

International
Disability
Alliance

**Beyond Survival: Social protection for
persons with disabilities respecting
dignity, autonomy and inclusion:
*Review of international human rights
standards***

September 2026

Introduction

This comprehensive review of the principal international authorities on income security, disability-related expenses, community support and equal participation. It distinguishes treaty duties and judicial decisions from treaty-body interpretations, Human Rights Council resolutions and expert recommendations. The analysis covers the CRPD and ICESCR; individual complaints and inquiries; Article 28 concluding observations across regions and income levels; nine Human Rights Council resolutions; major United Nations reports; and selected European, Inter-American and African authorities.

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Executive summary

International human rights law treats social protection for persons with disabilities as a right and as a condition for equal participation in society. Its purpose extends beyond preventing destitution, it must also address disability-related expenses, enable people to exercise choice and control over their lives, support inclusion in the community, and prevent discrimination in access to employment, housing, health care and other rights. Article 28 of the Convention on the Rights of Persons with Disabilities is the central disability-specific provision of international human rights law, but it must be read together with articles 5, 12, 19 and 27 and with the right to social security in article 9 of the International Covenant on Economic, Social and Cultural Rights (ICESCR).¹

The principal conclusions emerging from the authorities reviewed are as follows.

- Social protection must combine accessible mainstream systems with disability-specific benefits and services. Inclusion in a general poverty programme does not necessarily meet the additional costs of disability or provide the support needed for community living.
- Income replacement and support for disability-related expenses serve different purposes. The CRPD Committee expressly states that essential disability-expense support should continue during employment. Its 2022 deinstitutionalization guidelines go further by calling for disability-cost support independent of individual or household general income. These interpretations should not be confused with a prohibition on every means test in every general social assistance programme.²
- Adequacy is substantive and not procedural. A payment that leaves someone unable to obtain food, accessible housing, personal assistance or essential disability-related goods may fail the applicable standards even if it equals the general benefit paid to other people. Coverage, amount, duration, purchasing power and practical accessibility all matter.³
- Eligibility systems must not reduce disability to a medical diagnosis or presumed inability to work. They must address barriers, support needs and extra costs; provide reasonable accommodation and supported decision-making; and avoid excluding people with intellectual or psychosocial disabilities or fluctuating conditions.⁴
- Social protection must enable living in the community. Funding that is available only in an institution, or assistance conditioned on surrendering control over daily life, conflicts with the

¹ Convention on the Rights of Persons with Disabilities, adopted 13 December 2006, especially arts. 2–7, 9, 11–13, 16, 19–20, 23, 25–28 and 31–33 ([Official text](#)); International Covenant on Economic, Social and Cultural Rights, especially arts. 2, 3, 9, 11 and 12 ([Official text](#)); Universal Declaration of Human Rights, arts. 22 and 25 ([Official text](#)); CESCR, general comment No. 19 on the right to social security, E/C.12/GC/19, adopted 2007, issued 2008 ([Document](#)).

² CRPD Committee, general comment No. 8 on the right to work and employment, CRPD/C/GC/8, 2022, para. 78 ([Document](#)); CRPD Committee, Guidelines on deinstitutionalization including in emergencies, CRPD/C/5, 2022, paras. 86–90 ([Document](#)).

³ CESCR, general comment No. 19, *supra* note 1, paras. 22–27; CRPD Committee, general comment No. 6 on equality and nondiscrimination, CRPD/C/GC/6, 2018, paras. 68–69 ([Document](#)).

⁴ CRPD Committee, S.K. v. Finland, communication No. 46/2018, Views of 24 March 2022, CRPD/C/26/D/46/2018 ([Decision](#)); A/HRC/RES/55/8, 3 April 2024, support systems to ensure community inclusion of persons with disabilities, para. 4 ([Resolution](#)); OHCHR, good practices concerning support systems enabling community inclusion, A/HRC/55/34, 26 December 2023, para. 60 ([Report](#)).

CRPD approach. Cash is important, but it cannot substitute for an adequate supply of accessible services, housing and personal assistance.⁵

- Unpaid family support is not a sufficient answer to unmet public responsibilities. *Bellini v. Italy* connects individualized support, family life, equality and article 28 and recognizes harm to both persons with disabilities and their family caregiver. Support for carers must nevertheless preserve the rights, preferences and agency of the person receiving support.⁶
- Discrimination and denial of reasonable accommodation are not excused by progressive realization. Resource constraints are relevant to some implementation choices, but benefit cuts require a much more demanding justification than a general appeal to austerity. Cumulative effects, less harmful alternatives, minimum essential protection and meaningful participation must be examined.⁷
- Accessible information, applications, payment methods, review procedures and remedies are part of the right itself. Entitlements that people cannot claim or retain because of administrative, communication or digital barriers are not effective protection.⁸

The Human Rights Council has progressively connected social protection with community inclusion, care and support, gender equality and children's rights. Resolution 42/13 of 2019 expressly recognizes disproportionate harm to persons with disabilities when their right to social security is restricted. Resolution 52/11 of 2023 expressly makes disability inclusion a principle for social protection floors and requires accessible Council discussion and reporting. Resolution 55/8 of 2024 adds specific calls to address disability-related extra costs and expand non-contributory cash transfers.⁹

Regional case law strengthens particular dimensions of protection, including nondiscrimination, continuity of benefits, pension enforcement, access to services and the protection of family life. Its tests and remedies are not identical to those of the CRPD Committee, and some claims have failed. A sound legal argument must identify the applicable instrument, forum, factual evidence and precise obligation.

The CRPD reviews of States parties make these principles concrete. They repeatedly call for adequate disability-cost allowances, simpler and rights-based eligibility, continuity during employment and older age, accessible housing and basic services, direct control over benefits, and funded poverty-reduction strategies. Recent recommendations address household means tests, savings restrictions, disability-specific inflation, digital registration and pension access in conflict. These are recurring treaty-monitoring standards and context-specific recommendations, not evidence that the reforms

⁵ CRPD Committee, general comment No. 5 on living independently and being included in the community, CRPD/C/GC/5, 2017 ([Document](#)); CRPD Committee, deinstitutionalization guidelines, *supra* note 2.

⁶ CRPD Committee, *Bellini v. Italy*, communication No. 51/2018, Views of 26 August 2022, CRPD/C/27/D/51/2018, issued 2023 ([Decision](#)).

⁷ CESCR, general comment No. 19, *supra* note 1, paras. 40–42, 59–60; CRPD Committee, inquiry concerning the United Kingdom, CRPD/C/15/4, 2016, read with CRPD/C/15/4/Corr.1 ([Inquiry](#); [corrigendum](#)); CRPD Committee, follow-up report concerning the United Kingdom, CRPD/C/GBR/RFR/1, 2024 ([Report](#)).

⁸ CESCR, general comment No. 19, *supra* note 1; CRPD Committee, general comment No. 2 on accessibility, CRPD/C/GC/2, 2014 ([Document](#)); Special Rapporteur on extreme poverty and human rights, non-take-up of rights in social protection, A/HRC/50/38, 2022 ([Report](#)); Special Rapporteur on extreme poverty and human rights, digital welfare state, A/74/493, 2019 ([Report](#)).

⁹ Human Rights Council, resolution 42/13, The right to social security, adopted 26 September 2019, A/HRC/RES/42/13 ([Official text](#)); A/HRC/RES/52/11, 3 April 2023, question of the realization in all countries of economic, social and cultural rights, paras. 16, 27–28 ([Resolution](#)); Human Rights Council resolution 55/8, *supra* note 4, para. 4(e).

concerned have been implemented. The detailed analysis below draws on reviews across all regions and a range of income levels.

1 Scope terminology and legal authority

1.1 What this review covers

The review concentrates on international standards with practical relevance to cash benefits, pensions, disability-related expenses, personal assistance, family support, housing and access to services. It includes selected leading regional authorities, and systematically examines the Article 28 compilation of CRPD Concluding Observations published by International Disability Alliance¹⁰, as well as other views from the CRPD, including general comments, guidance documents, inquiries, and individual communications under the optional protocol. Human Rights Council resolutions are considered, as important intergovernmentally negotiated texts that reflect the views of States, articulate commitments, endorse approaches and mandate further work. OHCHR and Special Rapporteur reports provide influential legal analysis, evidence and recommendations. A selection of regional instruments and views/decisions/judgments are also included.

It is noted that “Social security” is the term used in ICESCR article 9 and that “Social protection” is often used more broadly to encompass contributory insurance, non-contributory assistance, services and measures addressing poverty, exclusion and social risks.

2 The treaty framework

2.1 Article 28 of the CRPD

Article 28 contains two related rights. Paragraph 1 recognizes an adequate standard of living for persons with disabilities and their families, including adequate food, clothing and housing and continuous improvement of living conditions. States must safeguard and promote this right without discrimination on the basis of disability. Paragraph 2 recognizes social protection and its enjoyment without disability discrimination.¹¹

Article 28(2)(a) addresses equal access to clean water and access to appropriate and affordable services, devices and other assistance for disability-related needs. Its significance is that adequate living standards depend not only on ordinary household consumption but also on the means to overcome disability-related barriers.

Article 28(2)(b) requires access to social protection and poverty reduction programmes, expressly highlighting women and girls with disabilities and older persons with disabilities. Mainstream programmes must therefore be designed and administered inclusively; a separate disability benefit cannot excuse exclusion from general protection.

Article 28(2)(c) requires access by persons with disabilities and their families living in poverty to State assistance with disability-related expenses, including adequate training, counselling, financial assistance and respite care. The express poverty qualification belongs to this subparagraph. It should not be read into every other component of article 28 or used to extinguish rights to equality and community support under articles 5 and 19.

¹⁰ International Disability Alliance, Compilation of CRPD Committee’s Concluding Observations: Article 28 CRPD (Adequate standard of living and social protection), September 2025.

¹¹ CRPD, *supra* note 1.

Article 28(2)(d) concerns access to public housing programmes. Article 28(2)(e) concerns equal access to retirement benefits and programmes. Together, these provisions reject an approach in which disability protection consists only of a working-age incapacity pension. Protection is relevant across the life course and across housing, services and income systems.

Article 28 does not prescribe one universal benefit amount or a single financing model. Compliance depends on whether the system actually secures the protected rights, without discrimination and with appropriate attention to disability-related costs. Its references to families do not displace the individual rights, legal capacity or preferences of the person with a disability.

The concluding observations confirms that Article 28 has a material and a social-security dimension. For example, Benin's review couples universal protection with housing, water and sanitation; Tunisia's combines minimum economic security and disability-cost support with access to mainstream food, clothing, housing and social services. Togo's asks for food, school, medical and other assistance to become adequately resourced, monitored public policy. Together these recommendations support assessing a system as a combination of enforceable income provision, essential goods and accessible services. An allowance cannot by itself remedy an inaccessible water supply, a lack of suitable housing or the absence of personal assistance.¹²

2.2 Related provisions of the CRPD that give article 28 additional meaning/context

Articles 3 and 5 establish autonomy, inclusion and inclusive/substantive equality. Equal treatment is not achieved simply by paying everyone the same amount when some people face unavoidable additional expenses. Article 5 also requires reasonable accommodation, and the definition of discrimination in article 2 encompasses its denial. Disability discrimination includes measures that have discriminatory effects even without an openly discriminatory intention.¹³

Article 19 requires the opportunity to choose where and with whom to live, access to individualized support including personal assistance, and equal access to community services. It turns social protection into a means of securing community inclusion. A benefit arrangement that leaves institutional placement as the only practically available option may engage article 19 alongside article 28. General comment No. 5 explains that independent living concerns choice and control; it does not mean living alone or performing every task without assistance.¹⁴

Article 12 protects legal capacity and access to support in exercising it. Receiving a benefit or directing a personal budget should not require a person to accept substituted decision-making. Safeguards must protect against abuse while respecting the person's rights, will and preferences. Article 13 requires access to justice, including procedural accommodations.¹⁵

Articles 9 and 21 support accessible buildings, transport, information and communication. Article 20 concerns personal mobility. Articles 25 and 26 concern health and habilitation and rehabilitation.

¹² CRPD Committee, concluding observations on Benin (2024), para. 56(a) (Article 28 extract in IDA compilation, p. 12); CRPD Committee, concluding observations on Tunisia (2023), para. 50(a)–(c) (Article 28 extract in IDA compilation, p. 24); CRPD Committee, concluding observations on Togo (2023), para. 54(a)–(c) (Article 28 extract in IDA compilation, p. 23).

¹³ CRPD, *supra* note 1; CRPD Committee, general comment No. 6, *supra* note 3.

¹⁴ CRPD Committee, general comment No. 5, *supra* note 5, paras. 16, 28–30.

¹⁵ CRPD, *supra* note 1; CRPD Committee, general comment No. 1 on equal recognition before the law, CRPD/C/GC/1, 2014 ([Document](#)).

These provisions explain why nominal cash coverage may coexist with serious violations when someone cannot obtain an assistive device, reach a benefits office, access treatment or communicate with an assessor.

Article 27 requires access to work on an equal basis with others. Article 28 must therefore be implemented coherently with employment rights. A system that withdraws assistance with disability expenses immediately upon employment can create exclusion rather than security. Article 23 protects family life; article 7 addresses children; article 6 addresses women and girls; and article 16 requires protection from exploitation, violence and abuse.

Articles 4(3) and 33(3) require close consultation with and active involvement of persons with disabilities through their representative organizations, including in implementation and monitoring. Articles 31 and 32 concern data and international cooperation. These are not peripheral procedural matters: they shape whether benefits reflect actual needs, whether exclusions are visible, and whether development funding promotes inclusion or segregation.

This integrated reading also explains recommendations that cross conventional departmental boundaries. Kazakhstan's Article 28 recommendations address home support, personal assistance and pension access; Colombia's address the removal of interdiction as a precondition for benefits; and Kuwait's require funds for independent living to be allocated to, and controlled by, persons with disabilities. Social protection therefore raises legal-capacity and autonomy questions as well as adequacy questions. A payment received by a guardian or household head is not sufficient evidence that the rights holder can access support or decide how to use it.¹⁶

2.3 ICESCR and other international instruments

ICESCR article 9 recognizes the right to social security, including social insurance. Articles 11 and 12 protect adequate living standards and health, while articles 2(2) and 3 require nondiscrimination and equal enjoyment by women and men. The Universal Declaration of Human Rights provides the foundational statements on social security and adequate living standards in articles 22 and 25.¹⁷

CESCR general comment No. 19 explains the system in detail: coverage of social risks; adequate benefits; reasonable, proportionate and transparent eligibility; affordable contributions; information and participation; and physical access. Non-contributory measures are necessary where contributory insurance does not cover everyone. Paragraph 20 specifically addresses disability-related loss of income, disability-related expenses and support for family members and informal carers.¹⁸

CESCR general comment No. 5, paragraph 28, had already recognized adequate income support and disability-related costs in 1994. Its historical language and assumptions must now be read alongside the CRPD's stronger requirements of autonomy and community inclusion. General comment No. 20 further develops substantive equality, indirect discrimination and reasonable accommodation.¹⁹

¹⁶ CRPD Committee, concluding observations on Kazakhstan (2024), CRPD/C/KAZ/CO/1, para. 60(c)–(d) ([Official text](#)); CRPD Committee, concluding observations on Colombia (2016), CRPD/C/COL/CO/1, para. 63(b) ([Official text](#)); CRPD Committee, concluding observations on Kuwait (2019), CRPD/C/KWT/CO/1, para. 55(a) ([Official text](#)).

¹⁷ ICESCR, *supra* note 1; Universal Declaration of Human Rights, *supra* note 1.

