without cooperation and requirements that follow international guidelines / technical
standards, accessibility is dependent on special solutions and selective measures to
give people with disabilities the opportunity to search for, receive and distribute
information on equal terms.

The Swedish Disability Federation considers that:
- Requirements must be stipulated in broadcasting licences and Radio and TV
  legislation that programmes are made accessible by means of subtitles,
  interpreting, reading aloud etc. Requirements must be placed on both public
  service companies and on commercial channels. If the requirements are not met
  then it should be possible to impose fines.
- More stringent legislation for increased accessibility to TV should include all
  programme production companies regardless of broadcasting technology.
- Independent bodies must ensure that different media and authorities comply with
  the requirements for accessibility to information and communications.
- The disability organisations’ advisory role according to the UN’s standard rule 18
  must be safeguarded with regard to increased accessibility to media.
- The Government must further contribute to internationally accepted and developed
  guidelines and technical standards being followed in both Sweden and in the
  countries with which Sweden cooperates.
- We welcome the European Commission’s work on "e-accessibility as well as the
  statement adopted by the European Commission from September 2005" 102
  Legislation, public procurement and certification are the tools that must reinforce
  accessibility to information and communication for people with disabilities in the
  member states. The overall view of information- and communications technologies
  that permeates the commission’s statement is lacking in Sweden, which means
  that questions such as, for example, access in connection with the change over to
  Digital TV fall between two stools, with nobody responsible for accessibility.

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Ordinance 2001:526 on the responsibility of the state authorities for implementation of disability policy. Guidelines for accessible State administration and also directions for 24 hour authorities are examples that might lead to improved accessibility to information and communications within the public sector.

Conclusions and recommendations
In this article too, it is lack of accessibility that constitutes an obstacle for people with disabilities in Sweden. Information and communications must be accessible in order to enable people with disabilities to search for, distribute and receive information in the same way as people who not have disabilities.

With the point of departure in the UN’s standard rule 5, “The human rights commission’s Resolution: 2004/42 The right to freedom of opinion and expression” and “the Declaration of Principles and the Plan of Action adopted at the first phase of the World Summit on the Information Society”.

The Swedish Disability Federation recommends the Swedish state to:
- Ensure that radio and TV programmes are made accessible through subtitling, interpreting, reading aloud etc. Requirements must be placed on both public service and commercial channels. The government must also ensure that the disability organisations advisory role according to the UN’s standard rule 18 is safeguarded with regard to increased accessibility to the media.
- Appoint an independent body to ensure that different media and authorities meet requirements for accessibility to information and communication.
- Further contribute to internationally accepted guidelines and technical standards being followed in both Sweden and in the countries with which Sweden cooperates.
- Coordinate the responsibility for accessible information and communication.
Article 21 – The right to peaceful assembly

The Swedish disability movement would also like to emphasis in this article the significance of accessibility in ensuring that people with disabilities can participate on equal terms. To enable people with disabilities to participate in peaceful assemblies in the same way as others, PBL’s provisions on easily rectified obstacles must be observed so that premises and locations for peaceful assembly are accessible. Accessibility refers to the UN’s Standard Rule 5. Article 12 describes how far various landlords have come in the task of providing access for people with disabilities to their public premises and locations. To sum up, the claim can also be made here that substantial measures have to be taken to make meeting places accessible so that people with disabilities can participate in peaceful assembly too.

One circumstance that the Swedish disability movement would also like to address is the lack of locations and premises for peaceful assembly that can accommodate several people with, for example, mobility disabilities. The organisations of people with disabilities often find it difficult to hold meetings or participate in peaceful assembly due to the fact that the facilities only have a small number of rooms that are accessible. It is vitally important that the Act on Technical Requirements for Construction Works is followed so that all new constructions and extensions are made accessible. Facilities constructed for conferences and peaceful assembly including residence and accommodation must be made accessible for all people irrespective of functional condition. General accessibility must be increased to prevent physical accessibility from obstructing the right of assembly.

The Swedish Disability Federation considers that:
- The National Board of Housing, Building and Planning must take substantial measures to ensure that the provisions of the Planning and Building Act stating that easily remedied obstacles shall be removed are observed.
- The provisions in ordinance 2001:526 regarding the responsibility of the state authorities for implementation of disability policies must be followed so that the state authorities’ premises, information and activities are accessible.

Conclusions and recommendations
In article 21 it is also the inadequacy of accessibility that comprises an obstacle to participation for people with disabilities. The point of departure for the below recommendations is the UN’s standard rule 5.

The Swedish Disability Federation recommends the Swedish state to:
- Take substantial measures to ensure that the provisions of the Planning and Building Act stating that simply remedied obstacles should be eliminated, the Act on Technical Requirements for Construction Works and also Ordinance 2001:526 "On the responsibility of national authorities for the implementation of disability policies" are followed.
Article 22 – Freedom of association

1. Participation in associations in Sweden (concerning point 1 in the article)

While there is a high level of participation in associations in Sweden, the degree of participation varies. 90 percent of the adult population (6.2 million) are members of an association. Most people are members of a trade union (4 million). Approximately half, (46 percent) of those who have some form of membership in an association are passive members, that is to say, "have not taken an active part in an association during the last 12 months". Since 1992 the proportion of active members has decreased by a tenth (approx. 400,000 adults). The numbers of people who have no involvement whatsoever in associations has also increased, by approx. 120,000. This represents an increase of about a fifth in just eight years.

Participation in associations among people with disabilities

The Swedish disability movement has not been able to find any facts concerning the proportion of people with disabilities who are members of associations. We do however know that:

- 487,000 are members of an organisation of people with disabilities
- 75,000 are active members (1.1 percent of the adult population)
- 30,000 hold honorary posts (0.5 percent of the adult population)

Swedish popular movement policies

Popular movement policies are focused partly on stimulating and supporting people organising in associations and similar federations, and partly on contributing to the provision of satisfactory conditions in which these associations can operate, and pursue their activities. Sports policies are included, as is social economics and areas within popular movement policies. The circumstances and preconditions for the popular movements are governed in part by laws and the possibilities for financing. The Swedish disability movement is positively disposed to the freedom of association that prevails in Sweden and chooses not to offer any overall description of the provisions in the area. The government is expected to provide such a description in its official report. In the next section we only deal with descriptions of guidelines that restrict the freedom of individuals to start or join associations.

2. Restrictions on freedom of association (concerning point 2 in the article)

The Swedish disability movement considers there not to be any laws that inappropriately restrict freedom of association in Sweden. However, there are restrictions at the administrative level. In its alternative report on economic, social and cultural rights, the Swedish disability movement has been able to observe that Sweden has a well developed system of social insurance. Unfortunately, the Swedish disability movement can also observe that the Swedish system of social insurance curtails freedom of association for people who receive part-time sickness benefit or draw sick pay. The social insurance office’s guidance on how sickness benefit and activity compensation is to be granted, among other things impedes the representation of the chronically sick in patient associations and people with disabilities in the disability councils.
With regard to people with full sickness benefit, the National Insurance Act (1962:381) offers scope for people to engage in voluntary activities for five hours per week without their benefits being affected. However, receiving sickness benefit from part-time work does not give the same statutory right. The Social Insurance Office’s guide does not give people the opportunity of being involved in an association either. Regional social insurance offices have requested people to leave honorary posts in order to retain their sickness benefit.

The organisations of people with disabilities agree that people who are engaged in an activity that can be compared to paid work should obviously not draw benefits from the social insurance office. But there is a major difference between making a voluntary contribution to an association, and having a regular job. Voluntary work can usually be carried out at the pace and under the conditions that an individual can manage. The purpose of involvement in associations is not solely to enable people to get out into society, but because of commitment to particular issues. It might be a Parent Teacher Association or a political party. It might also be an opportunity to get to meet people with the same diagnosis and learn more about one’s own and other’s living situation. Active engagement in an association can provide social contacts, rehabilitation, and reintegration into society, as well as an increased working capacity. As article 25 shows, participation in the activities of an association is also a springboard into politics. Against the backdrop of the fact that people with disabilities are under represented among politicians, it is even more important that people with disabilities are provided with improved opportunities to become involved in associations.

The Swedish Disability Federation considers that:
- The opportunity to be involved in voluntary work enjoyed by people with full sickness benefit should also apply to people who receive sick pay or sickness benefit on a part-time basis.

Conclusions and recommendations
The information in this section shows that there are no restrictions on freedom of association in current legislation in Sweden. Unfortunately, there are guidelines in the social insurance system that in practice restrict freedom of association for people who draw sick pay. The Swedish disability movement can also observe in this article that inadequate accessibility to premises for association activities also constitutes an obstacle to participation. The deficiencies in accessibility have been illustrated in a number of other articles and consequently no further information will be provided in this article.

The Swedish Disability Federation recommends the Swedish state to:
- Ensure that the guidance given by the Social Insurance Office on how sickness benefits and activity compensation is awarded, is reviewed and amended to give people the opportunity to fully utilise their freedom of association.
Article 23 – The right to marry and found a family

1. Society’s and the state’s protection
   (concerning point 1 in the article)
   Divorce is more common among families with members who have disabilities

   Divorces in families where there are children with disabilities are more common than among families where none of the family members have a disability. Approximately 28 percent compared with other families with children where the proportion is 22 percent. However, the National Board of Health and Welfare’s “social report” from 2006 reveals that divorces do not seem to be more common in families where children have CP or Downs Syndrome. The National Board of Health and Welfare’s “social report” from 2001 states that the proportion of divorces among adults diagnosed as needing institutional psychiatric care is very high. Women go through divorce after illness to a greater extent than men. Divorces particularly occur among groups where personality and functional capacity are affected. The family problems that precede divorce also lead to increased risk of stress related illnesses that lead to institutional care.

   As described below, families with members who have a disability often live under very strained circumstances. There is no statistical verification as to whether it is a cause of increased numbers of divorces, however, the organisations of people with disabilities consider it to be a likely cause. The lack of coordination and the lack of implementation of the support that families with disabled members are entitled to is extremely alarming. There is a description below of how society and the state has failed to give sufficient protection to families with a member who is disabled.

2. The right to marry and to found a family
   (concerning point 2 in the article)

   Marriage
   The Swedish disability movement has no points of view regarding the right that individuals in Sweden have to enter into marriage. Under the law, people with disabilities have the same right to get married as people without disabilities.

   Family planning and information on sexual matters
   In Sweden schools should provide all children and young people with information on sexual matters. This is set out in the Lpo 94 curriculum. At a hearing in the Swedish Parliament concerning disability and sexuality, among other things it emerged that growing up with a disability often means that the individual’s sexuality becomes invisible. In the sex- and cohabitation education provided in schools, the "normal" body is the point of departure, and it is hard for many people with disabilities to recognise themselves in the picture of what sex is. Sex becomes something alien, something that does not concern them. It has not been possible to find any studies of the extent to which people with disabilities can obtain adequate information about sexual matters and help with family planning.
Adoption
The radio programme "Vital force" illustrated (in May 2005) the opportunities for people with disabilities to adopt children. The listener follows three people with various disabilities. They have all adopted children from other countries. Two of the adoptive parents feel that it has been very difficult and complicated to get permission to adopt. "When I applied the first time they laughed at me and more or less hung up on me." (Woman with mobility impairment and hard of hearing).

However, at the Adoption Centre that deals with some of the practical arrangements involved in an adoption, they feel that it was more difficult before. Previously, the countries where the children come from could be sceptical about parents with disabilities, however they feel that this is no longer the case. The Adoption Centre’s view is that the situation has changed positively for disabled adoptive parents. However this is not the Swedish disability movement’s perception. Several of the organisations that are members of the Swedish Disability Federation testify to how members phone the organisations to get support and help in issues concerning adoption. Many of those who get in touch have been turned down or advised not to apply for adoption. Both the Disability Ombudsman and private individuals have pursued cases in the courts. For example, one man recounts that: “My wife and I fought for 4 years in the courts, on two occasions all the way up to the Supreme Administrative Court, until we were given permission. Our daughter is now 9 years old and we have never regretted our struggle”. It is important to oppose negative attitudes, prejudices and inadequate knowledge within the social welfare boards concerning the possibilities and circumstances that different people have. Only then can a fair assessment of the parents’ capacity and possibilities be made.

The Swedish Disability Federation considers that:
- Schools must ensure that all pupils receive adequate information on sexual matters. If teachers do not themselves have the necessary knowledge about pupils’ special needs in issues that involve sex and cohabitation, then the pupils must be informed as to where they can turn.

- A structure for social support and information must be established. Authorities, among which are schools, care centres and maternity clinics, as well as organisations that provide information about sex and cohabitation issues, must know where knowledge and information is available for people with special needs.

3. Marriage (concerning point 3 in the article)
The Swedish disability movement has no points of view on how Sweden lives up to the provisions under point 3.

4. Equality of rights and responsibilities of spouses (concerning point 4 in the article)

Introduction
People with disabilities sometimes need support from society to enable them to take equal responsibility for their families and to exercise their parental role in the best way. Article 10 of the Swedish disability movement’s alternative report on economic, social and cultural rights contains facts that are extremely relevant to this article (i.e. article 23). The Swedish disability movement has noted that Sweden has good laws in the area, but that they are not followed in practice. According to the standard rules,
access to support and service is a prerequisite for enabling people to participate on equal terms. The lack of coordination and the fact that people are not having their legal rights met is making it more difficult for responsibility for families to be shared. The so-called indivisibility principle is extremely relevant in enabling people with disabilities to enter into marriage, build a family and take responsibility for it. Furthermore, it is very important that places where children reside are accessible. For example, all parents must receive practical opportunities to participate in parental discussions at day nurseries and schools.

Parents with disabilities
As described above, there is a lot of information available in article 10 of the Swedish disability movement’s alternative report on economic, social and cultural rights. There are a large number of examples of what the situation is like for people with various disabilities, but also information on how the to alleviate the situation for families. Here is some additional information to further illustrate the prevailing situation and the treatment that parents with disabilities receive from officials.

In the radio programme "The Parents" which was broadcast on 28 August 2006 several parents with mobility impairments were interviewed about their situation as disabled parents. An aspect that is clearly criticized is the "questioning" carried out by the municipal officers who assess the need for assistance. The interviewees’ perception is that the officials have no understanding and insight that all parents, and thus also parents with disabilities, desire, and must have the opportunity to share responsibility for their children. Interviewees in the radio programme also describe how they perceived that officials tried to get the other parent to take a greater responsibility for the children.

People who need assistance in fulfilling their parental role must be given equal opportunity as parents who not have disabilities to take care of their children and share the responsibility for the children. Anything else must be considered as infringing against the provisions in article 23.

Parents with intellectual disabilities
A group of parents who are particularly vulnerable are parents with intellectual disabilities. Becoming a parent is a challenge for all of us. For people with intellectual limitations, particularly if it involves an intellectual disability, the duties of parenthood can be overpowering. Studies show that two thirds of families where one or both parents have an intellectual disability need support to compensate their difficulties. As a rule society thus needs to provide support and it is important to safeguard both the parent’s and the child’s welfare. The support that is required is complex, and of such a character that the cooperation of several social agencies is necessary. However, at present the agencies often act separately and without coordination. (For more information, see article 10 in the Swedish disability movement’s alternative report on economic, social and cultural rights).

Statistics
The National Board of Health and Welfare’s 2005 research overview of parents with intellectual disabilities reveals that there are no statistics of how many parents with intellectual disabilities there are in Sweden, nor how many are living with their children. There is no national Swedish survey, however a study from Skaraborg County was published in 2003. The study was an inventory of how many parents
have an intellectual disability (administratively identified/ beneficiary of care). Of those women who had an intellectual disability and who were living in what was then Skaraborg County, 15 percent were mothers. In the inventory, the investigator found that on average mothers with an intellectual disability give birth to two children. At a rough estimate, this would mean that in Sweden as a whole at least 160 children are born every year to mothers who have an intellectual disability.70

Elements of risk and the need for support
In a research overview71 from 2000, research was presented concerning risks in children’s development. It states that parents with intellectual disabilities are a risk factor for children. However, the parents are not a uniform group, which means that the situation for the children varies, both depending on the existence of problems and access to help and support. It reports that there is a risk of children of parents with intellectual disabilities being subjected to neglect and negligence. For example, parents are not always capable of taking care of the child’s hygiene, do not always dress the child in appropriate clothes, and do not always succeed in giving the child sufficient food, or food that is nutritious.

Lack of support
The research72 shows that support that is adapted and adequate increases the basic prerequisites to enable parents with intellectual disabilities to take care of and bring up their own children. One prerequisite is that they are motivated to receive assistance, and that they can implement the assistance in practice. Despite the fact that there are only a small number of studies that investigate the effects of intervention, some knowledge does nevertheless exist that should be taken into account when intervention is planned. An enquiry should include both a diagnostic and a functional assessment. To be able to determine what contributions are required, the parents’ practical abilities, their social capacity and the factors in the family that can be of benefit in the child’s recovery should be looked into. The parents’, any partners there might be, the children’s and the family’s needs and living situation should be examined. In addition, relationships within the family, the parents’ experience of children and their capacity to handle stress, social stress factors and the family’ informal networks and social support should be investigated.73

The programme "Vital force" concerns (spring 2005) parents with intellectual disabilities and illustrates the experiences of children with parents with intellectual disabilities. The programme shows that no facts have been produced on how support functions in practice. Furthermore, it demonstrates that it can be difficult for parents with intellectual disabilities to ask for help – they may not be aware of what they need help with. Fear of the child being taken away also contributes to parents with intellectual disabilities not daring to ask for help.

Information on the situation for children of parents with intellectual disabilities follows in article 24.

Parents in correctional facilities
It has not been possible to find any overall facts on the extent to which parents with a disability who are deprived of their liberty can exercise their parental role. The same applies to the extent to which parents can share responsibility for their children during the time that they are in custody. As a relatively large proportion of those who have been taken into custody have a disability, facts taken from general studies are
presented below concerning parenthood among prisoners. These general studies are to a great extent about people with disabilities. Information pertaining to the situation for children with parents in custody is presented in article 24.

The Swedish Prison and Probation Service estimates that around 9,000 of those who are taken into correctional facilities (prison and probation) have children. The Prison and Probation Service calculate that 8,000-10,000 children are thereby separated annually from both or one of their parents. Research has shown that about 80 percent of the imprisoned parents have some form of contact with their children through telephone, letter, visiting arrangements or leave of absence. However, nothing is known about how this group of parents is able to take part in care and upbringing, how they can fulfil a parental role for their children during and after their stay in prison.

Studies show that inmates and their children are not able to meet as often as they wish. This is due to a number of administrative obstacles such as long distances to the institution, expensive travel and limited visiting rooms. One difficulty that parents in prison describe is not being able to get leave of absence in connection with important events. It might be a child’s birthday, the first day at school or not being able to take part in parent meetings, something that is perceived as making it even more difficult to exercise the parental role.

**Women in prison**

About 40 percent of women in prison have young children. Many of them also have custody of the children. Of the 90 women in Hinseberg Prison:

- Forty four women have children. 31 of them have children under 18 years old.
- Twenty nine women did not live together with their children at the time of being put in Hinseberg (including adult children who had their own accommodation).
- Of the 29 women who did not live together with their children, 12 receive visits from the children.
- Of the 15 women who lived together with their children before their stay in prison, 9 of them receive visits.
- Eight women respond that their children have entirely or partially ceased to have contact/visit them.

As only 6 percent of those detained in correctional facilities are women, there are only five prisons for women. This means that there is a risk that there is a substantial distance between the woman’s home and the institution. This makes contact with the child considerably more difficult. Several of the women in Hinseberg feel that the long journeys and the costs actually make it impossible for children and parents to meet and maintain good contact. The access to visiting apartments and the design of the visiting rooms must also be reviewed. “Many people who are in prison have children. But with so few opportunities for visits and inappropriate visiting rooms, it is difficult to have natural relations with one’s children.”

100
Support for women and men with disabilities
Despite the fact that equality should permeate all area of politics and all activities, it has been very difficult to find any gender-specific facts with regard to support for parents with disabilities. The National Board of Health and Welfare’s description of the current situation, "Equal social services?" reveals among other things that:

"There is a major shortfall in knowledge when it comes to gender equality within care for people with disabilities. More recent studies of people with disabilities also lack a gender perspective. People with disabilities are perceived to be "sexless" in studies and research. Their circumstances seem to be primarily affected by their disability. There is thus very little knowledge of whether men or women with disabilities are discriminated against on account of their sex."

The summary does however state that: "The social service’s values regarding gender do affect the appraisal of girls’ and boys’, men’s and women’s needs, the view of relatives and the way the operation is designed."

Families where there are children with disabilities
The quote below underlines the difficulties experienced by parents of children with disabilities. In the book that gives an account of the results of the "Doubly Jeopardy" project, a parent describes his everyday experience.

"On one occasion I took part in a two day course in connection with my job. During these two days I was not able to make a single phone call. Our entire everyday life was almost thrown into chaos. There are calls I have to make every day concerning Karin (daughter), I keep an eye on telephone times, search out the right person and sit and wait in telephone queues (listening to beautiful music at the same time as my heart is pounding from stress). I email, fill in forms and send out certificates all over the place. I nag, explain and sometimes I complain. Sometimes feels as if I am standing on a battlefield and gesticulating in all directions. I am one of those people who is well aware of my rights and responsibilities and yet I still get completely exhausted."

Families with an immigrant background
Families with an immigrant background are in an even more difficult situation. This applies whether it is the children or the parents who have a disability. On 31 December 2006 approx. 12 percent of the people resident in Sweden were born abroad. People who have grown up in Sweden have prior knowledge about health care and the authorities. For parents with an immigrant background, it can be a difficult balancing act between different patterns of living and attitudes. This is demonstrated in the book resulting from the "Double Jeopardy" project that illustrates the difficult situation in which immigrants with disabilities and their families find themselves. They carry their own country’s way of viewing disability, care and authorities in their baggage. They might not know what a regional social insurance office is for, or the role played by municipalities in society. People born in Sweden often know how to conduct themselves in relation to doctors and officials with whom they come into contact.
For example, interviews with six families revealed very different knowledge about Swedish society and the world of disability. They showed clearly that there is great need for information and help from society among families with an immigrant background. The report demonstrates that there is a marked silence around their double jeopardy.

The Swedish Disability Federation considers that:

- Families with disabled members must receive the necessary support required to deal with everyday life, to share responsibility for their children and to give the children a safe and healthy upbringing. You are referred here to all the opinions in article 10 in the Swedish disability movement’s alternative report on economic, social and cultural rights.

- Places where children are present, as well as places where parents need to go with their children, among which are children’s clinics, daycare centres, playgrounds, schools and after-school recreation centres must be made physically accessible.

- Correctional institutions must be obliged to find out if the inmates have children. The primary responsibility for children’s upbringing must lie with the parents and when they are not able to take that responsibility, then the social services have to intervene.

- The Office of the Children’s Ombudsman’s proposals for measures in the report: “The Office of the Children’s Ombudsman’s report br2004:01, Don’t punish the child! A study of the child’s perspective within correctional facilities” must be considered, and necessary action taken to enable prisoners and their children to have the best possible preconditions to live a family life and maintain and develop their child/parent relations.