¹⁸ CESCR, general comment No. 19, *supra* note 1.

¹⁹ CESCR, general comment No. 5 on persons with disabilities, 1994, especially paras. 28–29 and 33; reproduced in E/1995/22 ([UN report](#)); CESCR, general comment No. 20 on nondiscrimination in economic, social and cultural rights, E/C.12/GC/20, 2009 ([Document](#)).

The Convention on the Rights of the Child (CRC), especially articles 23, 26 and 27, adds obligations concerning children with disabilities, social security and adequate living standards. The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), particularly articles 11, 13 and 14, is relevant to social security, family benefits, unpaid care and rural women. These treaties help expose the cumulative disadvantages faced by girls and women with disabilities and by unpaid carers.²⁰

ILO Recommendation No. 202 on social protection floors calls for nationally defined basic guarantees across the life cycle, including essential health care and basic income security. Disability is among the circumstances in which working-age people may be unable to earn sufficient income. Its principles include universality, legal entitlement, nondiscrimination, dignity, predictability, accessible complaints and participation. The floor is a minimum platform from which protection should develop, not a maximum level of entitlement. CESCR's 2015 statement expressly connects floors with Covenant obligations.²¹

ILO social security conventions, including Nos. 102, 121 and 128, remain relevant where ratified. They address minimum social security standards, employment injury and invalidity, old-age and survivors' benefits. Their older insurance and incapacity terminology should be applied coherently with later disability-rights obligations; it does not justify treating every person with a disability as incapable of employment.²²

3 The substantive standards for an inclusive system

3.1 Universal protection and complementary measures

The overall objective is effective protection for everyone, including people outside formal employment and contributory insurance. Disability frequently interacts with exclusion from education, work and asset accumulation. A system that requires a long contribution record without providing an adequate non-contributory alternative can reproduce those exclusions.²³

The prevailing approach combines two tracks: inclusion in mainstream social protection and disability-specific measures addressing additional costs and support needs. General poverty assistance, child benefits, pensions and health coverage should be accessible to persons with disabilities. Disability-specific cash, devices, personal assistance, communication support and transport measures may also be necessary. Neither track substitutes fully for the other.²⁴

Universality does not necessarily require an identical payment to every person or a single administrative scheme. Different combinations of insurance, tax-financed benefits and services can comply. The important questions are whether the arrangements leave protection gaps, whether

²⁰ Convention on the Rights of the Child, especially arts. 12, 23, 26 and 27 ([Official text](#)); Convention on the Elimination of All Forms of Discrimination against Women, especially arts. 11, 13 and 14 ([Official text](#)).

²¹ ILO, Social Protection Floors Recommendation, 2012, No. 202 ([NORMLEX text](#)); CESCR, Social protection floors and economic, social and cultural rights, E/C.12/2015/1 ([Document](#)).

²² ILO, Social Security (Minimum Standards) Convention, 1952, No. 102 ([NORMLEX text](#)); ILO, Employment Injury Benefits Convention, 1964, No. 121 ([NORMLEX text](#)); ILO, Invalidity, Old-Age and Survivors' Benefits Convention, 1967, No. 128 ([NORMLEX text](#)).

²³ CESCR, general comment No. 19, *supra* note 1, paras. 20, 23, 29–31; Special Rapporteur on the rights of persons with disabilities, report on social protection, A/70/297, 7 August 2015 ([Document](#)).

²⁴ Special Rapporteur on disability, A/70/297, *supra* note 23, paras. 43–54; OHCHR, support systems to ensure community inclusion, A/HRC/52/52, 2023 ([Report](#)); OHCHR, A/HRC/55/34, *supra* note 4.

distinctions are justified, and whether the resulting protection is adequate and consistent with equality.

The repeated call for universal protection is best understood as a demand to close gaps across the whole system. Indonesia and Jamaica were urged to develop universal schemes that include allowances for disability-related expenses; Kenya was urged to extend social protection schemes beyond persons classified as having “severe” disabilities; and Viet Nam was urged to provide monthly benefits and free health-insurance cards regardless of support requirements. These recommendations question systems that make one narrow impairment or severity category the gateway to every form of protection. They do not require identical support for people whose circumstances and costs differ.²⁵

The wording and purpose of each universal-coverage recommendation is important to consider. The Dominican Republic and Ghana were urged to secure protection for persons without other income, alongside disability-cost allowances; Angola was asked to consider a universal scheme. The clear objective is that nobody should fall outside adequate protection because contributory insurance, poverty assistance and disability-specific schemes each assume that another programme will meet their needs.²⁶

Universal protection also requires a durable legal and financial structure. Singapore’s review calls for a comprehensive legislative framework and long-term financial support for persons lacking adequate means; Togo’s seeks public policies with resources, targets and monitoring; and Nicaragua’s recommends a budgeted scheme for all persons with disabilities irrespective of their particular requirements, alongside access to social security through decent employment. The resulting policy question is whether the national architecture combines contributory protection with dependable non-contributory entitlements and services. Occasional distributions, discretionary charity or a fund that has never become operational cannot demonstrate that coverage is secured.²⁷

3.2 Adequacy and the additional costs of disability

Adequacy concerns the amount, duration and real value of support. It must be assessed against the rights the benefit is intended to secure, not solely against an administrative budget or a general poverty line. CESCR requires regular review of benefit adequacy. CRPD guidance adds the costs of achieving participation and independent living.²⁸

Additional expenses can include personal assistance, sign language interpretation, accessible transport, assistive technology, maintenance and replacement of devices, communication, accessible housing and higher utility costs. Some costs arise from impairment-related requirements; others

²⁵ CRPD Committee, concluding observations on Indonesia (2022), CRPD/C/IDN/CO/1, para. 59(a)–(c) ([Official text](#)); CRPD Committee, concluding observations on Jamaica (2022), CRPD/C/JAM/CO/1, para. 51(a)–(c) ([Official text](#)); CRPD Committee, concluding observations on Kenya (2015), CRPD/C/KEN/CO/1, para. 50(a) ([Official text](#)); CRPD Committee, concluding observations on Viet Nam (2025), para. 56(c) (Article 28 extract in IDA compilation, p. 11).

²⁶ CRPD Committee, concluding observations on Dominican Republic (2025), para. 52 (Article 28 extract in IDA compilation, p. 9); CRPD Committee, concluding observations on Ghana (2024), CRPD/C/GHA/CO/1, para. 55(b) ([Official text](#)); CRPD Committee, concluding observations on Angola (2023), para. 48(b) (Article 28 extract in IDA compilation, pp. 21–22).

²⁷ CRPD Committee, concluding observations on Singapore (2022), para. 54 (Article 28 extract in IDA compilation, p. 27); CRPD Committee, Togo (2023), *supra* note 12, para. 54(a)–(c); CRPD Committee, concluding observations on Nicaragua (2024), para. 59(a)–(c) (Article 28 extract in IDA compilation, p. 17); CRPD Committee, Dominican Republic (2025), *supra* note 26, para. 52(a).

²⁸ CESCR, general comment No. 19, *supra* note 1, para. 22; CRPD Committee, general comment No. 5, *supra* note 5, para. 92; CRPD Committee, general comment No. 6, *supra* note 3, paras. 68–69.

arise from inaccessible environments and discriminatory arrangements. Accessibility investment may reduce some costs but does not remove every need for individualized support.

Observed expenditure can underestimate need. Someone who cannot afford a wheelchair repair, support worker or accessible journey may spend nothing on it while remaining excluded. A sound adequacy assessment therefore considers unmet needs, not simply receipts or average household spending. This is an analytical implication of the requirements to assess support needs and disability-related costs; it is not a universal formula specified by the treaty.

Payment design also matters. Benefits that are unstable, frequently interrupted, eroded by inflation or consumed by required service charges may fail in practice. Regular review, predictable payments and continuity during reassessment are important safeguards. The deinstitutionalization guidelines expressly call for review of individualized funding in light of changing needs, inflation and emergencies.²⁹

The most useful comparator is the living standard that remains after necessary disability-related expenses. In its review of Seychelles, the Committee expressly recommended that persons with disabilities enjoy the same standard of living as others on comparable incomes; Germany's 2015 review similarly questioned the use of personal income to meet support needs. In its review of Norway, the Committee recommended securing sufficient income that takes disability costs into account. This supports an equivalence-based adequacy assessment: equal gross income is not equal economic security where one person must purchase assistance, accessible transport, communication support or assistive products that another does not need. It is an analytical standard, not a prescribed international calculation formula.³⁰

Adequacy should therefore be examined at three connected levels: the resources needed for ordinary living; the additional costs of disability and participation; and the availability and affordability of the services that cash is meant to purchase. Gabon's recommendation to identify a social protection floor and provide additional-cost support tailored to each person illustrates the distinction between a baseline and individualized support. Japan and Palau explicitly emphasize persons with intensive support requirements. A uniform flat-rate benefit may form part of the system, but these reviews support testing whether supplementary benefits or services cover needs that the standard payment leaves unmet.³¹

Purchasing power must be maintained over time. Kazakhstan's recommendation is particularly specific: indexation should reflect consumer-price inflation, including expenditure associated with disability. Mongolia's 2023 review links benefit amounts to inflation and minimum living standards, with active OPD involvement. Argentina's 2023 review recommends increasing the pension to at least the adjustable minimum living wage. The latter is a national benchmark, not a universal CRPD minimum wage replacement rule. Read together, the reviews support a transparent mechanism for

²⁹ CRPD Committee, deinstitutionalization guidelines, *supra* note 2, para. 86.

³⁰ CRPD Committee, concluding observations on Seychelles (2018), CRPD/C/SYC/CO/1, para. 48 ([Official text](#)); CRPD Committee, concluding observations on Germany (2015), para. 52 (Article 28 extract in IDA compilation, p. 51); CRPD Committee, concluding observations on Norway (2019), para. 44 (Article 28 extract in IDA compilation, pp. 33–34).

³¹ CRPD Committee, concluding observations on Gabon (2015), CRPD/C/GAB/CO/1, para. 61 ([Official text](#)); CRPD Committee, concluding observations on Japan (2022), para. 60(a)–(b) (Article 28 extract in IDA compilation, p. 25); CRPD Committee, concluding observations on Palau (2025), para. 54(a)–(b) (Article 28 extract in IDA compilation, p. 10).

reviewing adequacy, informed by actual disability costs and the prices of essential goods and services, rather than sporadic discretionary increases.³²

Charges can undermine adequacy even where a benefit appears sufficient. Cyprus was urged to abolish user payments for social support and partial payments for disability expenses and assistive devices so that such costs did not undermine the protection floor. Spain was urged to repeal co-payments for services necessary for independent community living. These are specific country recommendations from the CRPD, but their shared implication is broader: calculate the person's disposable resources after mandatory contributions and essential service charges. Counting a benefit as income while ignoring what must be paid back to obtain the associated support can conceal deprivation.³³

3.3 Means testing and individual autonomy

The clearest distinction is between general income support and support to meet disability-related expenses. The former may be designed around income insufficiency, subject to equality and adequacy requirements. The latter enables equal participation even where a person has earnings. The Committee's deinstitutionalization guidelines state that eligibility for income support covering disability-related costs should not be tied to individual or household general income.³⁴

This is a strong interpretive position. It is more specific than saying that poverty thresholds should merely be adjusted for extra costs, and it is not identical to the narrower express poverty wording of article 28(2)(c). Its foundation lies in reading social protection with equality and community inclusion. A careful legal submission should identify that interpretive foundation rather than claim that article 28 expressly prohibits all means testing.

Household-based assessments can conceal deprivation within a household and make adults dependent on parents or partners. Asset rules can also undermine efforts to save for accessible housing, emergencies or future support. Individual control over benefits and access to supported decision-making are therefore important. However, a finding that a particular household or asset test violates rights still requires attention to its purpose, effects, alternatives and the benefit at issue.³⁵

The CRPD concluding observations provide substantial support for treating disability-cost assistance separately from ordinary household poverty targeting. Croatia was expressly urged to assess benefits for increased disability costs by individual support needs, disregarding a financial-assets test. The Netherlands was urged to make disability the main factor in calculating disability-related assistance, allowances and personal contributions and to avoid household-income means testing. Germany's 2023 review called for integration assistance rules to permit saving and financial security in older age. These recommendations concern the way support requirements and asset restrictions interact;

³² CRPD Committee, Kazakhstan (2024), *supra* note 16, para. 60(a); CRPD Committee, concluding observations on Mongolia (2023), para. 56(a) (Article 28 extract in IDA compilation, pp. 20–21); CRPD Committee, Argentina (2023), *supra* note **Error! Bookmark not defined.**, para. 54(b).

³³ CRPD Committee, concluding observations on Cyprus (2017), CRPD/C/CYP/CO/1, para. 56 ([Official text](#)); CRPD Committee, concluding observations on Spain (2019), CRPD/C/ESP/CO/2-3, para. 53(b) ([Official text](#)).

³⁴ CRPD Committee, deinstitutionalization guidelines, *supra* note 2, para. 87.

³⁵ CRPD Committee, general comment No. 1, *supra* note 15; Special Rapporteur on disability, A/70/297, *supra* note 23; Special Rapporteur on the rights of persons with disabilities, transformation of services, A/HRC/52/32, 2023 ([Report](#)).

they should not be flattened into an unsupported claim that every general income-support programme must ignore all resources.³⁶

Household measures can also misidentify poverty. Rwanda was urged to review its household poverty ranking and ensure individually designed social protection respecting will and preferences. Peru was urged to revise its household targeting system to account for disability-related costs. The Republic of Korea's 2014 review rejected reliance on family income and property for minimum living support, and its 2022 review called for complete abolition of obligatory-provider requirements. The analytical concern is both distributive and personal: relatives' nominal resources may not be available to the rights holder, and assumed family support can conceal unmet costs or force dependence.³⁷

Canada's 2025 review adds an explicit autonomy and family-life dimension. The Committee sought review of provincial income-testing regimes so that they did not discriminate or undermine life choices and family life. This supports examining the actual consequences of a partner-income rule: whether forming a relationship, sharing a home or receiving family assistance results in loss of essential disability support. The appropriate legal analysis identifies the purpose of the benefit, which resources are genuinely available, the additional costs that remain and the impact on equal choices. A formally neutral household rule can require reform where its effects frustrate those rights.³⁸

3.4 Eligibility and disability assessments

An assessment should identify barriers, support requirements and disability-related costs in the relevant context. A diagnosis may provide useful information, but it should not be the sole determinant of entitlement. Medicalized or work-incapacity tests can miss the needs of people with psychosocial, intellectual, sensory, episodic or less visible disabilities. They can also falsely equate the ability to perform an isolated task with the ability to sustain employment or independent living.³⁹

Non-medicalized assessment does not mean abandoning evidence or refusing all professional input. It means avoiding an approach in which diagnosis, impairment percentage or a binary judgment of incapacity displaces the person's circumstances, participation barriers, preferences and support needs. The person must be able to participate, obtain accessible information, use communication assistance and challenge the result.

Repeated examinations can impose costs, stress and risks of interruption. Review arrangements should be proportionate to the likelihood of a material change and should accommodate fluctuating conditions. A fair process needs reasons, accessible notice, independent review and appropriate protection against avoidable loss of essential support while a dispute is resolved. The precise interim remedy depends on the legal forum; the underlying obligation is effective protection rather than merely a theoretical appeal.

³⁶ CRPD Committee, concluding observations on Croatia (2015), CRPD/C/HRV/CO/1, para. 44 ([Official text](#)); CRPD Committee, concluding observations on Netherlands (2024), CRPD/C/NLD/CO/1, para. 62(c) ([Official text](#)); CRPD Committee, concluding observations on Germany (2023), para. 64(c) (Article 28 extract in IDA compilation, pp. 19–20).

³⁷ CRPD Committee, concluding observations on Rwanda (2019), CRPD/C/RWA/CO/1, para. 52 ([Official text](#)); CRPD Committee, concluding observations on Peru (2023), CRPD/C/PER/CO/2-3, paras. 56(b), 57 ([Official text](#)); CRPD Committee, concluding observations on Republic of Korea (2014), CRPD/C/KOR/CO/1, para. 54 ([Official text](#)); CRPD Committee, concluding observations on Republic of Korea (2022), CRPD/C/KOR/CO/2-3, para. 58(b) ([Official text](#)).

³⁸ CRPD Committee, concluding observations on Canada (2025), CRPD/C/CAN/CO/2-3, paras. 55(d), 56(d) ([Official text](#)).

³⁹ Special Rapporteur on disability, A/70/297, *supra* note 23, paras. 55–62; Human Rights Council resolution 55/8, *supra* note 4, para. 4(b); OHCHR, A/HRC/55/34, *supra* note 4, paras. 50, 60.

The CRPD reviews require attention to the assessment model and the practical gateway into a scheme. Kiribati was urged to move away from medical criteria and use multidisciplinary assessment, including social workers and occupational therapists. Belarus was urged to establish accessible and transparent recognition under credible holistic standards. Burkina Faso was asked to simplify disability-card issuance, assess barriers and ease the burden of proof. These recommendations do not eliminate relevant evidence or individualized assessment. They reject systems in which diagnosis, a percentage of impairment or difficult-to-obtain certification substitutes for examining the barriers and support requirements that the benefit should address.⁴⁰

Eligibility audits should include impairment type, diagnosis, cause and timing of disability. New Zealand's 2022 review seeks equitable support across accident compensation and disability systems, and expressly includes fetal alcohol-related conditions, chronic fatigue syndrome and other chronic or rare conditions. Switzerland's review recommends reassessment of coverage following concern about late-diagnosed autism. Bosnia and Herzegovina was urged to end unequal treatment according to war-related or other causes of impairment and place of residence; the Democratic People's Republic of Korea was urged to remove cause- and category-based exclusions. The recurrent principle is that historical administrative pathways should not leave comparable needs without adequate protection.⁴¹

Continuity is also an assessment issue. Mauritius was urged to reduce burdensome reassessments for people already found eligible, while France's recommendations combine simpler municipal procedures with support irrespective of age. Review processes should be proportionate to a legitimate need for updated information and should not recreate the original access barrier whenever an award expires. The practical inference is to examine renewal intervals, evidence costs, communication support, the time taken to decide and the consequences of a gap in payment. A nominal appeal right provides limited protection if the person cannot meet basic or disability-related needs during the interruption.⁴²

3.5 Work and social protection

General comment No. 8, paragraph 78, is especially important. It calls for income protection for people who cannot obtain or maintain freely chosen work and recognizes diverse forms of employment. It addresses continuity until employment is sustained and prompt reactivation when work ends. Crucially, it states that support for essential disability-related expenses should continue throughout employment.⁴³

This supports separating earnings replacement from extra-cost support. It also supports transitions that do not make accepting a job financially or practically impossible. A person may earn enough to

⁴⁰ CRPD Committee, concluding observations on Kiribati (2025), CRPD/C/KIR/CO/1, para. 54(a) ([Official text](#)); CRPD Committee, concluding observations on Belarus (2024), para. 56 (Article 28 extract in IDA compilation, p. 11); CRPD Committee, concluding observations on Burkina Faso (2024), para. 53(a) (Article 28 extract in IDA compilation, pp. 12–13).

⁴¹ CRPD Committee, concluding observations on New Zealand, CRPD/C/NZL/CO/2-3, 2022, para. 54(b)–(c) ([Document](#)); CRPD Committee, concluding observations on Switzerland (2022), paras. 53(b), 54(b) (Article 28 extract in IDA compilation, p. 28); CRPD Committee, concluding observations on Bosnia and Herzegovina (2017), para. 51 (Article 28 extract in IDA compilation, p. 43); CRPD Committee, concluding observations on Democratic People's Republic of Korea (2025), para. 55(b) (Article 28 extract in IDA compilation, p. 7).

⁴² CRPD Committee, concluding observations on Mauritius (2024), CRPD/C/MUS/CO/2-3, para. 50(b)–(c) ([Official text](#)); CRPD Committee, concluding observations on France (2021), para. 57(a)–(c) (Article 28 extract in IDA compilation, p. 29).

⁴³ CRPD Committee, general comment No. 8, *supra* note 2.

reduce general income assistance while still needing personal assistance, accessible transport or communication support to work.

Employment promotion must be consistent with reasonable accommodation, accessible labour markets and freely chosen work. Sanctions based on assumed work capacity, inaccessible job-search requirements or unavailable transport can conflict with those obligations. The Committee's position is not that everyone must receive every income-replacement benefit indefinitely regardless of earnings; it is that benefit design must not undermine equality and employment rights.

The country practice repeatedly addresses the loss of support when a person works or studies. Belgium's 2024 recommendation is unusually precise: the full allowance for disability-related costs should continue on entering employment. Kuwait's review calls for benefits to be preserved during education and employment; Poland's requires continued eligibility for disability-related schemes during employment; and Maldives' calls for legislation making disability benefits compatible with work. These recommendations strengthen the distinction already made in general comment No. 8: earning wages does not remove an impairment-related transport, assistance or communication expense, and withdrawing the support may itself make employment impossible.⁴⁴

Peru illustrates the need to reform interacting programmes. The Committee criticized automatic loss of certain benefits on receipt of any earnings and recommended reform of contributory, non-contributory and conditional-transfer eligibility so that programmes did not reproduce inequality or obstruct entry into the labour market. Algeria's review likewise called for recipients to be allowed other income, particularly from employment. A participation-focused assessment should therefore consider earnings thresholds, abrupt withdrawal, retention of health coverage and the ability to resume support if work ends. The country texts do not prescribe a universal taper, but they reject benefit design that creates avoidable barriers to work.⁴⁵

3.6 Community support and personal assistance

General comment No. 5 distinguishes individualized support from arrangements that impose a particular living setting or service provider. Support must be available, accessible, affordable, acceptable and adaptable, and must extend beyond basic survival at home to participation in employment, education, parenting, political life and culture. High support requirements do not justify exclusion.⁴⁶

Direct payments and personal budgets can increase control, but only if their amount is adequate, administrative support is available, and there is a real choice of services and workers. A nominal budget without an available workforce or accessible housing is insufficient. Equally, public financing must not be conditioned on sharing support, living with particular people or accepting institutional routines.

The 2022 guidelines connect deinstitutionalization to housing, income security, individualized funding, legal identity, accessible mainstream services and community support. Discharging people

⁴⁴ CRPD Committee, concluding observations on Belgium (2024), CRPD/C/BEL/CO/2-3, para. 59(a) ([Official text](#)); CRPD Committee, Kuwait (2019), *supra* note 16, para. 55(a); CRPD Committee, Poland (2018), *supra* note **Error! Bookmark not defined.**, para. 50(b); CRPD Committee, concluding observations on Maldives (2025), CRPD/C/MDV/CO/1, para. 56(a) ([Official text](#)).

⁴⁵ CRPD Committee, Peru (2023), *supra* note 37, paras. 56(d), 57; CRPD Committee, concluding observations on Algeria (2018), para. 47 (Article 28 extract in IDA compilation, pp. 35–36); CRPD Committee, concluding observations on Thailand (2016), CRPD/C/THA/CO/1, paras. 57–58 ([Official text](#)).

⁴⁶ CRPD Committee, general comment No. 5, *supra* note 5, paras. 28–30, 52, 60.

without those supports can create homelessness, neglect or transfer to another institution. Funding reform therefore requires a planned transition that builds alternatives and preserves continuity.⁴⁷

Article 28 recommendations increasingly make the link between poverty reduction and community support explicit. Rwanda's calls for individualized protection together with community services, housing and support that respects will and preferences. Paraguay's 2023 review seeks a funded personal-assistance scheme. Kazakhstan's insists on adequate, high-quality home support and recognition of the right to personal assistance for single persons who have relatives. These recommendations challenge the assumption that the existence of a family member answers the support question. Availability, willingness, suitability and the rights holder's own preferences must be considered rather than treating relatives as an automatic substitute for public support.⁴⁸

Equal treatment of a person currently living in an institution must be distinguished from maintaining institutional systems. Israel's 2023 review recommends equal allowances for persons in institutions as well as disability-specific allowances above the poverty line. Read with Article 19 and the Committee's deinstitutionalization guidance, this supports protecting the individual's income and equal entitlement during transition; it does not authorize segregated provision as the long-term model. Likewise, housing and service recommendations in older reviews should be applied consistently with the later, more developed standards on choice, control and community inclusion.⁴⁹

3.7 Families carers and the care & support agenda

The CRPD recognizes that families may need financial assistance, training, counselling and respite. General comment No. 5 acknowledges the poverty and labour-market exclusion that can accompany unsupported family assistance. Bellini confirms the legal significance of these consequences in a concrete case.⁵⁰

At the same time, there are distinct rights holders: the person receiving support, unpaid supporters and paid workers. Their interests often align, but should not be collapsed. A caregiver payment must not become a justification for withholding personal assistance or giving the caregiver control over the adult's life. Nor should the State presume that women will provide unlimited unpaid support.

The developing international care and support agenda emphasizes redistribution of unpaid work, decent conditions for paid workers and social security for carers, alongside autonomy, consent and community inclusion. Respite options should be designed consistently with the rights and preferences of the person receiving support. Stronger public services, leave arrangements, pension credits and income protection can reduce family poverty without making family dependency the default model.⁵¹

Payment design is central to the distinction between support to a family and an entitlement of the person. Malawi's 2023 recommendation calls for payments directly to each eligible person with a disability, accounting for individual disability costs and housing. Kuwait's review requires

⁴⁷ CRPD Committee, deinstitutionalization guidelines, *supra* note 2, paras. 81–96.

⁴⁸ CRPD Committee, Rwanda (2019), *supra* note 37, para. 52; CRPD Committee, concluding observations on Paraguay (2023), CRPD/C/PRY/CO/2-3, para. 50(c) ([Official text](#)); CRPD Committee, Kazakhstan (2024), *supra* note 16, para. 60(c).

⁴⁹ CRPD Committee, concluding observations on Israel (2023), para. 58 (Article 28 extract in IDA compilation, p. 20); CRPD Committee, general comment No. 5, *supra* note 5; CRPD Committee, deinstitutionalization guidelines, *supra* note 2.

⁵⁰ CRPD Committee, general comment No. 5, *supra* note 5, para. 67; Bellini v. Italy, *supra* note 6.

⁵¹ A/HRC/RES/54/6, 11 October 2023, centrality of care and support from a human rights perspective ([Resolution](#)); A/HRC/RES/55/29, 5 April 2024, rights of the child and inclusive social protection ([Resolution](#)); OHCHR, human rights dimension of care and support, A/HRC/58/43, 30 January 2025 ([Report](#)).

independent-living funds to be controlled by the person. Montenegro's directs benefits to women themselves and recommends recovery procedures where relatives appropriate the money. Colombia's calls for removal of interdiction requirements. These examples reinforce the need for accessible payment mechanisms and decision-making support that preserve legal capacity, rather than transferring control merely because another person provides assistance.⁵²

At the same time, Article 28(2)(c) expressly recognizes assistance to families living in poverty, and Togo's review specifies training, counselling, financial assistance and respite. Kazakhstan's addresses access to regular and savings pensions for persons with disabilities and parents of children with disabilities. A coherent system can therefore support both the person and those providing unpaid assistance. The analytical safeguard is to identify whose need each payment meets: the person's own extra costs and autonomy, household poverty, or the supporter's lost income and social-security position. Combining these purposes in one small allowance risks leaving each of them insufficiently addressed.⁵³

3.8 Accessible housing, affordability and security of tenure

The Article 28 housing recommendations extend well beyond admission to a public-housing waiting list. Japan was urged to adopt and implement binding accessibility standards for public and private housing. Ecuador's 2014 review calls for universal design in social-housing prototypes and planning, while its 2019 review addresses access to housing credit and adaptations. Mongolia's 2023 review seeks accessible, affordable housing programmes with sufficient budgets. Together these recommendations identify a chain of obligations and implementation choices: accessible stock, affordable financing, adaptations and information that allows people to obtain suitable accommodation.⁵⁴

Housing must also be assessed through community inclusion and homelessness prevention. Indonesia's review specifically addresses housing for people wishing to leave institutions. France's links accessible housing and rights-based support to concerns about homelessness after institutionalization and compulsory psychiatric treatment. The Netherlands calls for equal access to homelessness services and tailored multidisciplinary support, particularly for people with intellectual or psychosocial disabilities. These recommendations support coordinated discharge, income, housing and support arrangements: ending a placement without secure accommodation and assistance cannot establish successful inclusion merely because the institutional bed has closed.⁵⁵

Security of tenure and allocation rules matter alongside accessibility. India's review calls for affordable housing and tenure security, including for persons affected by leprosy; Peru's requires housing programmes designed and implemented in consultation with OPDs. Nicaragua's recommendation for 5 per cent of social housing and Serbia's recommendation to implement a statutory 10 per cent accessible-housing quota are concrete country measures. Neither percentage is

⁵² CRPD Committee, concluding observations on Malawi (2023), CRPD/C/MWI/CO/1-2, para. 58 ([Official text](#)); CRPD Committee, Kuwait (2019), *supra* note 16, para. 55(a); CRPD Committee, concluding observations on Montenegro (2017), CRPD/C/MNE/CO/1, para. 51(b) ([Official text](#)); CRPD Committee, Colombia (2016), *supra* note 16, para. 63(b).

⁵³ CRPD Committee, Togo (2023), *supra* note 12, para. 54(c); CRPD Committee, Kazakhstan (2024), *supra* note 16, para. 60(d); CRPD, *supra* note 1, art. 28(2)(c).

⁵⁴ CRPD Committee, Japan (2022), *supra* note 31, para. 60(c); CRPD Committee, concluding observations on Ecuador (2014), para. 45 (Article 28 extract in IDA compilation, p. 52); CRPD Committee, concluding observations on Ecuador (2019), para. 50 (Article 28 extract in IDA compilation, p. 30); CRPD Committee, Mongolia (2023), *supra* note 32, para. 56(b).