- Correctional facilities must be duty bound to establish visiting rooms in all institutions and to adapt prisons according to the needs of children.

- Families where the parents have intellectual disabilities must be given attention and receive the necessary support. The support should be shaped according to the needs of the children and the parents and be provided on a continuous and long-term basis. To ensure that inputs have a positive effect, they must be adapted to the family’s situation, be performance-based and comprise models, practical feedback, praise and rewards. The initiatives shall be configured so that it becomes possible for parents to develop on the basis of their own circumstances.

- Families with an immigrant background where family members have a disability must be provided with information on the Swedish social structure and on the benefits to which the family are entitled. All family members, regardless of gender, functional condition or linguistic ability must be able to gain access to information of this kind.
Conclusions and recommendations
Against the backdrop of what is presented above, the Swedish disability movement can observe that families where a family member have disabilities do not receive sufficient protection from society and the state. The lack of support, knowledge and coordination contributes to the fact that families with family members with disabilities live in a vulnerable situation.

With the UN’s standard rules 4, 5 and 9 as the point of departure, the Swedish disability movement offers the below recommendations.

The Swedish Disability Federation recommends the Swedish state to:

- Ensure that “the Social Services Act” and “the Act relating to support and service for certain physically impeded individuals” are observed by:
  - working to ensure that a comprehensive system with strong sanctions is developed for cases where decisions laid down are not followed,
  - working to ensure that national guidelines for reasonable processing times and reasonable times for implementation are drawn up.

- Formulate regulations that guarantee collaboration and substance for initiatives in which local authorities and county councils are at the same time the responsible authorities.

- Ensure that parents in custody and their children are given the opportunity of meeting and having regular contact so they can develop and maintain the best possible parenthood and family relations.

- The laws that concern leave of absence for detainees within custodial care must be reviewed and altered so that the possibility exists to grant leave of absence on the basis of the child’s need for contact with a detained parent.
Article 24 – The child’s right to protection

Introduction
The Swedish disability movement has no points of view regarding points 2 and 3 in this article. This section will consequently deal solely with point 1.

1. When there is inadequate protection for children
(concerning point 1 in the article)
Children who live in institutions
A group of children that the Swedish disability movement would like to particularly emphasise in this article are children in foster homes, or institutional care according to "the Care of Young Persons Act". As described in article 9, neuropsychiatric disabilities are common among these children.

The National Board of Health and Welfare’s “Social report” 80 from 2006 shows that children and young people who have been placed in foster homes or in institutional care run a major long-term risk of developing adversely in several respects. It might involve entering life with just a basic education, becoming a teenage parent, having a mental illness or committing suicide. This also applies to children who were placed in care at an early age and who have been in care for many years.

Young people who spend a large proportion of their childhood in foster homes or in institutional care are consequently a highly vulnerable group as young adults. In this context the organisations of people with disabilities would like to refer to article 9 which provides a more detailed description of the prevailing situation for people with mental and neuropsychiatric disabilities.

Children of parents with intellectual disabilities
As described in article 23, it is extremely important that parents with disabilities receive adequate support to enable them to take care of their children. Unfortunately the claim can be made that people with disabilities frequently do not receive the support they need. A group of children who are consequently particularly vulnerable are children of parents with intellectual disabilities. The National Board of Health and Welfare’s research overview shows that there are risks of children being neglected. It can manifest itself in deficient care, in children not receiving a nourishing diet, inadequate security at home and a lack of hygiene. There is also a risk of the children being subjected to maltreatment. Children who have parents with intellectual disabilities can have problems with linguistic and cognitive development. Furthermore the situation occurs where children have behavioural problems and emotional difficulties and it is more common that the children have mental troubles, above all depression, than other children. 81

As described in article 23, the research 82 shows that support that is adapted and adequate increases the basic prerequisites enabling parents with intellectual disabilities to take care of and bring up their own children. The Swedish disability movement would here like to emphasise once again the importance of parents with intellectual disabilities and their children receiving the support they need.
A qualitative study from 2004 researched the situation for children of parents with intellectual disabilities. Several of the young people who were interviewed pointed out that they would have liked to know why the family was in contact with professionals and why their family required interventions. The fact that they did not know that their mothers had an intellectual disability meant that their mother had been evasive, which contributed to the confusion and made it hard for the children to understand their lives. The young people considered that it would have been a great help for them if they had been aware of their parents’ intellectual disability and the consequences of it. They needed to know that they could not expect their parents to help them with their homework, and why their parents spoke and behaved differently than others. The results show that it is young women who are in the most vulnerable circumstances.

**Children of parents who have been deprived of their liberty**
The National Board of Health and Welfare and the National Prisons and Probation Administration estimate that at least 8,000 children have a parent who is detained. Many children suffer a severe crisis and react with grief after separation from a parent. They worry about what it’s like for the parent in prison, have guilt feelings over being the cause of the crime and are ashamed in front of neighbours and friends. Children often react with a variety of symptoms such as depression, sleeping problems, hyperactivity, concentration difficulties or aggression. Earlier attempts to reduce contact with imprisoned parents in order to spare the child have often been destructive. It is now known that regular and rather structured contact with the parent in prison is more reassuring and constructive. Despite this knowledge a questionnaire among the country’s institutions and prisons that was presented by the Office of the Children’s Ombudsman showed that when registering inmates, only three out of twenty prisons ask whether they have children. A third of the institutions do not have child-friendly visiting rooms. A third also respond in the negative as to whether inmates receive telephone calls from their children. The inmates are only occasionally granted leave of absence with respect to their children.

Another circumstance that further aggravates the situation for children with parents who are in custody is that the child often does not have sufficient information about the crime and the punishment to understand what has happened. This, together with various half-truths, leads to uncertainty and doubt in the child.

The Swedish disability movement does not wish to raise the issue in particular of children with parents who have been sectioned for compulsory psychiatric care. The situation for these children has been researched, and the National Board of Health and Welfare drew up guidelines in autumn 2006 as to the attention that these children should receive and what support they should receive. At the time of writing this alternative report we have still not been able to ascertain whether the guidelines have led to the children receiving the necessary support.

**The child’s right to support**
In a research review together with the National Association for Disabled Children and Young People, the Save the Children Fund observed that municipalities and county councils sometimes do not implement decisions on support that children with disabilities are entitled to according to Swedish law. This support is in place in order to enable children to utilize their rights.
Despite the fact that a court, the county administrative court, has laid down the child’s right to support, not all decisions are implemented. Furthermore, a positive decision on support that is not implemented cannot be appealed. There are similar difficulties for girls, boys, women and men with other disabilities. For further information see the Swedish disability movement’s alternative report on economic, social and cultural rights, articles 10 and 11.

**The Swedish Disability Federation considers that:**

- Institutional care for young people must be evaluated and developed so that children and young people receive the support they need.
- Existing methods for care and rehabilitation in connection with mental or neuropsychiatric disabilities must be used.
- Girls and boys with parents who have intellectual disabilities must be given attention and receive the necessary support. The support must be designed according to the needs of both the children and the parents. (See in addition opinions and recommendations in article 23.)
- Correctional facilities must be obliged to always ask inmates on their initial contact with the prison or institution if they have children and whether they have custody of one or more children.
- Correctional facilities must be obliged to keep statistics of the number of children who have parents who have been deprived of their parents on the basis of the inmate’s details.
- The National Board of Health and Welfare and the National Prisons and Probation Administration must together draw up procedures for increased cooperation surrounding children who have parents in detention.

**Conclusions and recommendations**

The information in this section shows that children who have been placed in foster homes or in institutional care according to the Care of Young Persons Act run a particularly great risk of developing unfavourably in several respects. Facts have been presented in article 9 that show that many of these children have neuropsychiatric disabilities. The article also reveals that existing methods for care and rehabilitation in connection with neuropsychiatric disabilities are used very rarely. The children and young people who risk developing unfavourably have to receive necessary and adequate care and rehabilitation so that they receive the best possible circumstances for a safe and healthy upbringing.

Other cases where there is insufficient protection for children is when the parents have intellectual disabilities. As described above, the research shows that adapted, adequate support increases the chances of parents with intellectual disabilities being able to take care of and bring up their own children. However, the children’s need of support is often not taken into account when support is granted to the parents. In many cases the parents do not receive sufficient support to enable them to give their children a good upbringing.
When it comes to children of parents with intellectual disabilities, it emerges that children frequently do not receive sufficient information about the fact that the parent has a disability. The same applies to children of parents in detention, these children are not given sufficient information about the crime or the punishment. Concealment and various half-truths lead to uncertainty and doubt in children which results in them not receiving the best possible conditions and basic security in order to proceed in life.

As detailed in the section above, it is also the case that not all girls and boys receive sufficient support and service, (standard rule 4) that they are entitled to according to Swedish law. This means that children with disabilities are not provided with the necessary conditions to participate in social life on equal terms with other children.

On the basis of the UN’s standard rules 2, 3, 4 and 9 we offer the below recommendations.

The Swedish Disability Federation recommends the Swedish state to:

- Develop mechanisms to follow up the responsibility that is delegated and distributed to the municipalities and county councils in order to ensure that all girls and boys with disabilities have their rights for care, habilitation and rehabilitation, support and service met without discrimination.

- Ensure that the Office of the Children’s Ombudsman’s proposals for measures in the report: "The Office of the Children’s Ombudsman’s report br2004:01, Don’t punish the child! A study of the child’s perspective within correctional facilities” must be considered and necessary actions taken to enable prisoners and their children to have the best possible preconditions to live a family life and maintain and develop their child/parent relations.
Article 25 – Participating in political processes

Introduction
The Swedish disability movement considers that all human beings should be given equal rights and the opportunity to exercise those rights according to article 25. The Swedish disability movement would therefore like to strongly question the Human Rights Committee’s statement in General Comment no. 25 where it states:

“The exercise of these rights by citizens may not be suspended or excluded except on grounds which are established by law and which are objective and reasonable. For example, established mental incapacity may be a ground for denying a person the right to vote or to hold office.”

The Swedish disability movement considers that all citizens should have equal rights and be provided with the necessary circumstances in which to exercise their rights according to article 25. A mental incapacity, among which is intellectual disability, should not entail a curtailment in the individual’s right to participate in the political process. This is also something that is underlined in Sweden by an explicit political will and through Swedish law. Sweden’s constitution, chapter 3, paragraphs 10 and 2, establishes that anyone who has the right to vote is entitled to be a member of parliament and all Swedish citizens over 18 have the right to vote. According to Swedish law, a trusteeship can curtail a person’s legal capacity to act within certain areas (see further article 16). However, the legislator has deemed some legal acts to lie outside the scope of trusteeship, for example the right to marriage, abortion and voting. In common with the legislator, the Swedish disability movement considers that all citizens shall have the right to vote irrespective of whether he or she is capable of arriving at a reasoned position on the issue or not. It must be up to each individual to determine whether he or she can or will use their right to participate in the political process. The state must provide all citizens with the preconditions to exercise their right according to article 25.

The point of departure for the information in this article is the standard rules 1, 4 and 5.

a. The right to take part in the conduct of public affairs

Political activity among people with disabilities
There are no national statistics on how large a proportion of the politically elected representatives in Sweden have a disability. There are some statistics when it comes to municipal posts. According to the municipalities’ own estimates, in autumn 2000 there were a total of 345 elected representatives with severe mobility-, visual and hearing impairments, (the Disability Ombudsman, 2000). It should be added here that several municipalities did not respond to the questionnaire. Nevertheless, the results indicate that the proportion of people with mobility and visual impairments or who are hard of hearing is less than one percent of the total number of elected representatives (about 44,500 people), which in that case points to a profound under-representation.
The assumption that people with disabilities are under-represented in politics is also confirmed by a small empirical survey that was carried out in 2000. It concerns a study\textsuperscript{87} of the 33 municipalities in the Skåne Region where it emerged that only 26 of the approximately 1,800 elected representatives in the region had a recognised disability.