⁵⁵ CRPD Committee, Indonesia (2022), *supra* note 25, para. 59(c); CRPD Committee, France (2021), *supra* note 42, paras. 56(d), 57(d); CRPD Committee, Netherlands (2024), *supra* note 36, para. 62(b).

a general international minimum. Their broader lesson is that housing commitments need operational allocation rules, accessible dwellings suited to the recipients' requirements, adequate budgets and evidence of actual access.⁵⁶

3.9 Food, water, sanitation and other essential services

Article 28(1) is not confined to cash-benefit administration. In the Democratic People's Republic of Korea, the Committee recommended assessing the number of persons with disabilities affected by food insecurity, malnutrition and deprivation of basic services and reallocating resources to meet basic needs. Jamaica and Haiti were urged to ensure safe, affordable water and sanitation, including rural and remote areas. Panama's review expressly includes electricity alongside drinking water and sanitation. These recommendations require an account of the actual goods and services available to the person. A nominal income floor is inadequate as an outcome measure if essential infrastructure or accessible distribution remains absent.⁵⁷

Accessibility and affordability should be examined together. Kiribati's recommendation combines accessible housing development or refurbishment with water and sanitation on outer islands. Ghana's and Zambia's reviews similarly connect universal protection with basic services and rural inclusion. The practical inference is that planning should identify physical access, communication barriers, transport and assistance requirements as well as tariffs and household income. A cash transfer may help with a service charge, while additional public investment is needed where the service itself is unavailable or cannot be used by the intended beneficiary.⁵⁸

3.10 Disability costs, retirement and continuity across the life course

The country reviews give considerable substance to Article 28(2)(e) on retirement benefits. Denmark was urged to retain disability-related extra-cost benefits and accompaniment services after retirement age, including equivalent protection in the Faroe Islands and Greenland. Tuvalu was urged to continue the disability benefit after age 70 regardless of other allowances. Mauritius was asked to consider removing the age-60 ceiling so that disability and retirement pensions could be received together. The formulations differ in strength, but the underlying concern is consistent: an age-related pension does not necessarily meet continuing disability expenses, and an age threshold should not automatically extinguish essential support.⁵⁹

Retirement adequacy also depends on earlier contribution and savings rules. The Czech Republic was urged to revise retirement-pension calculations affecting periods of disability-pension receipt and people whose resulting pension fell below minimum subsistence. Germany's 2023 review recommends permitting savings and financial security in older age, while Kazakhstan's addresses ordinary and savings pension access for persons with disabilities and parents of children with

⁵⁶ CRPD Committee, concluding observations on India (2019), paras. 58–59 (Article 28 extract in IDA compilation, pp. 31–32); CRPD Committee, Peru (2023), *supra* note 37, para. 57; CRPD Committee, Nicaragua (2024), *supra* note 27, para. 59(e); CRPD Committee, concluding observations on Serbia (2016), para. 58 (Article 28 extract in IDA compilation, p. 48).

⁵⁷ CRPD Committee, Democratic People's Republic of Korea (2025), *supra* note 41, para. 55(a); CRPD Committee, Jamaica (2022), *supra* note 25, para. 51(c); CRPD Committee, concluding observations on Haiti (2018), para. 51 (Article 28 extract in IDA compilation, p. 38); CRPD Committee, concluding observations on Panama (2017), para. 55 (Article 28 extract in IDA compilation, p. 41).

⁵⁸ CRPD Committee, Kiribati (2025), *supra* note 40, para. 54(c); CRPD Committee, Ghana (2024), *supra* note 26, para. 55(c); CRPD Committee, concluding observations on Zambia (2024), CRPD/C/ZMB/CO/1, para. 56(b) ([Official text](#)).

⁵⁹ CRPD Committee, concluding observations on Denmark (2024), CRPD/C/DNK/CO/2-3, para. 74(a)–(b) ([Official text](#)); CRPD Committee, concluding observations on Tuvalu (2025), CRPD/C/TUV/CO/1, para. 52(a) ([Official text](#)); CRPD Committee, Mauritius (2024), *supra* note 42, para. 50(a).

disabilities. These recommendations support analysing the lifetime effects of exclusion from paid work, unpaid support responsibilities and asset depletion. A system can provide a current allowance yet leave a predictable gap in protection at retirement.⁶⁰

4 Treaty body jurisprudence – individual communications and trends in concluding observations

4.1 Bellini v Italy

In *Bellini*, the views adopted on 26 August 2022, the author provided intensive unpaid support to her daughter and partner, both persons with disabilities. She argued that the lack of adequate recognition and support for family caregivers harmed the family's rights and living conditions. The Committee examined whether the general measures invoked by Italy actually addressed the family's individualized circumstances.⁶¹

The operative findings are important to state precisely. For the daughter and partner, the Committee found violations of articles 19, 23 and 28(2)(c), read with article 5. For Bellini herself, it found a violation of article 28(2)(c), read with article 5. The decision therefore connects community living, family life, assistance with disability-related expenses and discrimination, including disadvantage associated with supporting persons with disabilities.

The recommended remedies included compensation and adequate individualized support, including respite, financial assistance, counselling, social support and other appropriate options. The broader recommendations concerned legal reform and support arrangements that avoid dependence on unsupported family care. The decision is a central authority for arguing that listing programmes in the abstract is insufficient where the family cannot actually obtain the support needed.

Its limits also matter. Bellini does not establish a uniform international caregiver salary or authorize a caregiver to override the will and preferences of the person supported. The legal focus remains the actual rights and needs of the persons concerned, assessed together with equality and community inclusion.

4.2 S K v Finland

In *S.K.*, the views adopted on 24 March 2022, access to personal assistance was restricted by a requirement concerning the applicant's ability to define the content and manner of assistance. The Committee examined the effect on a person with an intellectual disability and whether the alternative services invoked by the State actually met the person's needs.⁶²

It found violations of article 19(b) and article 5(1) and (2), the latter alone and in conjunction with article 19. A criterion framed as ensuring user direction could itself exclude people who need support to express and implement their choices. The State had not adequately demonstrated that the proposed alternatives enabled equivalent community living.

⁶⁰ CRPD Committee, concluding observations on Czech Republic (2015), paras. 54–55 (Article 28 extract in IDA compilation, pp. 50–51); CRPD Committee, Germany (2023), *supra* note 36, para. 64(c); CRPD Committee, Kazakhstan (2024), *supra* note 16, para. 60(d).

⁶¹ *Bellini v. Italy*, *supra* note 6, paras. 7.3–8.

⁶² *S.K. v. Finland*, *supra* note 4, paras. 9.2–10.

The practical lesson is that supported decision-making must facilitate access to personal assistance. It should not become a threshold that excludes people deemed insufficiently autonomous. The case is primarily an equality and community-living decision, not a direct article 28 ruling or an automatic entitlement to every number of hours requested.

4.3 H M v Sweden

In *H.M.*, the views adopted on 19 April 2012, refusal of permission for a home hydrotherapy pool prevented access to the only effective rehabilitation option identified for the applicant and increased the risk of institutional placement. The Committee found failures concerning reasonable accommodation, health, rehabilitation and article 19(b). It expressly considered it unnecessary to determine the article 28 claim.⁶³

The decision shows why social protection must be understood with housing, planning, health and support services. An apparently neutral rule may require an individualized accommodation. It does not establish that States must finance any treatment or home modification requested; the finding depended on the particular evidence, necessity and absence of a demonstrated disproportionate burden.

4.4 Admissibility and evidential limits

R.I. v. Ecuador, decided on 6 September 2019, concerned a pension dispute that included claims about inadequate protection. The Committee declared the communication inadmissible. Among other issues, the author had not sufficiently substantiated how the benefit failed to cover the relevant needs, and disagreement with domestic adjudication did not establish arbitrariness or denial of justice.⁶⁴

V.P. v. Lithuania, decided on 26 August 2025, concerned the adequacy of compensation after an attack resulting in disability. It too was inadmissible for insufficient substantiation. The Committee reiterated that it does not ordinarily re-evaluate domestic facts and law unless the proceedings or assessment are clearly arbitrary or amount to a denial of justice. This was a compensation case, not a ruling establishing an adequate disability-benefit rate.⁶⁵

These decisions are important because a rights claim requires more than a general assertion that a payment is low. Evidence should connect the challenged rule or decision with unmet needs, disability-related expenses, discriminatory effects, loss of community support or other treaty-protected interests.

4.5 The United Kingdom inquiry and follow up

The Committee's 2016 inquiry under the Optional Protocol examined the cumulative impact of welfare reforms on independent living, employment and social protection. It found that the threshold of grave or systematic violations of articles 19, 27 and 28 had been met. The analysis

⁶³ CRPD Committee, *H.M. v. Sweden*, communication No. 3/2011, Views of 19 April 2012, CRPD/C/7/D/3/2011, paras. 8.3–9 ([Decision](#)).

⁶⁴ CRPD Committee, *R.I. v. Ecuador*, communication No. 25/2014, decision of 6 September 2019, CRPD/C/22/D/25/2014, paras. 11.10–11.18 ([Decision](#)).

⁶⁵ CRPD Committee, *V.P. v. Lithuania*, communication No. 72/2019, decision of 26 August 2025, CRPD/C/33/D/72/2019, paras. 10.3–11 ([Decision](#)).

covered reduced support, housing-related measures, work-capability assessments, sanctions, administrative barriers and failures to account adequately for disability-related expenses.⁶⁶

The inquiry is a major authority for looking at the combined effect of reforms. A government cannot establish compliance merely by explaining each cut in isolation if the cumulative result makes community living or an adequate standard of living unattainable. The recommendations included a cumulative rights-based impact assessment, adequate resources, accessible procedures, protection against discrimination and meaningful involvement of representative organizations.

In its 2024 follow-up report, the Committee concluded that no significant progress had been made on the situation addressed by the inquiry and identified signs of regression. It found failures to address grave and systematic violations and the root causes of exclusion. Recommendations included reform of assessment processes, attention to actual disability-related costs, support-worker shortages and safeguards concerning automated systems.⁶⁷

4.6 Patterns in CRPD concluding observations

Concluding observations are context-specific. Their strongest use is to identify recurring interpretive principles and the kinds of evidence the Committee considers important, rather than to transplant every concluding observation from the CRPD unchanged into a different legal and fiscal setting. Early reviews already questioned household assessments, unequal cause-based entitlements and unsupported disability expenses. Later reviews make the operational requirements more explicit: individual control over payments, coverage during work and education, accessible housing and services, disability-sensitive indexation, and continuity into retirement. Variation often reflects the national issue before the Committee and the level of detail available in the reporting process.⁶⁸

The Committee's 2017 observations on the United Kingdom reinforce the need to account for disability-related expenses and the cumulative impact of reductions in protection. Its 2025 observations on Finland raise concerns about reductions in support and funding and the absence of sufficiently comprehensive disability impact assessments.⁶⁹

The 2022 observations on New Zealand address unequal access and fragmented support, including differences associated with accident compensation and other disability arrangements, and exclusion affecting particular groups. They support scrutiny of distinctions based on the origin or label of a disability when comparable support needs receive unequal treatment.⁷⁰

The 2014 observations on Costa Rica raise concerns about restrictive poverty criteria in access to disability assistance. Read together with later general guidance, these observations demonstrate the Committee's persistent concern that anti-poverty targeting can leave disability-related needs unmet.⁷¹

⁶⁶ CRPD Committee, United Kingdom inquiry, *supra* note 7, especially paras. 97–114.

⁶⁷ CRPD Committee, United Kingdom inquiry follow-up, *supra* note 7, paras. 88–91.

⁶⁸ CRPD Committee, Republic of Korea (2014), *supra* note 37, para. 54; CRPD Committee, Bosnia and Herzegovina (2017), *supra* note 41, para. 51; CRPD Committee, Kuwait (2019), *supra* note 16, para. 55(a); CRPD Committee, Kazakhstan (2024), *supra* note 16, para. 60(a); CRPD Committee, Denmark (2024), *supra* note 59, para. 74.

⁶⁹ CRPD Committee, concluding observations on the United Kingdom, CRPD/C/GBR/CO/1, 2017, paras. 58–59 ([Document](#)); CRPD Committee, concluding observations on Finland, CRPD/C/FIN/CO/1, 2025, paras. 54–55 ([Document](#)).

⁷⁰ CRPD Committee, concluding observations on New Zealand, *supra* note 41, paras. 53–54.

⁷¹ CRPD Committee, concluding observations on Costa Rica, CRPD/C/CRI/CO/1, 2014, paras. 56–57 ([Document](#)).

Successive reviews can expose persistent structural issues. New Zealand's 2014 observations questioned unequal support according to the cause of disability and called for adequate income after extra costs; the 2022 review sought co-designed reform to address inequality, including consideration of an integrated model, and wider recognition of chronic and rare conditions. The Republic of Korea's 2014 concerns about family-resource criteria were followed in 2022 by a direct call to abolish obligatory-provider requirements. These sequences support examining whether the underlying exclusion was addressed, while avoiding an inference that repetition alone proves unchanged legislation or a quantified present violation.⁷²

The diversity of the recommendations also resists a narrow geographical account of Article 28. Malawi's direct-payment recommendation, Rwanda's critique of household poverty ranking, Peru's reform of interacting programmes, Japan's housing standards, Kiribati's outer-island services and Belgium's employment-compatible extra-cost allowance address different settings through the same rights framework. Their common focus is whether protection reaches the individual, covers the costs that obstruct participation and connects income to accessible services. This convergence strengthens a functional assessment of national systems without requiring them to adopt an identical institutional model.⁷³

The Committee's recommendation that Gabon identify a social protection floor while also covering the additional costs of each person's disability shows why a common floor and individualized support must be considered together. Its recommendations that Zambia provide the responsible institutions with financial, human and technical resources and that Canada streamline entitlements across jurisdictions illuminate the implementation capacity required for inclusive protection. These are complementary CRPD findings, not reports produced under resolutions 42/13 or 52/11. Reading them together supports scrutiny of the resources, institutions and access arrangements behind a declared commitment to universal protection.⁷⁴

4.7 The CESCR decision in Trujillo Calero

In *Trujillo Calero v. Ecuador*, the views adopted on 26 March 2018, CESCR examined denial of a retirement pension following the treatment of contributions to a voluntary scheme. The case concerned a woman who had performed unpaid domestic work and whose pension position was affected by the administration of contribution rules. The Committee found violations of article 9 and of articles 2(2) and 3 read with article 9. Its reasoning addressed information, proportionality, social security access and gender disadvantage.⁷⁵

The decision is not disability-specific. It is nevertheless relevant by analogy to people whose contribution histories are interrupted by disability-related exclusion or unpaid support responsibilities. It reinforces the need for transparent rules, timely information, proportionate consequences for contribution problems and non-contributory protection where necessary. The

⁷² CRPD Committee, concluding observations on New Zealand (2014), CRPD/C/NZL/CO/1, paras. 59–60 ([Official text](#)); CRPD Committee, concluding observations on New Zealand, *supra* note 41, para. 54(b)–(c); CRPD Committee, Republic of Korea (2014), *supra* note 37, para. 54; CRPD Committee, Republic of Korea (2022), *supra* note 37, para. 58(b).

⁷³ CRPD Committee, Malawi (2023), *supra* note 52, para. 58; CRPD Committee, Rwanda (2019), *supra* note 37, para. 52; CRPD Committee, Peru (2023), *supra* note 37, para. 57; CRPD Committee, Japan (2022), *supra* note 31, para. 60(c); CRPD Committee, Kiribati (2025), *supra* note 40, para. 54; CRPD Committee, Belgium (2024), *supra* note 44, para. 59(a).

⁷⁴ CRPD Committee, Gabon (2015), *supra* note 31, para. 61; CRPD Committee, Zambia (2024), *supra* note 58, para. 56(c); CRPD Committee, Canada (2025), *supra* note 38, para. 56(b)–(c).

⁷⁵ CESCR, *Trujillo Calero v. Ecuador*, communication No. 10/2015, Views of 26 March 2018, E/C.12/63/D/10/2015, paras. 13–23 ([Decision](#)).

Committee recommended providing the pension benefits due or equivalent social security benefits enabling an adequate and dignified standard of living, compensation and measures to prevent similar violations. It should not be used to suggest that all contribution requirements are prohibited.

5. UN Human Rights Council resolutions

5.1 Resolution 28/4 on independent living

Resolution 28/4, adopted on 26 March 2015, addresses the right to live independently and be included in the community on an equal basis with others. It places choice, support and community inclusion at the centre of implementation. For social protection, its significance is the connection between income and service arrangements and the practical availability of a life outside institutions.⁷⁶

It should be read alongside OHCHR's article 19 study and the Committee's later general comment No. 5. The Council's recognition of community inclusion supports advocacy for redirecting resources toward accessible community services and individualized support, while the detailed treaty interpretation comes primarily from the CRPD and its Committee.

5.2 Resolution 37/22 on Equality and protection from violence & resolution 47/15 of 2021 on Eliminating all forms of violence against women and girls with disabilities.

HRC resolution 37/22 of 2018 concerns equality and nondiscrimination for persons with disabilities. It provides the wider Council framework for questioning apparently neutral social protection rules that disadvantage persons with disabilities and for requiring reasonable accommodation and substantive equality.⁷⁷

HRC resolution 47/15 of 2021 concerns violence against women and girls with disabilities. Its relevance to social protection is the need to reduce dependence and exclusion and to ensure accessible, coordinated services. Income security, housing and support can be essential to leaving violence, while payment arrangements that place all control in an abusive household member can defeat that purpose. The latter is an application of the combined equality, protection and autonomy standards.⁷⁸

5.3 Resolution 42/13 on the right to social security

HRC resolution 42/13, entitled "The right to social security" situations social security within the universal human rights framework, recalling ICESCR article 9, ILO Convention No. 102 and Recommendation No. 202. Its preamble expressly recognizes that efforts to realize the right must be inclusive and accessible and that persons with disabilities are disproportionately affected when its enjoyment is restricted. It also recognizes multiple and intersecting discrimination and the structural disadvantages women experience, including unequal responsibility for unpaid care and domestic work.⁷⁹

⁷⁶ A/HRC/RES/28/4, 26 March 2015, right to live independently and be included in the community ([Resolution](#)).

⁷⁷ A/HRC/RES/37/22, 2018, equality and nondiscrimination for persons with disabilities ([Resolution](#)).

⁷⁸ A/HRC/RES/47/15, 2021, preventing and responding to violence against women and girls with disabilities ([Resolution](#)); CRPD, *supra* note 1, arts. 6, 12, 16, 28.

⁷⁹ Human Rights Council resolution 42/13, *supra* note 9, preamble.

The operative provisions establish a process for developing this work. Paragraph 1 mandates a full-day intersessional panel on social security in the changing world of work and requires full accessibility for persons with disabilities. Paragraph 2 provides for consultation and participation by a wide range of stakeholders, including organizations representing social security rights holders. Paragraph 3 requests a summary report, and paragraph 4 invites Council mechanisms and treaty bodies to continue paying particular attention to the right. The resolution therefore combines recognition of disability-related exclusion with an opportunity for rights holders to influence the Council's analysis.⁸⁰

Its recognition of disproportionate harm supports scrutiny of benefit reductions, restrictive eligibility rules and inaccessible administration. The fuller legal analysis comes from reading the resolution with CRPD articles 5, 19 and 28: social protection must secure equality, adequate living standards and community inclusion, including appropriate disability-related assistance. Likewise, implementation of the participation provision should be consistent with article 4(3), requiring close consultation with and active involvement of persons with disabilities through their representative organizations. These are implications of reading the instruments together. Resolution 42/13 does not itself prescribe disability-benefit amounts or detailed eligibility rules.⁸¹

The direct reporting outcome is A/HRC/49/33, which took place on 1 November 2021. HRC resolution 52/11 explicitly reaffirms 42/13; resolution 58/9 subsequently reaffirms and develops the work under 52/11. This is the relevant sequence of follow-up. HRC resolution 55/8 provides complementary disability-specific standards through the separate workstream on support systems and community inclusion.⁸²

5.4 Resolution 52/11 on economic social and cultural rights

Resolution 52/11, adopted without a vote on 3 April 2023, explicitly reaffirms resolution 42/13 in its preamble and develops the Council's work on inclusive social protection. Its disability relevance is express as well as implicit: the text contains five references to persons with disabilities, comprising two preambular references and three operative provisions. The preambular paragraphs are unnumbered in the official text, so the references below identify their location and subject rather than assign unofficial paragraph numbers.⁸³

- Preamble on pandemic recovery, on pages 2–3: the Council recognizes the importance of adequately resourced, fully functioning services and public policies to address continuing adverse effects of COVID-19, expressly including effects on persons with disabilities. This connects disability inclusion with the capacity and funding of mainstream services, rather than limiting the issue to a separate disability allowance.
- Preamble on inequalities and underinvestment: the Council identifies persistent inequalities and underinvestment in public services as particular challenges for persons with disabilities, among others, and recalls nondiscrimination and equality commitments. This supports examining how

⁸⁰ *Ibid.*, paras. 1–4.

⁸¹ CRPD, *supra* note 1; Human Rights Council resolution 42/13, *supra* note 9.

⁸² Human Rights Council, decision 45/113, Postponement of the implementation of certain activities mandated by the Human Rights Council, 2020, A/HRC/DEC/45/113 ([Official text](#)); United Nations High Commissioner for Human Rights, Summary of the intersessional full-day panel discussion on the right to social security in the changing world of work, 2 February 2022, A/HRC/49/33, paras. 1–3 ([Official report](#)); Human Rights Council resolution 52/11, *supra* note 9; A/HRC/RES/58/9, 3 April 2025, question of the realization in all countries of economic, social and cultural rights ([Resolution](#)); Human Rights Council resolution 55/8, *supra* note 4.

⁸³ Human Rights Council resolution 52/11, *supra* note 9.

service reductions, shortages and inaccessible provision interact with cash benefits to determine real protection.

- Operative paragraph 16: the Council calls for social protection floors to be established or developed consistently with nondiscrimination and equality, gender equality and inclusion of persons with disabilities, transparency, participation and accountability. Disability inclusion is therefore an explicit principle governing social protection floors, not merely an inference from general language about vulnerability.
- Operative paragraph 27: the Council requests a panel at its fifty-fifth session on social security and quality public services, accessible to persons with disabilities and open to relevant stakeholders. Accessibility is a condition of the mandated deliberative process.
- Operative paragraph 28: the Council requests a Secretary-General's report at its fifty-eighth session in formats accessible to persons with disabilities. Accessibility applies to the reporting output as well as participation in the discussion.⁸⁴

The strongest substantive provision for disability advocacy is paragraph 16. Read with paragraph 11, which calls for universal, comprehensive and inclusive protection without discrimination, it supports assessing whether the social protection floor actually reaches persons with disabilities and enables effective enjoyment of rights. Equal inclusion cannot be established simply by counting beneficiaries or providing the same nominal benefit where disability-related expenses remain unmet. The more specific legal content concerning those expenses, autonomy and community support comes from CRPD articles 5, 19 and 28 and the Committee's interpretations. Resolution 52/11 does not itself set a disability-cost formula or establish a blanket prohibition on all means testing.⁸⁵

Several provisions that do not expressly name disability are also important. Paragraph 1 calls for sufficient resources alongside legal and policy measures; paragraphs 7–9 address structural deficiencies, crisis resilience and expanded investment; and paragraph 10 encourages international financial institutions to support social spending and fiscal space. Paragraph 12 addresses women's economic security and unequal unpaid or underpaid care responsibilities. These provisions are relevant both to women with disabilities and to people providing unpaid support, whose rights must be considered without displacing the autonomy of the person supported.⁸⁶

Paragraphs 14–15 emphasize remedies, access to justice and justiciability. Paragraph 24 underlines consultation with and participation of affected persons in decisions concerning them. The final preambular paragraph calls for timely, accurate information on public services through online and offline routes so that eligible people actually benefit. In a CRPD-based assessment, these provisions support accessible claims and appeals, communication and decision-making support, and effective OPD participation. General stakeholder participation should be implemented consistently with the more specific requirements of CRPD article 4(3); accessible attendance alone is not equivalent to meaningful influence.⁸⁷ The panel's outcomes informed the Secretary-General's report A/HRC/58/37,

⁸⁴ *Ibid.*, preamble, pp. 2–3, and paras. 16, 27–28.

⁸⁵ Human Rights Council resolution 52/11, *supra* note 9, paras. 11, 16; CRPD, *supra* note 1; CRPD Committee, general comment No. 5, *supra* note 5; CRPD Committee, general comment No. 6, *supra* note 3; CRPD Committee, general comment No. 7 on participation through representative organizations, CRPD/C/GC/7, 2018 ([Document](#)); CRPD Committee, general comment No. 8, *supra* note 2; CRPD Committee, deinstitutionalization guidelines, *supra* note 2.

⁸⁶ Human Rights Council resolution 52/11, *supra* note 9, paras. 1, 7–12.

⁸⁷ Human Rights Council resolution 52/11, *supra* note 9, preamble, p. 3, and paras. 14–15, 24; CRPD, *supra* note 1.

while paragraph 29 separately mandated OHCHR's practical information note on social protection practices.⁸⁸

5.5 Resolution 54/6 on care and support

Resolution 54/6, adopted on 11 October 2023, recognizes the centrality of care and support from a human rights perspective. It addresses the rights of people receiving care and support, unpaid carers and paid workers. It calls for measures concerning investment, redistribution of unpaid work, social protection, participation, data and discriminatory stereotypes.⁸⁹

For disability rights, the key interpretive requirement is to integrate this agenda with autonomy and community inclusion. Expanding the care economy is not sufficient if the services financed are segregating or deny the preferences of their users. The resolution also mandated the OHCHR report later issued as A/HRC/58/43.

5.6 Resolution 55/8 on support systems

Resolution 55/8, adopted on 3 April 2024, is the most directly relevant Council resolution in this review. Its subject is support systems to ensure community inclusion of persons with disabilities. It draws on OHCHR reports A/HRC/52/52 and A/HRC/55/34 and brings social protection, individualized support and community inclusion into one policy framework.⁹⁰

Paragraph 4 calls for meaningful participation of persons with disabilities through their representative organizations; non-medicalized assessments addressing support needs and extra costs; better data; and financing arrangements that enable inclusion. Paragraph 4(e) specifically calls for comprehensive social protection systems that address disability-related extra costs and expand access to non-contributory cash transfers that empower choice.

The same paragraph addresses individualized services and community networks, technology, accessible transport, flexible funding and adequate accessible housing. This combination matters: social protection is not reduced to a small cash allowance, while services are not treated as a substitute for control over resources. The resolution is an important intergovernmental reference for designing national support systems, but its recommendations must still be distinguished from directly enforceable treaty language.

Resolution 55/8 is complementary to the social-security work initiated by resolution 42/13 and developed through resolutions 52/11 and 58/9. It is not a direct procedural follow-up to 42/13. Its particular contribution is to connect comprehensive social protection with choice, control and community living, providing disability-specific substance for the broader commitment to inclusive social protection floors.⁹¹

⁸⁸ Human Rights Council resolution 52/11, *supra* note 9, paras. 27–29; Secretary-General, Question of the realization in all countries of economic, social and cultural rights, 13 January 2025, A/HRC/58/37 ([Official report](#)); OHCHR, Practical Information Note on Promising Practices in Realizing the Right to Social Security, prepared under resolution 52/11, paragraph 29; a living document ([Official note](#)).

⁸⁹ Human Rights Council resolution 54/6, *supra* note 51.

⁹⁰ Human Rights Council resolution 55/8, *supra* note 4.

⁹¹ Human Rights Council resolution 55/8, *supra* note 4, para. 4; Human Rights Council resolution 52/11, *supra* note 9, para. 16.

5.7 Resolution 55/29 on children and inclusive social protection

Resolution 55/29, adopted on 5 April 2024, concerns the rights of the child and inclusive social protection. It addresses availability, accessibility and adequacy, progressive expansion of child benefits, resources and accountability. Paragraph 11 specifically addresses support adapted to children with disabilities, including caregiver remuneration, consistently with the CRPD and participation requirements.⁹²

The resolution supports systems that prevent the impoverishment or separation of families because a child needs support. It must be read with the child's best interests, evolving capacities and right to be heard, and with the requirement that education and community services be inclusive. Paying a family allowance does not discharge the duty to provide accessible education or health care.

5.8 Resolution 58/9 on economic social and cultural rights

Resolution 58/9, adopted without a vote on 3 April 2025, reaffirms the Council's previous work under resolution 52/11. The relationship should be stated precisely: 52/11 explicitly reaffirms 42/13, while 58/9 reaffirms and builds on 52/11. Paragraphs 5–7 acknowledge the Secretary-General's report A/HRC/58/37, the fifty-fifth-session panel and OHCHR's practical information note. Paragraph 7 also encourages continued and enhanced OHCHR work assisting States to fulfil the right to social security without discrimination.⁹³

Paragraph 13 retains inclusion of persons with disabilities among the principles governing social protection floors. Paragraphs 15–16 address structural discrimination, rights-based measurement, participation, national institutions and accountability. These provisions support analysis of who remains excluded, how budgets affect actual protection, and whether monitoring captures inequalities hidden by aggregate expenditure or coverage figures. The resolution also addresses social investment, remedies, informal employment and the wider financing context of fiscal space, debt and taxation.⁹⁴

Paragraphs 30–32 mandate further work on mobilizing public resources and on judicial enforcement of economic, social and cultural rights. The panel mandated for the sixty-first session must be accessible to persons with disabilities, and the report and Advisory Committee study requested for the sixty-fourth session must be provided in accessible formats. These mandates connect social security commitments with financing and enforceability. They should not be treated as evidence that the anticipated reports' conclusions have already been adopted.⁹⁵

For OPDs, the resolution supports asking whether public budgets cover disability-related needs, whether measures of progress reveal unequal outcomes, and whether people can challenge exclusion or inadequate implementation. Those applications draw on the resolution together with CRPD obligations. A budget allocation or a favourable judicial ruling must ultimately translate into accessible benefits, support and services if protection is to be effective.

⁹² Human Rights Council resolution 55/29, *supra* note 51.

⁹³ Human Rights Council resolution 58/9, *supra* note 82, preamble and paras. 2, 5–7.

⁹⁴ *Ibid.*, paras. 8, 10–16, 23–27.

⁹⁵ *Ibid.*, paras. 30–32.

6. United Nations reports – OHCHR, HRC mandate holders, Secretary General

6.1 The 2015 report on social protection

Catalina Devandas-Aguilar's report A/70/297 of 7 August 2015 is a foundational disability-specific treatment of social protection. It was submitted to the General Assembly by the Special Rapporteur on the rights of persons with disabilities, whose mandate was established by the Human Rights Council. It should not be cited as a report formally submitted to the Council.⁹⁶

The report argues for moving from welfare and dependency assumptions toward rights, autonomy and participation. It explains the interaction between poverty and disability, the inadequacy of contributory-only systems, and the need to combine mainstream programmes with disability-specific support. It also addresses disability expenses, benefit traps, discriminatory eligibility, household means tests and inaccessible delivery.⁹⁷

Its most useful policy distinction is between compensation for inadequate income and support for the additional costs of disability. It also warns that conditions attached to benefits can exclude people when the required education, health or employment services are inaccessible. This report provides much of the conceptual foundation developed more specifically in later Committee guidance and Council resolutions.