To put these facts into context, comparisons must be made with the extent to which people with disabilities are members of political parties.

**Party membership**

In the proportion of the population that is under 65, party membership is somewhat more common among people with disabilities than in the overall population. The largest proportion of members of political parties is among people who are hard of hearing and those who have visual and mobility impairments. However, when it comes to being active within the parties, the circumstances are the reverse. People with disabilities are not as active as the population in general. It is only among people with visual impairments that the proportion who have attended a party meeting is appreciably greater than in the population as a whole. Among people who are 65 and older, people with disabilities are members of political parties to approximately the same extent as in the population as a whole, however, they attend meetings to a lesser extent and also participate less actively in the organisations. Among party members who are under 65 and who have mobility impairments or who are hard of hearing (the largest groups in the survey), the proportion who actively participate in the party organisations is 16 and 24 percent respectively. The equivalent figure among all party members who are under 65 is 31 percent. Among party members who are 65 and older and have a mobility impairment or are hard of hearing, the proportion who actively participate in the party organisations is 11 and 17 percent respectively. The equivalent figure among all party members who are 65 and older is 19 percent. (The figures are however not statistically guaranteed)\textsuperscript{88}

In other words, people with disabilities seem to be at least as interested in party politics as others, but they appear to find it more difficult to take an active part in politics. In the government survey from where much of the information in this section derives, the committee summarises the information in the following way: "The figures can be interpreted that it is more the external circumstances that impede disabled people from participating actively in politics than the attitude of disabled people themselves"\textsuperscript{89}

The Swedish disability movement would like to call attention to the fact that there are no gender-related statistics. There are statistics concerning the proportion of men and women within politics. However, we have not been able to find any statistics on the gender distribution among those politicians who have a disability.

**Recruitment to political office**

There are no empirical surveys of how people are treated during the political recruitment process. The few studies that exist on how people with disabilities become politically active do however indicate that the disability movement is often an important springboard into politics.\textsuperscript{90}
In summer 2006 the organisations of people with disabilities carried out a qualitative study with 10 disabled politicians to ascertain whether the shortcomings that existed in the late 90s were still present. Most of those who were in the 2006 study are active in a disability organisation. The interviewees state that they gained experience of political organising and working with social issues through involvement in a disability organisation. Several of the interviewees also state that these experiences made it easier to enter the political process. It is consequently important that the restrictions on participating in associations that are described in article 22 are removed.

**Attitudes and treatment**
Information on how people with disabilities are treated in politics is extremely patchy. Earlier research is by and large restricted to studies on what accessibility is like for elected representatives with various disabilities. However, in the highly limited studies from 2000 and 2006, the politicians who were interviewed were by and large satisfied. In the 2006 qualitative study, the interviewees had to respond to several different questions about their situation as politicians. The interviewees who perceive that there are shortcomings in their treatment are of the opinion that the problem seldom lies with their party colleagues. On the contrary, contacts with party colleagues are usually good. Rather, the problems that exist in terms of treatment are perceived to be found in the administrative department. One example given is that the administration forgets to book accessible premises or has difficulties making information available. See further below.

Several of the interviewees consider that their disability is an asset for them as politicians. The disability gives them an increased credibility in disability issues "they know what they are talking about". This means that they have a greater opportunity to have an influence and to lobby in precisely these issues. The majority of the interviewees work with disability issues.

Party colleagues and others within the party assume that politicians with disabilities want to work with disability issues. This emerges in the study from 2001 and is confirmed by the people in the 2006 study who were not engaged in disability issues. This perception can result in it becoming more difficult for politicians with disabilities to get a hearing for their opinions when it comes to other issues.

**Physical accessibility, information and communication**
In 2002 a welcome addition was made to the Local Government Act which prescribes that: "33 § Municipalities and county councils shall work to enable elected representatives with a disability to participate in dealing with matters on equal terms with other elected representatives."

Unfortunately, the information below reveals that the provisions of the Act are not always followed. As has been emphasised on several occasions in this report, accessible premises and information, along with functioning communications are a prerequisite for participating on equal terms. The information below is described with the support of Standard Rule 5 on accessibility.

**Physical accessibility**
Despite far-reaching regulations and intentions that Sweden will become accessible before 2010 (see the introduction), there is a long way to go before all places in which political activity takes place are accessible.
Article 12 describes how far private and municipal landlords have come in the task of making their properties accessible for people with disabilities.

The government enquiry, "Real participation – development of democracy in municipalities and county councils", reveals that there are shortcomings in several municipalities in terms of accessibility to premises and information for people with disabilities. The information it contains is from 2000. It has not been possible to find any more recent studies of accessibility in the municipalities’ public premises. Against the background of the facts presented in article 12, the disability organisations consider it likely that many of the problems still remain.

The state enquiry shows that in 2000 there was only one municipality in Sweden, Härjedalen, that met the Disability Ombudsman’s criteria for "very good accessibility". Barely a third of the municipalities met the requirements for "good accessibility". Six out of ten municipalities did not have special programmes for accessibility. Three quarters of the municipal council premises met all the Disability Ombudsman’s requirements for accessibility for people with mobility impairments. Loops were installed in 94 percent of the municipal council premises, and one in six of the municipalities had sign-language interpreting at their municipal council meetings. Almost one fifth of the municipalities did not produce information in a modified form for people with disabilities when requested.

During the period 1999-2003 the Disability Ombudsman received notification on some 50 occasions of deficient accessibility within the public administration. Examples of the issues involved were that there were no disabled parking spaces close to the entrance, or that the premises were not accessible for people with mobility impairments. One disability organisation reported that the district council meeting – that incidentally, was going to deal with the local disability plan – was held in premises that were not accessible for people with mobility impairments. The chairperson of the district’s disability council requested that the matter should be postponed until the meeting could be held in an accessible place, but the request was rejected.

In the qualitative study from 2006 it emerged that the interviewees perceived that the "routine" meetings, among which were the municipal council meetings, as a rule, went well. The public premises were functional for the politicians. Difficulties arose when meetings were to be held somewhere else, for example, in connection with study visits for a particular activity. Several of the interviewees had experienced difficulties in participating in such meetings. Examples of difficulties that arose were that there were no loops or that the premises were not physically accessible. However, the vast majority did not perceive this as a major problem. Party colleagues seem to show consideration to the circumstances of individuals.

It seems that the municipalities which have experience of councillors with disabilities have adapted to a greater degree than others. The study of municipalities in Skåne revealed that those municipalities that had most councillors with disabilities had made the most modifications to their municipal and district council meeting rooms. They had been somewhat more active in drawing up transport rules that made it easier for people with disabilities to travel to and from the meeting rooms. They also more often had a system that made it easier for visually impaired people to familiarise themselves with general documents. However, it should be emphasised
here that despite the fact that politicians with disabilities generally perceive that they are treated positively, "social obstacles" do exist.

These obstacles are often due to access to premises, means of transport and communication. Longer interviews with a small number of local politicians with disabilities in the municipalities in Skåne confirm that those who have a disability meet special obstacles in their political work. One of the politicians who was interviewed was in a wheelchair and recounted that the lack of accessibility in the premises meant that he held back from going up to the rostrum. The fact was that he couldn’t be seen from there. He was therefore forced to speak from his seat, which implies a form of special treatment. Moreover, during the meetings he had to sit at a special table, which meant that he did not have anyone to talk to and was thus isolated. He also had problems getting to the local council rooms and found it even more difficult at meetings in committees or boards, especially for study visits. Another wheelchair-bound politician said that there had been occasions when he had not been able to participate in meetings that were in premises that were not accessible. He observed that this had probably resulted in him not having had the same opportunities to develop relationships and be available for different assignments as other politicians were. Similar experiences, i.e. that the disability led to the individual in question not being promoted, emerged in the study from 2006.

Accessible information
In the qualitative survey carried out in 2006 it emerged that politicians with visual impairments sometimes found it difficult to obtain information in advance of meetings. Much of this could be rectified if the administrative staff had better computer skills. The greatest problem was not unwillingness but rather inability. Despite the fact that the visually impaired politicians who were interviewed felt that they did not always have access to all information, they did not perceive this as a major problem. Missing out on information is an "everyday" problem that a person with a visual impairment has to compensate for in a variety of ways. For example by working harder, putting in more preparation in advance of meetings, being properly informed in factual matters, finding information on the matter by listening to radio, TV, reading daily papers and looking for information on the Internet. As mentioned above, involvement in the disability movement also makes it easier for politicians to compensate for any lack of information. "My involvement in the disability movement meant that I kept a check on things, kept my documents in order, was familiar with the decision procedures, was able to talk and put forward an argument. I was able to be a person competent in functioning in associations and could reproduce the ideology in a way that was easy to understand."

Travelling to and from meetings
An aspect emphasised by most of the politicians who were interviewed in 2006 was the difficulty in travelling to and from meetings. It applies in particular to those who are dependent on the special transport service. The municipalities, and where appropriate the county council that is responsible for the special transport service, have put a number of measures into place to reduce the cost of the service. Among other things, there are restrictions in the allocation of journeys, and car-pooling is common throughout the country. This places demands on travellers to make advance bookings and prioritise their journeys. The result is that travellers are less able to decide themselves when to be collected. Several elected representatives who are dependent on the special transport service say that the rules have made it more
difficult to carry out\textsuperscript{94} the tasks they have been entrusted with. Party political engagements and municipal posts are often associated with a lot of travelling. The restriction in the number of subsidised journeys that have been introduced in some municipalities consequently means that elected representatives with disabilities find that there are insufficient journeys to cover their needs. Another problem is that individuals usually have to decide their time of travel in advance. However, political meetings often run over time. When this happens, elected representatives who are dependent on subsidised travel are obliged to leave the meeting early and thereby miss the remaining items on the agenda. If it is not possible to estimate the time of the journey home, or if the meeting is so late in the evening that the special transport service has ended for the day, then the special transport service cannot be used. In these cases the elected representative is forced to miss the meeting or meet the high cost of travelling out of his or her own pocket. As people with disabilities often have a lower standard of living and a more difficult financial situation,\textsuperscript{95} the choice is all too often that the individual politician has to forgo the meeting.

**Participation in the judicial process**

Participation by jurors in the verdicts of law courts is a centuries old tradition in Sweden. Participation by jurors in the sentencing process gives citizens an insight into the work of the courts, and the courts are supplied with an enlarged pool of expertise and local support. The juror’s task, in conjunction with a judge who is well versed in the law (legally trained, professional judge) is to pass sentence in criminal cases and some other cases (primarily family cases).

Jurors in district courts are selected in terms of municipality, as a rule by municipal councils, while jurors in appellate courts are selected in terms of county by the county councils. Jurors are nominated by the political parties. Every Swedish citizen who is registered within the electoral constituency is eligible for jury service.

The Swedish disability movement is aware of people with disabilities who are jurors, however, we have not found any statistics detailing the proportion of jurors who are disabled. Nor has it been possible to find any information on what the work situation is like for these jurors. Under this point the Swedish disability movement would also like to emphasise the importance of accessibility in giving people with disabilities the opportunity to participate in the judicial process.