6.2 Access to support and the transformation of services

OHCHR's A/HRC/28/37 examines article 19 and the measures required for independent living and inclusion. The Special Rapporteur's A/HRC/34/58 develops the right to access support and the diversity of support arrangements required to exercise legal capacity, participate in society and live in the community. Together they explain why support is a cross-cutting rights issue rather than simply a health or welfare service.⁹⁸

Gerard Quinn's A/HRC/52/32 of 2023 concerns the transformation of services for persons with disabilities. It addresses the way financing, procurement, eligibility and provider structures can reinforce dependency or enable choice. Its discussion of benefit and asset restrictions is relevant to systems that discourage employment or building a more independent life. It also emphasizes workforce, data and transition planning.⁹⁹

An important implication is that increasing a service budget does not establish CRPD compliance if the money continues to sustain segregating structures. Conversely, reform should not abruptly remove existing support before effective alternatives are available. The objective is a funded transition toward rights-respecting community support.

6.3 OHCHR reports on support systems

A/HRC/52/52 of 2023 provides a framework for support systems that ensure community inclusion. It links individualized support, accessible mainstream services, legal capacity, social protection,

⁹⁶ Special Rapporteur on disability, A/70/297, *supra* note 23.

⁹⁷ *Ibid.*, especially paras. 43–65.

⁹⁸ OHCHR, thematic study on living independently and being included in the community, A/HRC/28/37, 2014 ([Report](#)); Special Rapporteur on the rights of persons with disabilities, report on access to support, A/HRC/34/58, 2016 ([Report](#)).

⁹⁹ Special Rapporteur on disability, A/HRC/52/32, *supra* note 35, paras. 66–85, 90–91.

governance, data and financing. It also addresses the relationship between disability-rights approaches and discussions about care.¹⁰⁰

A/HRC/55/34, issued in December 2023 for the Council's 2024 session, develops that framework through good practices. It discusses cash transfers, disability-related costs, support workers, housing, non-medicalized assessments and resource mobilization. Its final recommendations are in paragraph 60. They include comprehensive social protection, expanded non-contributory cash transfers and avoiding incapacity to work as an eligibility requirement for the support addressed.¹⁰¹

The report warns that resource mobilization detached from disability rights can produce segregation, denial of agency or institutionalization. It also illustrates why tax concessions alone are insufficient: people without taxable income may receive little or no benefit from them. Cash, services, accessible infrastructure and fiscal measures must be assessed together rather than assuming that any one instrument reaches everyone.¹⁰²

6.4 The 2025 report on care and support

OHCHR's A/HRC/58/43, issued on 30 January 2025 pursuant to resolution 54/6, consolidates a human rights approach to care and support. It considers the rights of people receiving support, paid workers and unpaid carers, and links social security, gender equality, dignity and autonomy.¹⁰³

For social protection, it supports life-course coverage, attention to disability-related expenses and recognition of unpaid care without normalizing unequal gender roles. Participation should include the different rights holders affected by reform. In disability policy, the report should be read together with the more specific CRPD requirements on personal choice, legal capacity and community inclusion.

6.5 Non take up and digital welfare

Olivier De Schutter's report A/HRC/50/38 of 2022 examines non-take-up of social protection. Administrative complexity, information gaps, stigma and inaccessible procedures can keep entitled people from receiving benefits. For persons with disabilities, these barriers can be compounded by communication requirements, inaccessible transport, repeated medical evidence and dependence on third parties.¹⁰⁴

Philip Alston's A/74/493 of 2019 examines the digital welfare state. Digital systems may improve administration, but can also create exclusion, intrusive surveillance and opaque decision-making. In a disability context, accessible design, assisted and non-digital routes where needed, understandable reasons, human review, data protection and effective appeal are essential safeguards. The reports support scrutiny of these risks; they do not establish a blanket international prohibition on technology or automated administrative tools.¹⁰⁵

¹⁰⁰ OHCHR, A/HRC/52/52, *supra* note 24.

¹⁰¹ OHCHR, A/HRC/55/34, *supra* note 4.

¹⁰² *Ibid.*, paras. 16–23, 58–60.

¹⁰³ OHCHR, A/HRC/58/43, *supra* note 51.

¹⁰⁴ Special Rapporteur on extreme poverty, A/HRC/50/38, *supra* note 8.

¹⁰⁵ Special Rapporteur on extreme poverty, A/74/493, *supra* note 8; CRPD, *supra* note 1, arts. 9, 13, 22.

6.6 Economic reform financing and children

The guiding principles in A/HRC/40/57 address human rights impact assessments of economic reforms. Their relevance is the requirement to examine distributional and cumulative effects, consult affected people, consider alternatives and protect substantive rights when restructuring expenditure. Disability impact should be integrated into that analysis, not added after the fiscal decision has been made.¹⁰⁶

A/HRC/47/36 proposes a global fund for social protection. It is relevant to international financing and capacity constraints, but the proposal itself does not establish an existing universal fund or an individually enforceable payment entitlement. A/HRC/28/35 provides earlier analysis of social protection floors and economic, social and cultural rights.¹⁰⁷

OHCHR's A/HRC/54/36 addresses children's rights and inclusive social protection. Together with resolution 55/29, it supports comprehensive child and family support, attention to disability and gender, and systems that reach children facing multiple forms of exclusion.¹⁰⁸

6.7 The direct reporting outcome of resolution 42/13

A/HRC/49/33, issued by the High Commissioner for Human Rights on 2 February 2022, summarizes the intersessional panel on the right to social security in the changing world of work. It was produced pursuant to resolution 42/13 and decision 45/113. The original timetable was postponed because of the United Nations liquidity crisis and pandemic restrictions; taking conference-service availability into account, the panel ultimately took place on 1 November 2021. Its findings therefore should not be dated as if the panel had occurred in 2019 or within the resolution's original schedule.¹⁰⁹

The report records a substantial contribution by the International Disability Alliance. Paragraph 3 identifies Alradi Abdalla, then IDA's Disability-Inclusive Social Protection Lead, as a panellist. In paragraphs 26–27, he explains how barriers to education, decent work and livelihoods interact with additional expenses, including devices, human support and accessible transport. He argues for access to both basic income security and disability-related cost schemes without conditions. Paragraph 36 records his call to consult persons with disabilities and their representative organizations when designing and implementing schemes. These passages document IDA's contribution to the Council process; they should be attributed as recorded interventions rather than presented as wording negotiated and adopted by States.¹¹⁰

Paragraphs 46–47 record Special Rapporteur Gerard Quinn's criticism of approaches that treat persons with disabilities as economically inactive recipients of assistance. He argues that social protection should enable autonomy, agency and active citizenship, linking it expressly to CRPD article 19. This is an important conceptual connection: the adequacy of protection should be

¹⁰⁶ Independent Expert on foreign debt and human rights, guiding principles on human rights impact assessments of economic reforms, A/HRC/40/57, 2018, presented 2019 ([Report](#)).

¹⁰⁷ Special Rapporteur on extreme poverty and human rights, global fund for social protection, A/HRC/47/36, 2021 ([Report](#)); Secretary-General, social protection floors and economic, social and cultural rights, A/HRC/28/35, 2014 ([Report](#)).

¹⁰⁸ OHCHR, children's rights and inclusive social protection, A/HRC/54/36, 2023 ([Report](#)).

¹⁰⁹ High Commissioner for Human Rights, A/HRC/49/33, *supra* note 82, paras. 1–2; Human Rights Council decision 45/113, *supra* note 82.

¹¹⁰ High Commissioner for Human Rights, A/HRC/49/33, *supra* note 82, paras. 3, 26–27, 36.

assessed against the ability to participate and live in the community, as well as against income loss.¹¹¹

Paragraph 60(h) is the report's most specific disability recommendation. It calls for investment in comprehensive, inclusive protection providing the income security necessary for adequate living standards and covering disability-related extra costs, including human support, assistive technology, transport, particularly point-to-point transport, and housing. It connects these measures with cross-sectoral and gender-responsive policies that reduce unpaid care work. This is particularly useful for distinguishing ordinary income security from resources needed to overcome disability-related barriers.¹¹²

Other recommendations support a life-course approach, universal and inclusive schemes, disaggregated data, rights-based support services, meaningful participation and regular monitoring of benefit adequacy and portability. Paragraph 59 specifically addresses intersecting discrimination, including disability; paragraphs 61–63 address available resources, international cooperation and financial institutions' effects on fiscal space. Together, these passages provide practical material for advocacy on coverage, extra costs, accessible administration and financing. The document remains a summary of panel proceedings and recommendations, not a new treaty interpretation adopted by the CRPD Committee or a resolution containing all these recommendations.¹¹³

6.8 The Secretary General report mandated by resolution 52/11

The Secretary-General's A/HRC/58/37, issued on 13 January 2025, is the principal substantive report produced under resolution 52/11, paragraph 28. It takes account of the Council's fifty-fifth-session panel and examines legal obligations, coverage gaps, financing and promising practices. It should be distinguished from A/HRC/58/43, the separate OHCHR report on care and support discussed in section 6.4.¹¹⁴

Paragraph 16 reports, using the ILO World Social Protection Report 2024–26, that only 38.9 per cent of people classified in the underlying statistics as having severe disabilities receive a disability benefit. This figure concerns the specified population and receipt of a benefit. It is not an estimate for all persons with disabilities, does not measure all forms of support, and does not establish that covered people receive adequate assistance. Coverage, adequacy and the ability to exercise rights must be assessed separately.¹¹⁵

The recommendations in paragraph 43 provide useful implementation criteria. Subparagraph (c) expressly includes persons with disabilities in the call for universal, sufficient and equitable protection. Subparagraph (d) treats social protection floors as a basis for progressively developing comprehensive systems. Subparagraph (e) calls for adequate benefits, regular review and adjustment for inflation. Subparagraph (f) recommends independent human rights impact assessments of digital technology in social protection, and subparagraph (g) addresses non-take-up through simpler procedures, fewer unnecessary documentation requirements and action against stigma and discrimination.¹¹⁶

¹¹¹ *Ibid.*, paras. 46–47.

¹¹² *Ibid.*, para. 60(h).

¹¹³ *Ibid.*, paras. 59–63.

¹¹⁴ Secretary-General, A/HRC/58/37, *supra* note 88, paras. 1–2.

¹¹⁵ *Ibid.*, para. 16.

¹¹⁶ *Ibid.*, para. 43(c)–(g).

Subparagraph 43(i) calls for gender-responsive systems and for recognition, redistribution and support of unpaid or underpaid care, together with rights-based, disability-inclusive and age-sensitive support and care systems, in line with resolution 54/6. From a disability perspective, this must be implemented with respect for the agency and preferences of the person receiving support, alongside the rights of paid workers and unpaid supporters. The report's participatory and accountability framework in paragraphs 21–22 also supports meaningful involvement of rights holders and effective remedies.¹¹⁷

The practical implication is that formal eligibility alone cannot demonstrate effective protection. An inaccessible application process, an exclusionary automated system, excessive evidence requirements or a payment eroded by inflation may prevent realization of the right. Disability-inclusive implementation should therefore examine the entire route from entitlement to receipt and use of benefits, including the services and support needed for community participation. These are applications of the report's recommendations read with the CRPD, rather than a claim that the report specifies every feature of a disability-benefit system.

The country reviews make this implementation analysis tangible. The Maldives was asked to provide screen-reader compatibility, multilingual registration and offline applications; Ghana to simplify applications and improve outreach for access to the disability allocation of the District Assembly Common Fund; and Burkina Faso to ease disability-card procedures and burdens of proof. These recommendations expose different points at which an eligible person can be excluded before receiving support. Their convergence with the Secretary-General's analysis strengthens the case for measuring successful access from information and registration through assessment to payment, while maintaining the distinct authorship and legal status of the instruments.¹¹⁸

6.9 The OHCHR practical information note

OHCHR's Practical Information Note on Promising Practices in Realizing the Right to Social Security was prepared under resolution 52/11, paragraph 29. Its introduction describes it as a living document, compiled from stakeholder contributions and intended to support implementation. It addresses legal frameworks, financing, participation, coverage, adequacy, accessible administration and remedies. Resolution 58/9, paragraph 7, acknowledges this output.¹¹⁹

The note provides disability-related examples, including Portugal's Social Benefit for Inclusion and South Africa's non-contributory Disability Grant, on page 7. It also discusses monitoring coverage and adequacy, information and outreach, and accessible complaint mechanisms. Its value is to illustrate available policy instruments and administrative approaches. The country descriptions should be understood as examples reported in the note, rather than assumed to establish every current detail of national law or benefit rates.¹²⁰

Inclusion in a collection of promising practices is not certification that every feature of the scheme complies with the CRPD. An OPD assessment should still examine medicalized or work-incapacity eligibility, means tests, benefit adequacy, control over payments, employment transitions,

¹¹⁷ Secretary-General, A/HRC/58/37, *supra* note 88, paras. 21–22, 43(i); CRPD, *supra* note 1, arts. 4(3), 12, 19.

¹¹⁸ CRPD Committee, Maldives (2025), *supra* note 44, para. 56(b); CRPD Committee, Ghana (2024), *supra* note 26, para. 55(d); CRPD Committee, Burkina Faso (2024), *supra* note 40, para. 53(a).

¹¹⁹ OHCHR, Practical Information Note on Social Security, *supra* note 88, pp. 1–3; Human Rights Council resolution 58/9, *supra* note 82, para. 7.

¹²⁰ OHCHR, Practical Information Note on Social Security, *supra* note 88, pp. 6–7, 9–10.

accessibility and community inclusion. A programme may make progress in one respect while retaining barriers in another. The note should therefore inform implementation choices alongside treaty obligations and the more specific standards reviewed elsewhere in this report.

7. Regional jurisprudence

7.1 The European Court of Human Rights

The European Convention on Human Rights contains no general freestanding right to social security equivalent to ICESCR article 9. Nevertheless, social benefits can fall within the protection of property under article 1 of Protocol No. 1, nondiscrimination under article 14, and respect for private and family life under article 8. The relevant provisions have distinct thresholds, and States retain a measure of discretion in social and economic policy.

Guberina v. Croatia, 22 March 2016, concerned tax relief on the purchase of housing suitable for a family with a child with disabilities. Authorities treated an existing apartment as adequate without properly addressing its accessibility. The Court found discrimination under article 14 read with article 1 of Protocol No. 1. The case is important for disability-related needs and discrimination by association: formal housing criteria must be applied with attention to actual accessibility.¹²¹

Koua Poirrez v. France, 30 September 2003, concerned denial of a non-contributory disability allowance on nationality grounds. The Court found a violation of article 14 with article 1 of Protocol No. 1. Non-contributory financing did not remove the benefit from nondiscrimination scrutiny. The decision does not establish that every residence or qualifying condition is unlawful; it addresses the unjustified distinction in that case.¹²²

Béláné Nagy v. Hungary, Grand Chamber, 13 December 2016, concerned loss of a disability benefit following changes in eligibility conditions. The Court found an excessive individual burden under the property guarantee. The judgment explains both the protection that may attach to an established entitlement or legitimate expectation and its limits: the Convention does not create an unrestricted right to acquire any benefit or receive an unchanged amount forever.¹²³

Krajnc v. Slovenia, 31 October 2017, concerned a substantial reduction in disability-related income following a change in the applicable scheme despite deterioration in the applicant's condition. The Court found that the burden imposed was disproportionate. Transition arrangements, the person's ability to adapt and the impact on subsistence are central considerations when reform affects established protection.¹²⁴

Moskal v. Poland, 15 September 2009, concerned the withdrawal of an early-retirement benefit linked to caring for a child with disabilities after an administrative error. The Court's analysis emphasizes good governance, reliance and the consequences of abrupt withdrawal. Correcting an error is a legitimate aim, but the State must not simply shift a disproportionate burden onto an individual who relied on its decision.¹²⁵

¹²¹ ECtHR, *Guberina v. Croatia*, application No. 23682/13, 22 March 2016 ([Judgment](#)).