We have not found any information concerning accessibility in Swedish courts that is more recent than from 1999. The Disability Ombudsman’s progress report to the Government of March 1999 states that "With the exception of allergy adaptation, the accessibility of the county administrative courts for people with disabilities was much worse than in the central municipal administration’s principal buildings." "Of particular note was the lack of adaptation for the hard of hearing where a majority of the county administrative courts did not have any adaptation at all for the group." "The lack of adaptation for the hard of hearing means that a large group in society is excluded from the possibility of verbal negotiations in the county administrative court." The lack of accessibility excludes people with disabilities both from being able to participate in the judicial process (article 25), but also from becoming full participants in the legal process (articles 2 and 14).

According to the ordinance (2001:526) on the responsibility of the state authorities for implementation of the disability policy, the National Judiciary Administration, the
courts and the regional rent tribunals and leasehold property tribunals are obliged to draw up action plans for how premises, activities and information are to be made accessible for people with disabilities. Those who have not yet produced such an action plan must do it and report it to "the Agency for coordination of disability policy” no later than 1 March 2007.

Conclusion
To sum up, the politicians interviewed in the qualitative survey from 2006 state that their disability has not had any major negative consequences for them in their role as politicians. The problems that there nevertheless are, are marginal, and the interviewees have learned to deal with the difficulties that can arise. This applies to all the politicians interviewed, and accordingly regardless of disability and political level. The qualitative study is however limited, and the interviewees are all experienced politicians. The above also shows that the municipalities that had the most members with disabilities had adapted their premises and their political activities to a greater extent than other municipalities. This naturally makes it easier to be politically active. As people with disabilities are so under-represented in political contexts, it seems that the problems in becoming politically active exist before they attain a political office. As described in the Swedish disability movement’s alternative report on economic, social and cultural rights, the situation is often difficult for people with disabilities. Lone individuals often have to conduct a constant struggle to have their legal rights met and realised. Ignorance and negative attitudes among the authorities and people that individuals come into contact with can contribute to a deterioration in self-confidence. Personal experiences and negative expectations of inaccessibility should also be a major reason that people with disabilities do not venture into politics. The difficulties that people with disabilities have in completing their studies and getting work impairs the self-confidence and self-esteem of many. This can contribute to it being harder to participate in the political process.

The Swedish Disability Federation fears that many people with disabilities do not risk becoming politically active or believe that they are not capable of becoming active in political parties. It is therefore important that political parties and the public sector construct an environment that is perceived to be welcoming for all people who want to get involved in politics. It is important to remove physical obstacles, and to ensure that everyone who wants to work with political commissions have the opportunity to participate at meetings and familiarise themselves with documents. Everyone must also be treated in a welcoming manner so that more people can be politically active.

The Swedish Disability Federation considers that:
- The provisions in municipal legislation that states that municipalities and county councils should act to enable elected representatives with disabilities to participate in dealing with matters on the same conditions as other elected representatives must be followed.
- The provisions of the Planning and Building Act regarding easily remedied obstacles, must be followed so that premises and public places are accessible for the general public, among which are places for political activity.
- In cases where new constructions or extensions are made to political premises, the Act on Technical requirements for Constructions Works must be followed. New constructions or extensions must always be made accessible for people with disabilities.
- The provisions in ordinance 2001:526 regarding the state authorities' responsibility for implementation of disability policies must be followed so that the state authorities' premises, information and activities are accessible.

- In cooperation with the disability movement, a checklist can be drawn up for personnel who are responsible for the administrative aspect of the political activity. The list should cover accessibility to premises, information and communication.

- The rules and regulations for the subsidised transport service must be changed to enable travel to take place in accordance with individual needs both with regard to punctuality and collection times. Allocation of number of journeys, and aspects such as exemptions from car-pooling must also be reviewed.

b. To vote and to be elected (concerning point b in the article)
With regard to point b in article 25, the point of departure for the Swedish disability movement is the Bill of Electoral Rights for Citizens with Disabilities.96 “The Bill of Electoral Rights defines and promotes the universal right of people with disabilities in relation to all aspects of the electoral process, and the state’s obligation to make this right a reality. In particular, the Bill of Electoral Rights: highlights the right of voters with disabilities, including those who are blind, to vote in secret; the right to vote at public polling places that are accessible to voters with mobility limitations; and the right to vote without restriction to individuals with intellectual or psychiatric disabilities.”

The International Foundation for Election Systems (IFES) has produced a report on Sweden in which provisions concerning voting procedures are dealt with from a disability perspective; “Laws and Regulations”: A country-by-country analysis of election laws, constitutions and regulations, and how these affect citizens with disabilities. This report is attached as appendix number 4. There is some supplementary information below.

Accessibility in polling stations
The "Bygg Klokt " (Build Wisely) association conducted a questionnaire survey97 concerning accessibility to polling stations for the election of 17 September 2006. The questionnaire was answered by members of disability organisations as well as electoral committees. An inventory was made of 562 premises. Among other things the answers showed that in about 10 percent of the premises people with mobility impairments are not able to enter through the main entrance. A major problem in this context is the shortage of parking and the possibilities of parking close to the main entrance. (people who have mobility impairments might find it difficult to get from a car to the polling station). About 22 percent of the polling stations did not have access to suitable parking.

Voting in advance
From the 2006 election onwards, voting can take place in places other than just post offices. This will also enable a large number of accessibility issues to be resolved. From this election, those who have previously found it difficult to enter their local post office in order to vote can, for example, go to a library to cast their vote.
The Swedish Disability Federation considers that:

- Being able to go and vote is a human right and also a responsibility for citizens. Polling stations must therefore be accessible for all citizens. It is not sufficient that the premises for early voting are accessible as a person who has voted early is entitled to go to the polling station on election day to recast their vote. It must also be possible to guarantee that voters are able to sit in seclusion to enter their ballot papers.

**c. To have access to public service** *(concerning point c in the article)*

**Public service under government auspices**

The UN’s standard rules emphasise that states should create the necessary conditions to enable people with disabilities to work within the public sector. The national action plan for disability policy points out that the State has a specific responsibility in setting an example. Despite this, SCB’s survey "The situation for disabled people in the labour market" from 2005 reveals that people with disabilities work in the civil service to a lesser extent than the population as a whole. Of employed people with functional impairments, only 4.6 per cent work for the State as compared with 5.9 per cent of the population as a whole. Only 3 per cent of those with reduced working capacity who are in employment work for the State.

A study commissioned by the Swedish Disability Ombudsman in 2003 shows that just over two thirds of State authorities recruited personnel in such a way that people with disabilities were not excluded. This concerns, among other things, how advertisements are formulated, how the application process is handled and how interviews are held. Less than half the authorities stated that they had considered support and adaptation measures.

**Public service under the auspices of municipalities and county councils**

The statistics that are available concerning working participation by people with disabilities under the auspices of municipal and county councils covers all kinds of services that are the responsibility of municipalities or county councils, among which are staff at day nurseries and hospitals. Several of these services consequently fall outside the administrative section that the Swedish Disability Federation understands by the term public service. Existing statistics do however show that people with disabilities work, in comparison with the population as a whole, to a larger extent within municipal sectors. (approximately 25 percent compared with 19.5 percent). With regard to employment within county councils, it appears that people with disabilities are employed to an equal extent as people without disabilities. The available statistics encompass all kinds of services within municipalities and county councils. It is therefore impossible to say whether people with disabilities are given equal opportunity for public service.

The Swedish Disability Federation considers that:

- The State administration should also keep the disability policy target of diversity in focus in its role as employer. This means, for example, reviewing recruitment procedures.
Conclusions and recommendations

Despite there being a strong political desire to give all citizens the right to participate in the political process, it is still hard for people with different disabilities to exercise their right under article 25. The right of all citizens to participate in the political process is laid down in Sweden’s constitution. There are also good laws with the aim of creating preconditions for people with disabilities to participate in the political process. Among these are the provisions of the Planning and Building Act regarding simply remedied obstacles, as well as “the Act on technical requirements for construction works” which establishes that all new construction and extensions must be made accessible for people with disabilities. The greatest problem for people with disabilities in Sweden is that these laws are not followed, and that there is too little awareness among people in general. That it should be possible to maintain information and communication in a manner that is accessible to the individual must be a matter of course in all political activity. The good news is that in autumn 2006 the Handisam agency has been commissioned by the government to investigate the accessibility situation with regard to municipal premises for political activity. Handisam is also going to make an inventory of how people with disabilities are treated in political life. The Swedish disability movement welcomes Handisam’s new commission and considers that the results must represent the basis for continuing work to achieve participation on equal terms for people with disabilities. At the same time, it must be emphasised here that political activity takes place at more levels in society than at municipal level. It is therefore of the utmost importance that prevailing laws are followed at all levels in society and that awareness of the different circumstances of different people is improved.

The Swedish Disability Federation recommends the Swedish state to:

- Ensure that the provisions in municipal legislation that state that municipalities and county councils must work to enable elected representatives with disabilities to participate in dealing with matters on the same terms as other elected representatives are followed.

- Ensure that the Planning and Building Act’s provisions concerning simple remedied obstacles and the Act on Technical requirements for Constructions Works are followed in order to make places for political activity accessible for people with disabilities.

- Ensure that the provisions in ordinance 2001:526 regarding the state authorities’ responsibility for implementation of disability policies are followed so that the state authorities’ premises, information and activities are accessible for people with disabilities.

- Review the rules and regulations for the special transport service to enable travel to take place according to individual needs both with regard to punctuality, collection times, allocation of number of journeys, and aspects such as exemptions from car-pooling when so required.
Article 26 – Equality before the law

This section deals with:
- Laws that directly treat people differently
- Laws that indirectly treat people differently

Laws that directly treat people differently

**The Prohibition of Discrimination Act**
The Prohibition of Discrimination Act (SFS 2003:307) was enacted in 2003 and stipulates that nobody should suffer inferior treatment on grounds relating to ethnic background, religion or faith, functional impairment or sexual orientation. The Act protects individuals when purchasing goods and services and also when purchasing a home or in housing. The Act also contains a number of provisions relating to working life in the broad sense of the term. For example, it protects against discrimination in employment mediation and when starting up one’s own business. Remarkably, disability as a ground for discrimination does not, however, apply in all sections of the Act. The areas not covered are social services, the subsidised transport service, the national subsided transport service, home adaptation, social insurance, unemployment insurance, healthcare and medical treatment (sections 10-13). The fact that these discrimination grounds are not given the same protection as other discrimination grounds under the law is not acceptable.

Proposed new anti-discrimination act
On 24 February 2006, a Discrimination Committee appointed by the Swedish Government presented a final report on discrimination legislation in Sweden. In the final report, the committee proposes, among other things, the introduction of a new act relating to prohibition and other measures to combat discrimination. It is proposed that the new act will in large part replace the current discrimination legislation, but also provide extended protection for more people and in a number of areas of society. The act should have the objective of countering discrimination and otherwise promoting equal rights and opportunities regardless of gender, sexual identity, ethnic background, religion or other faith, physical impediment, sexual orientation or age. The Committee’s point of departure has been that protection against discrimination should be as equal as possible for the various discrimination grounds.

The new law on prohibition and other measures against discrimination proposes that no distinction is permitted to be made between the different discrimination grounds as is the case at present. At the time of writing the text of the law has not yet been completed. Proposals tabled by the Discrimination Committee may rectify some of the deficiencies that the Disabled Movement considers to exist in current legislation in relation to people with functional impairments.

Discrimination in the area of insurance
The Act (2006:351) on Genetic Integrity etc.
A new act covering insurance and genetics came into force on 1 July 2006. It entitles the insurance companies to seek out and make use of genetic information when insuring adults for large amounts (1.2 million Swedish kronor for one-off payments, or alternatively, periodic payments of SEK 160,000 per year, i.e. SEK 13,000 per month).
This exception has a major effect on persons with disabilities. In practice, the provisions mean that people who have a disability due to a genetic inheritance are not able to take out such an insurance policy.

People who have a disability due to a genetic inheritance are at an equally great risk as others of having an accident, being run over by a car, having an icicle fall on their head etc. and must be given an equal opportunity to take out insurance.

**Discrimination in the Schools Act**

Independent schools are supposed to be open to all. A clause in the Schools Act means that it is nevertheless still possible for a free school to deny a student entry if he or she needs substantial extra resources. This may, for example, be if the student needs an assistant or if the school has to be converted.

Children and young people with a disability that means that their schooling requires expensive or extensive adaptation measures do not currently enjoy the same opportunities as others to choose school. According to the Schools Act (1985:1100) the principle rule is that for independent schools to receive a grant from the municipality, they have to be open to all pupils, but that exceptions may be made for accepting such pupils that would entail substantial organisational or financial difficulties for the school.

**Laws in the area of work**

There are further laws that can entail inequality before the law. Several of them are operative in the field of labour legislation. The Swedish disability movement appreciates that the state of an individual’s health can in some cases be of crucial significance. It is however of the utmost importance that peoples’ health and functional capacity does not entail lack of equal protection and rights under the law. An example that can be mentioned is the Civil Aviation Act (1957:297) which lays down that:

**Chapter 4**

5 § Individuals who wish to undergo training for a civil aviation certificate must have a provisional licence. Provisional licences are issued by the Civil Aviation Authority. The licence is valid for a particular period. There can be restrictions so that it is valid under certain conditions. The provisional licence may only be given to those individuals who, with respect to their age, state of health, physical and mental condition and personal circumstances in general, can be considered suitable to hold a certificate, The assessment process takes into account whether the applicant is known for sobriety and propriety and whether it can be assumed that he will demonstrate the responsibility and judgement required of a certificate holder.

6 § For a civil aviation certificate to be issued or extended requires that the applicant has a valid provisional licence, that he still fulfils the requirements indicated in 5 §, third section, and that he complies with the requirements stipulated for the certificate in terms of age, knowledge, experience and skill.
There are similar clauses in the Act (1990:1157) on Safety in Underground Trains and Trams, the Professional Transport Act (1998:490) which concerns categories such as drivers of cars, trucks and taxis etc, and “the Maritime Safety Act” (1988:49).

It must be strongly emphasised here that a disability is not the same thing as an impaired state of health. However, in some cases a disability can entail reduced health. As the legal texts are currently formulated, there is an increased risk that an employer or body that issues permits will, on account of a lack of knowledge and preconceived ideas, screen out a person with a disability without having made an assessment of whether the disability is relevant in the context.

**Indirect discrimination by laws**

At present, shortcomings in accessibility are effectively excluding people with disabilities from large areas of social life. In Sweden, all people have the legal right to move freely throughout society, to live where they want, to choose their own recreational pastimes, to select their own education and job, and to have access to all the social information that interests them. Despite this, there are a large number of inhabitants who are not able to enjoy these rights. In practice, lack of accessibility means that people with disabilities are to some extent being deprived of their fundamental freedoms and rights.

The new act relating to prohibition and other measures to combat discrimination proposes that failure to adopt accessibility measures is to be regarded as discrimination. At the time of writing the text of the law has not yet been completed. Proposals tabled by the Discrimination Committee should however be able to considerably improve the situation for people with disabilities in Sweden.

**The Swedish Disability Federation considers that:**

- The distinction that is made between the different grounds for discrimination in the law on discrimination is directly discriminatory in relation to people with disabilities and must be removed. With regard to other anti-discrimination legislation in Sweden, you are referred to the Swedish Disability Federation’s statement on the “Coherent Discrimination legislation” report, SOU 2006:22

- Current laws, ordinances and regulations must be reviewed so that inequalities before the law are noted and can be abolished.

- The Swedish disability movement welcomes the proposal of the Discrimination Committee that neglecting to take accessibility measures is to be viewed as discrimination and would like to emphasise that all manner of deficient accessibility must be rectified to enable people with disabilities to profit from their human rights on the same conditions as others. Failure on the part of the government, county councils and municipalities, as well as private parties, to create accessible premises, activities and information must be considered as discrimination of people with disabilities.
Conclusions and recommendations

The Swedish disability movement welcomes the Swedish Government’s intentions and will to draft a new law outlawing discrimination. It is proposed that the purpose of this new law is to combat discrimination and to promote equal right and opportunities in other ways. These positive intentions must however be supplemented with an overview of current laws, ordinances and regulations to bring them into line with the intentions in the proposed new discrimination legislation. The information in this section shows that inequality before the law does exist in Sweden.

In its concluding observation of 24 April 2003, the human rights committee states the following: “13. The Committee expresses its concern at information reporting persistent manifestations of racism and xenophobia, whether refusal of access to public places because of ethnicity, difficulties for foreigners in the job market (articles 19 and 26 of the Covenant). The State party must make a sustained effort to improve the application of laws punishing racially motivated crimes, the integration into society of members of minority groups, and the dissemination of a culture of tolerance, in particular as part of primary and secondary education.”

The committee expresses its unease over reports of continuing manifestations of racism and xenophobia, both in the form of refused entry to public places on account of ethnicity, and in the form of difficulties for foreigners in the labour market (articles 19 and 26 in the convention). Sweden must make persistent efforts to improve the application of laws that penalise crimes motivated by racism, to integrate members of minority groups into society, and to disseminate a culture characterised by tolerance, particularly as a part of primary and secondary tuition.”

The Swedish disability movement would like to emphasis that the situation described by the committee is comparable with the situation for people with disabilities. A united Swedish disability movement would therefore like to encourage the committee to also expressly illuminate the situation for people with disabilities.

The Swedish Disability Federation recommends the Swedish state to:

- Ensure that the Prohibition of Discrimination Act (SFS 2003:307) provides the same protection on all discrimination grounds.

- Ensure that a fundamental inventory is made of current laws, ordinances and other regulations that conflict with the principle of equal treatment so that the inequality of people before the law is noted and abolished.

- Work to ensure that a lack of accessibility comes to be classed as discrimination
ANNEX 1

SUMMARY OF RECOMMENDATIONS
In this document, the Swedish Disability Federation has summarised all the recommendations set out in the alternative report. In some cases the recommendations are linked to each other and the recommendations have therefore been amalgamated. An example is the recommendations against discrimination which in this case include both article 2 and 26.

Some of the recommendations in this document extend over several rights areas. Special emphasis among these must be given to recommendations regarding increased accessibility. Accessibility to the physical environment, communication and information are fundamental in enabling people with disabilities to participate on equal terms. Other prerequisites for participation are clearly set out in the UN’s standard rules which, together with other documents from the UN that are elucidated in the report, have served as guidance for the recommendations in this report.

The Swedish Disability Federation recommends the Swedish state to:

Articles 2 and 26 - Discrimination
1. Ensure that a fundamental inventory is made of applicable legislation (including the discrimination laws), ordinances and other regulations with the aim of doing away with the inequality that prevails under the law. All people must be given equal rights and conditions to benefit from their civic and political rights. The review must also encompass the individual’s right to have their case heard in situations that are not currently covered by prevailing options. The review must be done in collaboration with the disability movement and other concerned groups.

2. Ensure that failure to take accessibility measures is deemed to be discrimination.

3. Review its public service agreement with Sveriges Television to guarantee a reflection of people with functional impairments that does not reinforce stereotypes and attitudes that make it more difficult for people with functional impairments to be integrated in society on equal terms. There are examples of organised diversity work within the public service media in the international arena.

4. Undertake a national information campaign with the aim of distributing knowledge about human rights. In various situations in life people must be provided with easily accessible information on which rights they have, and where they can turn if they perceive that their rights are not being met. Examples of where information should always be available are places where people are present such as in nine-year compulsory school, upper secondary school, waiting rooms at care institutions and libraries.
Article 3 - equality
5. Work to ensure that both the gender and disability perspective permeates studies, planning, implementation, evaluation and revision of all social initiatives at all levels of society and in research.

6. Initiate a study that thoroughly investigates and documents to what extent women and girls with functional impairments are discriminated against compared with men and boys with functional impairment as well as in relation to girls, boys, men and women who do not have disabilities. Such a survey must be carried out in all areas that are covered by this convention, as well as by the rights of the convention on economic, social and cultural rights. The committee’s findings must then form the basis for the implementation of the Convention’s rights.

Article 6 - The right to life -
7. Review the entire body of legal regulations that surround issues of patient safety with the aim of reducing mortality within the care services. This includes:

- ensuring that the willingness to report increases among both hospital staff and patients so that shortcomings in health care are always noted,
- developing a system to utilize these points of view so that the quality of all care can be systematically guaranteed,
- putting in place a nationwide feedback system so that patient safety can be uniformly ensured throughout the entire country.

Articles 6, 7 and 8 - Violence, abuse and sexual exploitation
8. Ensure that violence and abuse against girls, boys, women and men with disabilities can be identified. This includes the social services, healthcare and medical treatment sectors having to formulate strategies and methods to draw attention to the occurrence of violence, and a mode of procedure for supporting girls, boys, women and men with disabilities who have been subjected to different forms of abuse. This issue should also be specifically identified in national training events for staff groups in the care, school, police and legal systems.

9. Ensure that crisis centres for women and men are made accessible for disabled people, with regard to physical accessibility, information and communication.

10. Review existing guidelines for care personnel with the aim of bolstering expertise and ability to intervene when abusive situations arise at different forms of accommodation.

Article 8 – Forced labour
12. Undertake a survey of how individuals perceive the “daily activity” with the aim of reducing the occurrence of forced activities.

Article 9 – Arbitrary deprivation of liberty
13. Implement the Mental Responsibility Committee’s proposal on “closed accommodation for some disabled people”.

14. Ensure that the psychiatric reform is implemented in its entirety so that girls, boys, women and men with mental illnesses and disabilities receive adequate care, habilitation, rehabilitation and support so that unnecessary deprivation of liberty does not have to take place.

15. Ensure that judges who preside over cases concerning compulsory care have the necessary knowledge about different mental disabilities so that these can be put in relation to the individual’s circumstances and overall living situation. The judge must consider what is best for the “patient”, and not simply follow the medical report.

16. Review, clarify and reinforce the existing laws so that individuals with disabilities are guaranteed the right to be informed of the reasons for their arrest. Both written and verbal information in alternative formats or via an interpreter must be available.

Article 10 – Treatment and rehabilitation while deprived of liberty
17. Ensure that the Prison Service’s responsibility for attending to the needs of individual girls, boys, women and men are regulated in legislation.

18. Ensure that personnel within the police, the judicial system and the prison service have more knowledge on how girls, boys, women and men with disabilities should be treated, and on the different possibilities, needs and preconditions different disabilities can entail.

19. Take necessary measures to make places for detention accessible for all people.

20. Ensure that girls, boys, women and men within compulsory psychiatric care and all those who receive forensic psychiatric care are kept separate. The forms of care for the two groups are different and must take place in different establishments.

21. Take vigorous measures to ensure that girls, boys, women and men who have been deprived of their liberty receive the treatment they need to be able to return to and become reintegrated into society after being in custody. The treatment must be adequate and individually adapted.

22. Ensure that the country’s prisons fully comply with the law on correctional treatment in institutions.

23 Consider lifting the reservation in article 10 point 3.
Article 12 – Freedom of movement
24. Ensure that an action plan that includes the entire transport sector with respect to an accessible public transport system is drawn up and followed.