¹²² ECtHR, *Koua Poirrez v. France*, application No. 40892/98, 30 September 2003 ([Judgment](#)).

¹²³ ECtHR, *Béláné Nagy v. Hungary* [GC], application No. 53080/13, 13 December 2016 ([Judgment](#)).

¹²⁴ ECtHR, *Krajnc v. Slovenia*, application No. 38775/14, 31 October 2017 ([Judgment](#)).

¹²⁵ ECtHR, *Moskal v. Poland*, application No. 10373/05, 15 September 2009 ([Judgment](#)).

Di Trizio v. Switzerland, 2 February 2016, concerned the calculation of invalidity benefits after childbirth and an anticipated change to part-time work. The Court found indirect sex discrimination in conjunction with article 8. The case illustrates how benefit formulas can reproduce gendered assumptions about unpaid care and paid employment and thereby affect disability-related protection.¹²⁶

J.D. and A. v. the United Kingdom, 24 October 2019, demonstrates the limits of claims against housing-benefit reductions. The first applicant lived with and cared for her adult daughter with disabilities. The Court did not find the challenged treatment of that applicant discriminatory, taking account of the justification and discretionary housing-payment arrangements. It found a violation for the second applicant, whose circumstances involved domestic violence and a protected housing arrangement. These separate outcomes must not be merged into a single holding that the measure was unlawful for persons with disabilities generally.¹²⁷

McDonald v. the United Kingdom, 20 May 2014, concerned reduced night-time assistance and its consequences for dignity and private life. The Court found a violation of article 8 for the period when the reduction lacked a proper domestic legal basis, but did not find the later lawful arrangements to violate the Convention. This shows the Court's comparatively restrained approach to some resource-allocation decisions. The CRPD Committee's more detailed community-living standards should not be described as if they were the holding in McDonald.¹²⁸

Taken together, these cases provide strong arguments against arbitrary withdrawal, inaccessible application of benefit rules, unjustified discrimination and disproportionate burdens. They do not establish that every reduction in social expenditure, every means test or every refusal of a requested service violates the European Convention.

7.2 The European Committee of Social Rights

The European Social Charter provides more direct social-rights protection than the European Convention. Relevant provisions include social security, social and medical assistance, social welfare services, disability inclusion, family protection and protection against poverty and exclusion, depending on the treaty provisions accepted by the State.

In European Disability Forum and Inclusion Europe v. France, complaint No. 168/2018, decision adopted on 19 October 2022 and made public in April 2023, the Committee found violations of articles 15§3, 15§1, 11§1 and 16. The case addressed failures affecting community inclusion, education, health and families. It is particularly important for showing that formal policy commitments are insufficient where people cannot obtain effective support and families must compensate for systemic gaps. It should not be cited as an operative finding of a violation of article 30.¹²⁹

In International Federation for Human Rights v. Belgium, complaint No. 75/2011, decision of 18 March 2013, inadequate access to services for adults with significant support requirements and the consequences for families led to findings under provisions concerning social welfare services, family

¹²⁶ ECtHR, Di Trizio v. Switzerland, application No. 7186/09, 2 February 2016 ([Judgment](#)).

¹²⁷ ECtHR, J.D. and A. v. the United Kingdom, application Nos. 32949/17 and 34614/17, 24 October 2019 ([Judgment](#)).

¹²⁸ ECtHR, McDonald v. the United Kingdom, application No. 4241/12, 20 May 2014 ([Judgment](#)).

¹²⁹ ECSR, European Disability Forum and Inclusion Europe v. France, complaint No. 168/2018, merits decision of 19 October 2022, public 17 April 2023 ([Official decision](#)).

protection, poverty and exclusion, and nondiscrimination. Relevant operative provisions included articles 14§1, 16 and 30, and article E with articles 14§1 and 16.¹³⁰

The Belgian decision's discussion of service capacity reflects its factual and historical setting. It should now be read with the CRPD requirement to develop community support and avoid segregation, rather than used to justify expansion of institutional provision. Both cases strengthen arguments for concrete delivery, adequate resources, reliable data and accountability for long waiting lists.

7.3 European Union law

EU law provides an additional, jurisdiction-specific layer. In *A*, Case C-679/16, judgment of 25 July 2018, the Court of Justice addressed personal assistance for a person studying in another Member State. Although the assistance at issue did not qualify as a sickness benefit under the relevant social security coordination rules, EU citizenship and free movement constrained refusal based on study abroad. The case illustrates that the legal classification of a support payment does not exhaust the rights analysis.¹³¹

In *J.M.A.R. v. Ca Na Negreta*, Case C-631/22, judgment of 18 January 2024, the Court held that a finding of permanent incapacity could not automatically justify termination without consideration of reasonable accommodation under EU equality law. The case concerns employment rather than entitlement to a disability payment, but is relevant to the harmful assumption that disability or receipt of an incapacity-related status necessarily ends the possibility of work.¹³²

7.4 The Inter American system

In *Muelle Flores v. Peru*, judgment of 6 March 2019, the Inter-American Court addressed prolonged failure to pay and enforce an established pension entitlement. It recognized the autonomous justiciability of the right to social security under article 26 of the American Convention and connected timely pensions, effective remedies and health protection. The applicant's age and disability heightened the consequences of delay. The case is a major authority for the proposition that a recognized benefit must be paid and an enforceable judgment must produce actual protection.¹³³

Furlan and Family v. Argentina, judgment of 31 August 2012, concerned excessive delay in compensation proceedings following an injury that caused disability during childhood. The Court examined how delay affected rehabilitation, living conditions and the family. The decision supports heightened diligence where delayed adjudication has immediate consequences for a person with disabilities. It should not be misdescribed as fixing a general disability-pension rate or as the Court's principal autonomous article 26 social-security ruling.¹³⁴

In *Miskito Divers (Lemonth Morris et al.) v. Honduras*, judgment of 31 August 2021, the Court addressed occupational injury, disability and exclusion affecting Indigenous divers. The findings connected unsafe work, health and social security with failures of regulation and protection. The

¹³⁰ ECSR, *International Federation for Human Rights v. Belgium*, complaint No. 75/2011, merits decision of 18 March 2013 ([Official decision](#)).

¹³¹ CJEU, *A*, Case C-679/16, 25 July 2018, ECLI:EU:C:2018:601 ([Judgment](#)).

¹³² CJEU, *J.M.A.R. v. Ca Na Negreta SA*, Case C-631/22, 18 January 2024, ECLI:EU:C:2024:53 ([Judgment](#)).

¹³³ IACtHR, *Muelle Flores v. Peru*, 6 March 2019, Series C No. 375 ([Judgment](#)).

¹³⁴ IACtHR, *Furlan and Family v. Argentina*, 31 August 2012, Series C No. 246 ([Judgment](#)).

reparations included measures responding to the divers' and families' social protection needs. The case illustrates State duties to regulate private economic activity as well as to provide remedies and support after disability-related harm.¹³⁵

Vera Rojas et al. v. Chile, judgment of 1 October 2021, concerned the withdrawal of home health coverage for a child with significant medical and support needs. The Court found violations including health and social security, together with other rights. It is relevant to continuity of protection and State responsibilities where private insurance or service providers make decisions affecting essential support.¹³⁶

Advisory Opinion OC-31/25, adopted on 12 June 2025, recognizes care as an autonomous human right within the Inter-American system, encompassing providing care, receiving care and self-care. This is an important development for social protection and unpaid care. It is an advisory interpretation, not a contentious judgment awarding benefits to an individual, and not a new universal treaty. For disability policy, its application should be integrated with the CRPD's specific requirements of autonomy, legal capacity and community inclusion.¹³⁷

7.5 The African system

The African Charter protects health under article 16 and provides specific protection for older persons and persons with disabilities under article 18(4). In Purohit and Moore v. The Gambia, communication No. 241/2001, decision of 29 May 2003, the African Commission found violations arising from the treatment and legal position of persons detained under mental-health legislation, including violations of articles 16 and 18(4).¹³⁸

The decision is relevant to the State's responsibility to provide material and health support and to take concrete measures despite resource constraints. It is not a general pension-entitlement case. Its pre-CRPD language and institutional assumptions should be evaluated in light of the later Convention's stronger guarantees concerning liberty, legal capacity and community living.

The 2018 Protocol to the African Charter on the Rights of Persons with Disabilities in Africa contains more specific protection. Article 20 addresses adequate living standards and social protection, including disability-related services, devices and assistance and measures responding to additional expenses. Its relevance in a particular State depends on the applicable treaty status. It reinforces the regional movement toward disability-inclusive protection but should not be cited as a judgment or assumed to bind every African State.¹³⁹

The African Union also adopted a Protocol on the Rights of Citizens to Social Protection and Social Security in 2022. This broader instrument is relevant to comprehensive protection, disaggregated

¹³⁵ IACtHR, Miskito Divers (Lemonth Morris et al.) v. Honduras, 31 August 2021, Series C No. 432 ([Judgment](#)).

¹³⁶ IACtHR, Vera Rojas et al. v. Chile, 1 October 2021, Series C No. 439 ([Court summary](#)).

¹³⁷ IACtHR, Advisory Opinion OC-31/25, 12 June 2025, content and scope of care as a human right and its interrelationship with other rights ([Official case page](#); [IACHR official explanation](#)).

¹³⁸ African Commission on Human and Peoples' Rights, Purohit and Moore v. The Gambia, communication No. 241/2001, 29 May 2003 ([Official record](#)).

¹³⁹ African Union, Protocol to the African Charter on Human and Peoples' Rights on the Rights of Persons with Disabilities in Africa, adopted 2018, especially art. 20 ([Official text](#)).

data and complaint mechanisms. Its application requires checking entry into force and the State's treaty commitments; adoption alone does not establish that it binds every member State.¹⁴⁰

8. Cross cutting issues

8.1 Women children and older persons

Women and girls with disabilities may experience interacting barriers arising from disability, gender, poverty and unequal care responsibilities. A system can be discriminatory even if disability benefits are formally gender-neutral, for example when eligibility depends on uninterrupted formal employment or payments are controlled by a household head. CRPD general comment No. 3 and the equality framework require an intersectional assessment.¹⁴¹

The CRPD concluding observations turn intersectionality into questions about distribution and control. Montenegro was asked to ensure that benefits are paid directly to women with disabilities, establish procedures for recovering benefits or earnings appropriated by family members, enforce maintenance rights and provide adequate support where deserted women are destitute. Oman was asked to remove direct and indirect discrimination against women in pension access, while Türkiye was asked to increase women's access to allowances. The analytical implication is that household benefit receipt cannot establish that women themselves enjoy social protection: assessment must also examine individual access, control over resources and remedies against appropriation.¹⁴²

For children, support should enable family and community life, inclusive education and participation. A child's entitlement should not depend on attending an inaccessible school or obtaining a service that does not exist locally. Family support should reduce the risk of separation and institutionalization, while preserving the child's voice and evolving autonomy. Transitions to adulthood require planning so that child benefits, school-based assistance or parental arrangements do not end before adult support is operational.¹⁴³

For children, CRPD concluding observations link adequacy with identifying who is missing from the system. Montenegro was asked to collect local data on every child with disabilities and ensure access to disability benefits sufficient for living above subsistence. North Macedonia was asked to repeal age restrictions, allocate benefits to children and provide equal material support to biological and foster families. The Czech Republic was asked, with genuine participation, to restore additional assistance for families with children with disabilities and broaden access to assistive devices regardless of age. Together these findings support reviewing both childhood entitlements and age transitions, rather than treating a household's nominal inclusion in a general family programme as sufficient.¹⁴⁴

¹⁴⁰ African Union, Protocol to the African Charter on Human and Peoples' Rights on the Rights of Citizens to Social Protection and Social Security, adopted 2022 ([Official text](#)).

¹⁴¹ CRPD Committee, general comment No. 3 on women and girls with disabilities, CRPD/C/GC/3, 2016 ([Document](#)); CRPD Committee, general comment No. 6, *supra* note 3.

¹⁴² CRPD Committee, Montenegro (2017), *supra* note 52, paras. 50–51; CRPD Committee, concluding observations on Oman (2018), paras. 49–50 (Article 28 extract in IDA compilation, p. 38); CRPD Committee, concluding observations on Türkiye (2019), paras. 54–55 (Article 28 extract in IDA compilation, p. 35).

¹⁴³ CRPD Committee, deinstitutionalization guidelines, *supra* note 2; Human Rights Council resolution 55/29, *supra* note 51; OHCHR, A/HRC/54/36, *supra* note 108; Convention on the Rights of the Child, *supra* note 20.

¹⁴⁴ CRPD Committee, Montenegro (2017), *supra* note 52, para. 51; CRPD Committee, concluding observations on North Macedonia (2018), paras. 50–51 (Article 28 extract in IDA compilation, p. 37); CRPD Committee, Czech Republic (2015), *supra* note 60, para. 53.

Older persons with disabilities retain their CRPD rights. An age threshold should not automatically remove individualized disability support and replace it with a less adequate arrangement merely because the person reaches retirement age. The deinstitutionalization guidelines specifically address continuity for older persons. Pension rights and disability-related assistance should be coordinated rather than treated as mutually exclusive categories.¹⁴⁵

8.2 Intellectual, psychosocial, and multiple disabilities/higher support needs

Eligibility and delivery must accommodate people who communicate differently, require decision-making support or have fluctuating needs. A system that requires unaided self-direction, repeated complex applications or a stable and easily measured impairment may disproportionately exclude these groups. S.K. provides a concrete example of an apparently autonomy-based criterion operating discriminatorily.¹⁴⁶

Supported decision-making, accessible information, trusted assistance chosen by the person and independent advocacy can enable effective access. Protection against exploitation should be designed without automatically transferring financial control to a guardian, provider or family member. The person's rights and preferences remain central even where support needs are intensive.¹⁴⁷

The diagnostic exclusions discussed in section 3.4 are particularly significant for people whose needs are poorly recognized in conventional assessment systems. Niger's review adds a distinct example: the Committee sought adequately funded protection for persons with intellectual or psychosocial disabilities and persons with albinism, including access to sunscreen for the latter. Read alongside New Zealand's attention to chronic and rare conditions and Switzerland's concern about late-diagnosed autism, this supports testing both recognition and the content of support. Broadening a diagnostic list is insufficient if the benefit package still omits the goods, services or assistance that the newly included groups require.¹⁴⁸

8.3 Rural areas Indigenous peoples, migrants and informal workers

Distance, transport costs, service shortages, language barriers and lack of accessible identification procedures can make formally equal benefits unequal in practice. Indigenous persons with disabilities may also face collective and cultural barriers, as the Miskito Divers case illustrates. Delivery must account for context and avoid assuming that an urban service model reaches everyone.¹⁴⁹

The rural and Indigenous dimension requires changes to programme design and implementation. Guatemala was asked to mainstream disability within Indigenous policies using a rural and community approach, take account of Indigenous persons' own views, monitor their situation regularly and adopt special measures for women, children and older persons facing abandonment or extreme poverty. Brazil was asked to review qualifying conditions with particular attention to isolated

¹⁴⁵ CRPD, *supra* note 1, art. 28(2)(e); CRPD Committee, deinstitutionalization guidelines, *supra* note 2, para. 81.

¹⁴⁶ S.K. v. Finland, *supra* note 4.

¹⁴⁷ CRPD Committee, general comment No. 1, *supra* note 15; CRPD Committee, general comment No. 5, *supra* note 5; CRPD Committee, deinstitutionalization guidelines, *supra* note 2.