25. Adopt vigorous measures so that the provisions of the Planning and Building Act on easily remedied obstacles and the Act on Technical Requirements for Construction Work are followed.

26. Ensure that the national environmental target "Safe radiation environment" is given high priority and is supplemented with an environmental quality standard that is based on the most sensitive people, i.e. those with electromagnetic hypersensitivity and those who are allergic to micro-organisms.

27. Immediately allocate funds for interdisciplinary research and empirical surveys within the field of radiation, electromagnetic hypersensitivity, electricity, magnetic fields and health effects.

28. Review the provisions in the "Act (199:387) on support and service for certain functionally disabled persons" or alternatively construct guidelines for how the act is to be interpreted so that individuals, regardless of which municipality they live in or want to move to are given an equal opportunity to fully utilise their freedom of movement.

Article 14 – Equality before the courts
29. Commission the concerned authorities within the judicial system to specify how current provisions on accessibility to physical environments and information, and also to communication, understood as access to interpreters, is applied and which measures have been taken in order to increase accessibility.

30. Review, clarify and reinforce existing laws to guarantee individuals the opportunity to obtain both written and verbal information from the courts and the administrative authorities in alternative formats or via an interpreter.

31. Commission the National Police Board to specify how girls, boys, women and men with disabilities are looked after in that part of the legal process for which the police are responsible with regard to how, where and by whom people with disabilities are interrogated.

Article 16 – A person from a legal point of view
32. Ensure that the provisions of the Children and Parents Code regarding trusteeship are supplemented with provisions enabling trusteeship to be reviewed at regular intervals.

Article 17 – Intrusion into private life
33. Reduce the risk of unwarranted intrusions into people’s private lives by supplementing the “Compulsory Psychiatric Care Act (1991:1128)” (LPT) and "the Forensic Psychiatric Care Act (1991:1129)" with provisions that the Chief Medical
Officer must consult with patients and their relatives before the decision on restrictions and that the consultation and decision are logged and reported to the supervisory authority. The law must also include provisions on regular compulsory supervision of how the organisations are applying the law.

34. Appoint a commission to review and analyse how the courts are judging cases that involve intrusion into people’s private lives, deprivation of liberty and forced medication. Such an enquiry must also consider any gender differences. It is of particular importance to analyse the level of independence shown by the courts in relation to the doctors/psychiatrists.

Article 18 – Freedom of religion
35. Entrust the Commission for State Grants to Religious Communities with the task of placing demands on the denominations to draw up and implement action plans for increased accessibility to ensure that girls, boys, women and men with disabilities have real opportunities to participate in the activities of religious communities on the same terms as others.

36. Review the provisions in the Education Act which allow independent schools to refuse entry to pupils that need extensive support during their schooling and set requirements on physical accessibility for approval of permission to start and operate free schools.

Article 19 – Freedom of expression
37. Ensure that radio and TV programmes are made accessible through subtitling, interpreting, reading aloud etc. Requirements must be placed on both public service and commercial channels. The government must also ensure that the disability organisations advisory role according to the UN’s standard rule 18 is safeguarded with regard to increased accessibility to the media.

38. Appoint an independent body to ensure that different media and authorities meet requirements for accessibility to information and communication.

39. Further contribute to internationally accepted guidelines and technical standards being followed in both Sweden and in the countries with which Sweden cooperates.

40. Coordinate the responsibility for accessible information and communication.

Article 21 – The right to peaceful assembly
41. Take substantial measures to ensure that the provisions of the Planning and Building Act stating that simply remedied obstacles should be eliminated, the Act on Technical Requirements for Construction Works and also Ordinance 2001:526 “On the responsibility of national authorities for the implementation of disability policies” are followed.
Article 22 – Freedom of association
42. Ensure that the guidance given by the Social Insurance Office on how sickness benefits and activity compensation are awarded, is reviewed and amended to give all people who draw sickness benefit and activity compensation respectively, the opportunity to fully utilise their freedom of association.

Article 23 – The right to have a family
43. Ensure that "the Social Services Act" and "the Act relating to support and service for certain physically impeded individuals" are observed by:
- working to ensure that a comprehensive system with strong sanctions is developed for cases where decisions laid down by both the Social Services Act and the Act on support and service for certain physically impeded individuals, are not followed.
- working to ensure that national guidelines for reasonable processing times and reasonable times for implementation are drawn up.

44. Formulate regulations that guarantee collaboration and substance for initiatives in which local authorities and county councils are at the same time the responsible authorities.

45. Ensure that parents in custody and their children are given the opportunity of meeting and having regular contact so they can develop and maintain the best possible parenthood and family relations.

46. The laws that concern leave of absence for detainees within custodial care are reviewed and altered so that the possibility exists to grant leave of absence on the basis of the child’s need for contact with a detained parent.

Article 24 – The child’s right to protection
47. Develop mechanisms to follow up the responsibility that is delegated and distributed to the municipalities and county councils in order to ensure that all girls and boys with disabilities have their rights for care, habilitation and rehabilitation, support and service met without discrimination.

48. Ensure that the Office of the Children’s Ombudsman’s proposals for measures in the report:
"The Office of the Children’s Ombudsman’s report br2004:01, Don’t punish the child! A study of the child’s perspective within correctional facilities” must be considered and necessary actions taken to enable prisoners and their children to have the best possible preconditions to live a family life and maintain and develop their child/parent relations.

Article 25 – Participating in political processes
49. Ensure that the provisions in municipal legislation that state that municipalities and county councils must work to enable elected representatives with disabilities to participate in dealing with matters on the same terms as other elected representatives are followed.
50. Ensure that the Planning and Building Act’s provisions concerning simply remedied obstacles and the Act on Technical requirements for Construction Works are followed in order to make places for political activity accessible for people with disabilities.

51. Ensure that the provisions in ordinance 2001:526 regarding the state authorities’ responsibility for implementation of disability policies are followed so that the state authorities’ premises, information and activities are accessible for people with disabilities.

52. Review the rules and regulations for the special transport service to enable travel to take place according to individual needs both with regard to punctuality, collection times, allocation of number of journeys, and aspects such as exemptions from car-pooling when so required.
ANNEX 2

Disability organisations that support the report
The Swedish Aphasia Association.
Swedish Asthma and Allergy Association.
Bloodcancer Association.
The Swedish Breast Cancer Association.
The Swedish National Association for Deaf, Hearing impaired and Language impaired Children.
Swedish Federation of People With Mobility Impairments.
The Swedish Association for the ElectroSensitive.
Swedish Hemophilia Society.
The Swedish Association for Persons with Difficulties in Reading and Writing/Dyslexia.
The Association of the Swedish Deafblind.
Swedish National Society for Persons with Intellectual Disability.
The Swedish Heart - Children’s Association.
The Swedish Heart- and Lung Association.
The Swedish Association of Hard of Hearing People.
ILCO-Sweden Ostomy Association.
The Swedish Association of Persons with Neurologically Disabilities.
Swedish OCD foundation Ananke.
Primary Immunodeficiency Organization.
Swedish Psoriasis Association.
The National Association for Disabled Children and Young People.
The Swedish Rheumatism Association.
Swedish Fibromyalgia Association.
The Swedish National Association Attention.
The National Society of Autism.
The Swedish Cystic Fibrosis Association.
HIV-Sweden
Swedish Association of Brain Injured and Families.
The Swedish Association of People with Stomach and Bowel Diseases.
The Swedish Association for Kidney Patients.
The National Organisation of Cancer of the Prostate.
The Swedish National Association for Social and Mental Health.
The Swedish Association of Survivors of Traffic Accidents and Polio.
The Swedish Coeliac Society.
The Swedish Diabetes Association.
Swedish National Association of the Deaf.
The Swedish Epilepsy Association.
The Swedish Association of Laryngectomees.
The Swedish Stuttering Association.
Swedish Schizophrenia Fellowship.
The Swedish Stroke Association.
The Swedish Parkinson’s Disease Association.
The Swedish Association of Rare Disorders.
The Swedish Association of Dental Mercury Patients
Diabetes Youth Association in Sweden
Swedish Young psoriasis Association
The Swedish Organisation for Hard of Hearing Young People
Swedish Association of Visually Impaired Youth
The Swedish Cochlearimplant Children Society
Swedish Parent Association for Dyslexic Children
The Swedish Thalidomide Society, NGO
The Swedish Ichthyosis Association
The Swedish Migraine Association
The Swedish Association of the Visually Impaired
The Association of Finish Speaking Visually Impaired in Sweden
The Association of Late-Deafened in Sweden
Forum – Women and Disability in Sweden
ANNEX 3

List of abbreviations
ADHD  Attention Deficit/Hyperactivity Disorder
ASP   Antisocial personality disorder
BO    Children`s ombudsman
BVC   Child Care Centrec
BrB   The Penal Code
CP    Cerebral Patsy
CEDAW Convention on the Elimination of All Forms of Discrimination against Women
DAMP  Deficits in Attention, Motor and Perception
DO    The Ombudsman against ethnic discriminations
ECT   Electric stimulantion
ECPT  European Convention for the Prevention of Torture
ECPAT End Child prostitution, Child Pornography and Trafficking in children for sexual purposes
FUB   Swedish National Society for Persons with Intellectual Disability
Handisam Swedish agency for disability policy coordination
HSAN  The Disciplinary Board of Health Care and Medical Treatment
HRC   The Human Rights Committe
HO    The Swedeish disability Ombudsman
HomO  The Office of the Ombudsman against discrimination on grounds of sexual orientation
HSL   Healthcare and Medical Treatment Act
ILO   International Labour Organisation
IFES  International Foundation for Election Systems
Jämo  Equal opportunities ombudsman
LSS   Act concerning Support and Service for Persons with Certain Functional Impairments
LASS  The Assistance Benefit Act
LPT   The Compulsory Mental Care Act
LVM   The Care of Abusers (Special provisions) Act
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>LVU</td>
<td>The Care of Young Persons</td>
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<tr>
<td>LPO 94</td>
<td>Curriculum for the Compulsory School system, the Preschool and the leisure-time Center</td>
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<tr>
<td>LRV</td>
<td>The Forensic Mental Care Art</td>
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<tr>
<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
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<td>PBL</td>
<td></td>
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<tr>
<td>RKP</td>
<td>The Swedish Criminal Investigation Department</td>
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<tr>
<td>RÅ</td>
<td>The prosecutor general</td>
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<tr>
<td>SCB</td>
<td>Statistics Sweden</td>
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<tr>
<td>SFS</td>
<td>Swedish Code of Statutes</td>
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<tr>
<td>SoL</td>
<td>Social Services Act</td>
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<td>SOU</td>
<td>The Assistive Devices Report</td>
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<td>Sis</td>
<td>The National Board of Institutional Care</td>
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<td>SST</td>
<td>Swedish Commission for State Grand to Religious Communities</td>
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<td>SSRI</td>
<td>Selective Serotonin Reuptake Inhibitors</td>
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<td>VRI</td>
<td>Nosocomial Infection</td>
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ANNEX 4

Ur rapporten "Laws and Regulations": A country-by-country analysis of election laws, constitutions and regulations, and how these affect citizens with disabilities.

International Foundation for Election Systems (IFES)

Sweden - General Right to Vote

Constitution:
(1989)
• Article 2 states: "Every Swedish citizen residing in Sweden is entitled to vote in Riksdag elections. Provisions are laid down in law regarding the voting rights of Swedish citizens who are not resident in Sweden…"

Electoral Law:
(1997)
• Chapter 1, section 2 states, "A Swedish citizen who attains the age of 18 years no later than on election day and who is resident in Sweden or has once been registered as resident in Sweden is entitled to vote in elections to the Riksdag."

Voter Assistance by Other Citizens

Chapter 9, section 2 states, "To make their vote, voters shall for each kind of election take one ballot paper for the party they wish to vote for. If they wish to make a separate personal vote, they shall make a mark for the candidate whom they prefer to be elected. Thereafter, the voters shall themselves place the ballot paper they chose into a vote envelope for each kind of election."

• Chapter 9, section 2 continues, "Voters who as a consequence of a physical disability cannot prepare or hand in their vote in the prescribed manner may appoint someone to assist them when voting."

• Chapter 9, section 5 states, "… Voters may vote by a proxy or rural postman in accordance with what is stated in Chapter 14. Voters may only vote by post under the Postal Voting in Certain Cases Act (1997:159)."

• Chapter 10, section 8 states, "If a polling station is not accessible to a voter with a physical disability, the electoral officer shall, notwithstanding that stated in the first paragraph, receive the voter's vote envelope outside the polling station if this can be done in a secure form."

• Chapter 12, section 1 states, "The Central Election Authority may decide that special voting shall be arranged at hospitals, houses for the aged, prisons or similar care establishments or care institutions."

• Chapter 14, section 2 states, "Voters who are ill, disabled or old and subsequently cannot come in person to vote at their polling station or at any other voting place may submit their ballot paper by proxy."
• Chapter 14, section 3 states, "A proxy may be the voter's spouse, cohabitee, child, grandchild, spouse's child, cohabitee's child, father, mother or sibling. A proxy may also be a person who professionally or in a manner similar thereto provides the voter with care or in another manner usually assists the voter in personal affairs. The person who is engaged as a proxy must have attained the age of 18 years."

Electoral Law: (1997) • Chapter 9, section 4 states, "The municipality may use as polling stations premises that are not accessible for voters with physical disabilities only if the municipality cannot use premises accessible to them. If the municipality intends to use premises that do not satisfy the requirement for accessibility, the municipality should consult the Community Administrative Board before it decides on the matter. The municipality shall state why it made the assessment that some other premises could not be used instead."

• Chapter 10, section 16 states, "The municipality should arrange voter transportation on the election day for voters who live in remote or isolated places for whom it is expensive or takes a long time to get to the polling station."
Fotnoter

1 Skr. 2005/06:110 Socialdepartementet, 2006

2 Nilsson, Frida, Kommunalt domstolstrots – konflikten mellan kommunal självstyrelse och legalitetsprincipen, Lunds universitet, juridiska fakulteten, 2005

3 Ds 2001:34, Erfarenheter av ett utbrett brukarinflytande

4 Ibid

5 Statens offentliga utredning, SOU 2006:22, En sammanhåll den diskrimineringslagstiftning

6 Näringsdepartementet, 2000, Den svenska regeringens femte periodiska rapport om åtgärder för genomförande av Konventionen om avskaffandet av all slags diskriminering av kvinnor, s. 3.

7 Den jämställdhetspolitiska propositionen, Delad makt – delat ansvar ( prop 1993/94:147)

8 Jämställd Socialtjänst? Könsperspektiv på socialtjänsten, Socialstyrelsen 2004

9 Eva Swahn och Karin Schenk-Gustafsson 2005

10 Anita Bengtsson-Tops, Vi är många. Övergrepp mot kvinnor som använder psykiatrin. En omfångsstudie. RSMH 2004


12 Ibid. s. 17.


14 Kuriren 2006 01 30.

15 Patientsäkerhet och patientsäkerhetsarbete, en översikt, Socialstyrelsen 2004

16 Aa sid 38

17 Grunddata är inhämtad från Socialstyrelsens hälsodateregister och EHLASS-registrering.

18 Vårdplatser per 1000 invånare 2001 (OECD 2003)

19 Kris inom svensk sjukvård, Sveriges läkarförbund 2004

20 Socialstyrelsen Vård och stöd till patienter med schizofreni – en kunskapsöversikt s. 48 ff.

21 Siffrorna är framtagna och analyserade av Mikael Rying, Kriminolog vid länskriminalpolisen i Stockholm, Svenska dagbladet, 17 maj 2006


23 Levnadsnivåundersökning 2005, En rapport om levnadsnivån för rörelsehindrade hörselskadade, döva och synskadade personer. Utredningsinstitutet HANDU AB
24 Våld mot kvinnor med psykiska funktionshinder - Förekomst, bemötande och tillgång till stöd, Socialstyrelsen, 2005, s 32

25 Bengtsson-Tops, omfångsstudie (2004) om våld mot kvinnor som har kontakt med psykiatrin

26 Regeringens proposition 2002/03:35, Mål för folkhälsan, sid 41


28 Kubitz (2002)

29 Kubitz Astrid 2002

30 En studie av känndom om utnyttjandet av minderåriga i prostitution, pornografi och trafficking © ECPAT Sverige 2001, reviderad utgåva 2005

31 Studie genomförd på uppdrag av ECPAT, Lunds universitet, professor Carl-Göran Svedin.

32 SOU 2004:71, Statens offentliga utredning, sexuell exploatering av barn och människohandel i Sverige, sid 72

33 För mer information, se artikel 6, 7 och 14 samt Den svenska handikapprörelsens alternativa rapport om de ekonomiska, sociala och kulturella rättigheterna, artikel 10.

34 A A sid 73

35 R168 Vocational Rehabilitation and Employment (Disabled Persons) Recommendation, 1983

36 SIS - Statens institutionsstyrelse är en statlig myndighet med uppdrag att vårda ungdomar i åldern 12-21 år av sociala skäl samt vuxna missbrukare. Vården sker oftast utan den enskildes samtycke med stöd av LVU (lagen om vård av unga), LVM (lagen om vård av missbrukare) samt SoL (socialtjänstlagen). SIS ansvarar även för verkställighet av straff för ungdomar i åldern 15-17 år som dömts för brott enligt LSU (lagen om verkställighet av sluten ungdomsvård). Perspektiv på Kommunernas insatser för personer med psykiska funktionshinder, Socialstyrelsen, 2005


38 Dalteg, A, Gustafsson P, Levander S. Hyperaktivitetssyndrom vanligt bland interner.


40 ADHD inte bara en barnpsykiatrisk diagnos. Läkartidningen 1996 95: 3078-3080


42 Statens offentliga utredningar (SOU 2002:3, Psykisk störning, brott och ansvar, s.261 ff
Några fängelsepsykologers erfarenheter av och syn på fängelsepåföljd för personer med utvecklingsstörning, Turstedt, A & Rahm, Stockholms Universitet, Institutionen för socialt arbete, Socialhögskolan, 2005

RAPPORT 14, Kvinnorna på Hinseberg, En Studie av kvinnors villkor i fängelse, ODD LINDBERG, Kriminalvårdsverket, 2005

Lag (1974:203) om kriminalvård i anstalt

Rapport 6, Att studera i fängelse, Utvärdering av klientutbildning inom kriminalvården, Claesson, S, Dahlgren, H, Göteborgs universitet, Institutionen för pedagogik och didaktik, 2002

A a

Rapport 14 aa, sid 81 ff

Rapport 14 aa, sid 109 ff

Aa, sid 109


Sexualbrottsofferutredningen, Anmälan och utredning av sexualbrott, Förslag på förbättringar ur ett brottsofferperspektiv, Promemoria av Justitiedepartementet, 2005, sid 65

Aa, sid 90-91

Ann Christin Cederborg och Michel Lamb (2004) I vid s

Likhet inför lagen, Christian Diesen, Claes Lernestedt, Torun Lindholm, Tove Pettersson, Natur och Kultur, 2005, sid 320 ff

Vem bryr sig, Brottsoffer med funktionshinder, Barbro Lewin, 2002

Sexualbrottsofferutredningen, Aa, sid 65

Rapport 98, Föreningslivet i Sverige, Joachim Vogel, Erik Amnå, Ingrid Munck, Lars Häll, Statistiska centralbyran, 2003, sid 26 ff

Socialstyrelsen, det sammanlagda medlemsantalet hos de handikappföreningar som fick statsbidrag 2006

AA, sid 211


Fråga 2004/05:946 till Riksdagen, Enskilda försäkringskassor har annan egen praxis.


Social rapport 2006, Socialstyrelsen, sid 181

Social rapport, Socialstyrelsen, 2001, sid 140 ff
68 Bager, aa

69 Bager, aa

70 Kunskapsöversikt, Socialstyrelsen, Aa, sid 17-18


72 Kunskapsöversikt, Socialstyrelsen aa, sid 47

73 Kunskapsöversikt, Socialstyrelsen, aa, sid 47

74 Kriminalvårdsverkets Rapport nr 3, Fångarnas föräldraskap – En utvärdering av föräldrautbildningarna inom kriminalvården, Göteborgs universitet, Institutionen för socialt arbete, 2000

75 Rapport 14, Kvinnorna på Hinseberg – En studie av kvinnors villkor i fängelse, Odd Lindberg, Kriminalvårdsstyrelsen, 2005, sid 91

76 Rapport 14, aa, sid 90

77 Rapport 14 aa sid 13

78 Rapport 14 aa, sid 90

79 Rapport 14 aa sid 40

80 Social rapport, Socialstyrelsen, 2006, sid 14

81 Föräldrar med utvecklingsstörning och deras barn – vad finns det för kunskap?, kunskapsöversikt, Socialstyrelsen 2005, sid 32

82 Kunskapsöversikt, Socialstyrelsen aa, sid 47


84 Rapport nr 3, kriminalvårdsverket, Fångarnas föräldraskap – En utvärdering av föräldrautbildningarna inom kriminalvården, Göteborgs universitet, Institutionen för socialt arbete, 2000 sid 27

85 Barnombudsmannen rapporterar br2004:01, Straffa inte barnet! En studie av barnperspektivet inom kriminalvården, 2004

86 Paulsson, Karin, "Det ser så fint ut på papperet"– om barn med funktionshinder och Barnkonventionen, Rådda Barnen och Riksförbundet för Rörelsehindrade Barn och Ungdomar, 2000, s. 39.


88 SOU 2001:48, Att vara med på riktigt - demokratutveckling i kommuner och landsting, sid 220

89 Aa sid 221
Diskriminering i politiken? En översikt av kunskapen om strukturella hinder och bemötanden bland förtroendevalda i Sverige, Magdalena Inkinen och Hanna Bäck, Statsvetenskapliga institutionen Uppsala universitet, 2005, sid 40

SOU 2001:48 aa, sid 217

Diskriminering i politiken, aa, sid 42

Larsson aa


Se artikel 11 i den svenska handikapprörelsens alternativa rapport om de ekonomiska, sociala och kulturella rättigheterna

The "Bill of Electoral Rights for Citizens with Disabilities" was drafted and endorsed by participants attending a four-day workshop held from 14-17 September, 2002. Participants from twenty-four nations included disability rights experts and activists, senior election administration officials, and representatives of the Inter Parliamentary Union, the Council of Europe, and the Organization for Security and Cooperation in Europe (OSCE). The Workshop was jointly convened by the International Foundation for Election Systems (IFES) and the International Institute on Democracy and Electoral Assistance (IDEA).

Kan du rösta i höst? Enkätundersökning genomförd av Bygg klokt inför valet 2006

Funktionshindrades situation på arbetsmarknaden, Statistiska Centralbyrån, 2005

Statens offentliga utredning, SOU 2006:22, En sammanhållen diskrimineringslagstiftning

Ambition och ansvar, Betänkande från Nationell Psykiatrisamordning, kapitel 5.1.1 sid 243, Socialstyrelsen "Sju år efter reformen"

http://ec.europa.eu/information

Regeringens skrivelse 2005/06:110 Uppföljning av den nationella handlingsplanen för handikappolitiken, sid 1