¹⁴⁸ CRPD Committee, concluding observations on New Zealand, *supra* note 41, paras. 53–54; CRPD Committee, Switzerland (2022), *supra* note 41, paras. 53–54; CRPD Committee, concluding observations on Niger (2019), paras. 45–46 (Article 28 extract in IDA compilation, p. 33).

¹⁴⁹ Miskito Divers v. Honduras, *supra* note 135.

Indigenous communities. Costa Rica's 2024 review added a financed, timetabled and monitored national disability-poverty plan focusing on women, children, Indigenous and Afro-descendant persons and rural residents. These recommendations connect representation, targeted measures and delivery infrastructure; geographic coverage on a programme map is an inadequate proxy for effective inclusion.¹⁵⁰

Migrant and refugee status requires careful analysis of the applicable treaty and benefit. CESCR general comment No. 19 addresses non-nationals, including contributory entitlements, access to non-contributory support and essential health protection. It does not mean that all residence conditions are automatically impermissible, but nationality or status restrictions must be assessed against equality, reasonableness and the rights at stake.¹⁵¹

Several reviews expressly require action on migration-related exclusion. The Republic of Korea was asked immediately to include migrants and refugees in basic-living and disability support; Sweden to include asylum seekers, refugees, migrants and persons with temporary protection in disability support; and the Dominican Republic to ensure access for Haitians with disabilities. Earlier observations on Argentina addressed migrant workers and their children with disabilities. These recommendations are stronger than a general invitation to collect migration data, but they remain findings addressed to particular legal and social contexts. In another jurisdiction, they provide persuasive comparators for examining the purpose and effect of status-based exclusion, rather than dispensing with analysis of the applicable treaty and scheme.¹⁵²

Informal workers and people excluded from paid employment need non-contributory protection. International cooperation and nationally financed floors are especially relevant where contributory coverage is narrow. Disability-specific support should not be limited to people whose disability arose from formal employment or a compensable accident if others with comparable needs are left without adequate assistance.¹⁵³

The Lao People's Democratic Republic review expressly connects disability exclusion with a labour market dominated by self-employment, informal work and unpaid work in the home. The Committee called for social protection entitlements for self-employed and informal workers, inclusion in national development and poverty plans, adequate budgets and accessible information for impoverished rural and ethnic communities. This supplies an implementation test for systems built around payroll contributions: identify workers who cannot realistically establish the prescribed contribution history, and assess the actual alternative protection available to them. Promoting employment alone does not answer the coverage gap identified by the Committee.¹⁵⁴

¹⁵⁰ CRPD Committee, concluding observations on Guatemala (2016), paras. 65–66 (Article 28 extract in IDA compilation, p. 46); CRPD Committee, concluding observations on Brazil (2015), para. 51 (Article 28 extract in IDA compilation, p. 49); CRPD Committee, Costa Rica (2024), *supra* note **Error! Bookmark not defined.**, para. 48.

¹⁵¹ CESCR, general comment No. 19, *supra* note 1, paras. 36–38; Koua Poirrez v. France, *supra* note 122.

¹⁵² CRPD Committee, Republic of Korea (2022), *supra* note 37, para. 58(c); CRPD Committee, concluding observations on Sweden (2024), para. 62(c) (Article 28 extract in IDA compilation, pp. 17–18); CRPD Committee, Dominican Republic (2025), *supra* note 26, para. 52(c); CRPD Committee, concluding observations on Argentina (2012), para. 46 (Article 28 extract in IDA compilation, p. 53).

¹⁵³ ILO Recommendation No. 202, *supra* note 21; CESCR, statement on social protection floors, *supra* note 21; CRPD Committee, concluding observations on New Zealand, *supra* note 41; Human Rights Council resolution 58/9, *supra* note 82.

¹⁵⁴ CRPD Committee, concluding observations on Lao People's Democratic Republic (2022), CRPD/C/LAO/CO/1, paras. 52–53 ([Official text](#)).

8.4 Emergencies, conflict, and displacement

CRPD article 11 requires protection in situations of risk and humanitarian emergency. Social protection planning should preserve benefit continuity, accessible payment channels, personal assistance, medicines, devices and communication support. Emergency measures may need to address new expenses and displacement-related loss of documentation or service access.¹⁵⁵

This is not only a temporary cash issue. A person may receive an emergency transfer yet be unable to evacuate, find accessible accommodation or obtain essential assistance. Social protection and humanitarian systems should therefore be coordinated with community support and accessibility, with meaningful participation by representative organizations.

Ukraine's 2024 review specifies what continuity requires during armed conflict: accessible transport, personal assistance and representatives to facilitate pension access, including in occupied territories; rapid and accessible pension payment; and access to top-up cash for older persons, women, children and people experiencing intersecting discrimination. The concern included registration and administrative barriers affecting people displaced internally or unable to reach offices. The practical lesson is that emergency planning must test whether documentation, attendance and payment rules still work for displaced or isolated recipients. A nominally unchanged entitlement is insufficient where the route to claiming or collecting it has become inaccessible.¹⁵⁶

Crisis protection also concerns durability and recovery. Türkiye was asked to protect adequate income and disability-cost allowances during financial crisis and secure sustainable, expanded financing for cash assistance to refugees, asylum seekers and humanitarian-residence holders. Colombia was asked to prioritize accessible social housing for persons with disabilities, including victims of armed conflict. Read together, these recommendations support connecting emergency transfers with continuing support and accessible housing. They do not establish one universal humanitarian benefit formula; they identify the need to prevent crisis-related exclusion and to preserve the conditions for longer-term community life.¹⁵⁷

9. Maximum available resources, progressive realization and prevention of regression/impact of austerity measures

9.1 Immediate obligations and progressive implementation

CRPD article 4(2) and ICESCR article 2(1) recognize progressive realization of economic, social and cultural rights using the maximum available resources and, where needed, international cooperation. This permits staged implementation where full realization requires resources, but it does not authorize indefinite postponement or erase obligations that apply immediately.

Nondiscrimination, reasonable accommodation, taking deliberate steps and providing effective access to remedies cannot simply be postponed until a State becomes wealthier. Planning must be concrete, rights-based and directed toward full realization. Minimum essential protection has particular importance in CESCR's framework, including essential health care, basic shelter, water, food and basic education.¹⁵⁸

¹⁵⁵ CRPD, *supra* note 1, art. 11; CRPD Committee, deinstitutionalization guidelines, *supra* note 2, para. 86.

¹⁵⁶ CRPD Committee, concluding observations on Ukraine (2024), CRPD/C/UKR/CO/2-3, paras. 56–57 ([Official text](#)).

¹⁵⁷ CRPD Committee, Türkiye (2019), *supra* note 142, para. 55; CRPD Committee, Colombia (2016), *supra* note 16, para. 63.

¹⁵⁸ CESCR, general comment No. 19, *supra* note 1, paras. 40, 59–60.

The minimum-core doctrine is most fully elaborated in CESCR jurisprudence. It should be attributed accordingly, rather than presented as wording found expressly in article 28. The CRPD Committee's equality and independent-living interpretations complement it by emphasizing inclusion, disability-related support and protection against severe deprivation.¹⁵⁹

The concluding observations repeatedly specify the administrative steps expected while systems are being developed. Togo was asked to adopt revised social-protection legislation and incorporate assistance with food, school supplies, medical expenses and other needs into public policy with targets, monitoring and resources. Mexico was asked to adopt a disability-poverty plan with financing and an implementation schedule, implement it and monitor its operation. These recommendations make progressive realization assessable: a government should be able to identify the legal measure, responsible programme, resources, timetable and means of measuring delivery. An announced policy without these elements does not answer the specific implementation deficits identified in the reviews.¹⁶⁰

9.2 The test for reductions in protection

CESCR general comment No. 19 establishes a strong presumption against retrogressive measures. Where such measures are adopted, the State bears the burden of showing careful consideration of alternatives and justification by reference to the totality of Covenant rights and the full use of available resources. Relevant considerations include genuine participation, nondiscrimination, sustained effects on rights, minimum essential protection and independent review.¹⁶¹

For disability-related reforms, this requires examining the combined impact of cash reductions, service charges, housing rules, eligibility changes and local-service cuts. An unchanged headline benefit can coexist with reduced real protection if fees rise or essential services disappear. An aggregate spending increase can likewise conceal serious losses for a particular group.

The United Kingdom inquiry illustrates this cumulative method. Human rights impact assessment guidance supplies a practical approach: identify affected rights and groups, assess alternatives, examine distributional effects, consult rights holders and establish mitigation and review. A fiscal emergency does not dispense with this analysis.¹⁶²

The reporting practice confirms that impact assessment is an ongoing exercise. The United Kingdom's 2017 observations called for a cumulative assessment of recent and forthcoming reforms using disaggregated data and close collaboration with representative organizations, with the results guiding policy and measures against regression. Finland's 2025 observations required a comprehensive assessment of recent reforms, cuts and savings, and budgets enabling welfare service counties to deliver Convention-compliant entitlements. Italy had similarly been asked to assess austerity's effects on adults and children and prevent further resource reductions increasing poverty.

¹⁵⁹ CRPD Committee, general comment No. 5, *supra* note 5; CRPD Committee, general comment No. 6, *supra* note 3.

¹⁶⁰ CRPD Committee, Togo (2023), *supra* note 12, para. 54(a); CRPD Committee, concluding observations on Mexico (2022), para. 63 (Article 28 extract in IDA compilation, p. 28).

¹⁶¹ CESCR, general comment No. 19, *supra* note 1, para. 42.

¹⁶² CRPD Committee, United Kingdom inquiry, *supra* note 7; CRPD Committee, United Kingdom inquiry follow-up, *supra* note 7; Independent Expert on foreign debt, A/HRC/40/57, *supra* note 106.

The relevant unit of assessment is therefore the person's combined protection across programmes and levels of government, not the isolated balance sheet of one benefit.¹⁶³

Some CRPD concluding observations move beyond assessment to restoration and redress. Slovenia was asked to restore support curtailed under austerity and prevent hardship caused by reduced income. Hungary was asked to redress the adverse effects of its 2012 disability-benefit reforms and compensate persons with disabilities for the resulting damage. Portugal was asked urgently to review austerity with representative organizations and allocate sufficient funding to combat destitution. These findings support examining whether reform remedies repair actual losses as well as improve future policy. They are country-specific supervisory recommendations, however, and should not be described as individual compensation awards or as making every adverse reform automatically unlawful.¹⁶⁴

9.3 Financing and international cooperation

States retain choices concerning taxation, contributions and the mix of public services and transfers, but those choices must be assessed against their human rights obligations. Budget transparency should make visible both mainstream and disability-specific expenditure, territorial disparities, unmet needs and the effects of tax concessions or user charges.

International cooperation should support inclusive systems, administrative capacity, data and accessible community services. Under CRPD article 32, disability inclusion is relevant to development cooperation itself. Financing institutions and donors should avoid funding structures that perpetuate segregation or undermine autonomy. The exact legal responsibility of a particular institution requires separate analysis; a Council resolution or expert report should not be used to collapse the responsibilities of States, organizations and private lenders into one rule.

Social protection floors are a starting point, not a reason to freeze benefits at subsistence level or exclude disability-related support. The CESCER statement, ILO Recommendation No. 202 and Council resolutions support progressive extension in both coverage and adequacy, with sustainable financing and accountability.¹⁶⁵

Financing recommendations address the ability to deliver, not only the nominal size of an appropriation. Zambia was asked to equip its disability trust fund and agency with adequate financial, human and technical resources. The Dominican Republic was asked to operationalize its statutory disability fund. The European Union's 2025 review called for earmarked Social Fund allocations addressing poverty and intersectional discrimination, and prioritization of Regional Development Fund investment in affordable, accessible housing. These examples support distinguishing a legislated fund, money actually allocated, institutional capacity and expenditure that

¹⁶³ CRPD Committee, concluding observations on the United Kingdom, *supra* note 69, para. 59; CRPD Committee, concluding observations on Finland, *supra* note 69, para. 55(a)–(b); CRPD Committee, concluding observations on Italy (2016), para. 72 (Article 28 extract in IDA compilation, p. 46).

¹⁶⁴ CRPD Committee, concluding observations on Slovenia (2018), para. 48 (Article 28 extract in IDA compilation, pp. 39–40); CRPD Committee, concluding observations on Hungary (2022), CRPD/C/HUN/CO/2-3, para. 55(b) ([Official text](#)); CRPD Committee, concluding observations on Portugal (2016), para. 53 (Article 28 extract in IDA compilation, p. 48).

¹⁶⁵ ILO Recommendation No. 202, *supra* note 21; CESCER, statement on social protection floors, *supra* note 21; Human Rights Council resolution 52/11, *supra* note 9; Human Rights Council resolution 58/9, *supra* note 82.

reaches intended rights holders. The relevant funding mechanism differs across national and regional systems; the recurring requirement is effective, disability-inclusive implementation.¹⁶⁶

External financing does not remove the need for disability scrutiny. Argentina was specifically asked to ensure that economic reforms and associated loan agreements do not adversely affect disability rights or access to social services. The European Union's 2015 review called for urgent cooperation with Member States and representative organizations to prevent further adverse and regressive effects of austerity, including through a minimum social protection floor. These recommendations justify examining disability consequences when negotiating or implementing fiscal conditions and adjustment programmes. They should be attributed to the reviewed State or regional organization; they do not, by themselves, establish the independent treaty liability of every lender involved.¹⁶⁷

10. Participation administration and accountability

10.1 The role of representative organizations

CRPD general comment No. 7 distinguishes organizations of persons with disabilities from organizations that merely provide services for them. Representative participation is required in the design, implementation, monitoring and evaluation of social protection. Consultation should occur early enough to influence choices, use accessible formats and include groups that are frequently underrepresented.¹⁶⁸

Participation requires resources. The Committee's guidance supports sustainable funding, accessible funding procedures and preservation of organizational independence. A provider's expertise can be valuable, but it does not replace the views of persons with disabilities or justify allowing provider interests to dominate decisions about eligibility and financing.¹⁶⁹ Meaningful participation also requires feedback: authorities should explain what they heard, what changed and why recommendations were not adopted. In benefit reform, organizations need access to proposals, impact data and fiscal assumptions in time to examine them. The treaty requirement is substantive involvement, not merely attendance at a meeting.

The Article 28 reviews locate participation at identifiable decision points. Benin was asked to involve persons with disabilities and their organizations in the design, implementation and monitoring of living-standard policies; Bangladesh to ensure full and effective participation in designing relevant policies and programmes; and Mongolia to involve representative organizations actively when reviewing benefit amounts against inflation and minimum living standards. Seychelles was asked to secure genuine participation in reviewing eligibility legislation. Together these recommendations support a participation record that shows involvement in setting eligibility, calculating adequacy and

¹⁶⁶ CRPD Committee, *Zambia* (2024), *supra* note 58, para. 56(c); CRPD Committee, *Dominican Republic* (2025), *supra* note 26, para. 52(a); CRPD Committee, concluding observations on *European Union* (2025), para. 67(a), (c) (Article 28 extract in IDA compilation, pp. 9–10).

¹⁶⁷ CRPD Committee, *Argentina* (2023), *supra* note **Error! Bookmark not defined.**, para. 54(d); CRPD Committee, concluding observations on *European Union* (2015), para. 67 (Article 28 extract in IDA compilation, p. 49).

¹⁶⁸ CRPD Committee, general comment No. 7, *supra* note 85.

¹⁶⁹ *Ibid.*, paras. 58–62.

checking delivery, rather than relying on a general consultation event unrelated to the decision under challenge.¹⁷⁰

Participation also needs to cross administrative boundaries. Belgium was asked to mainstream disability in federal poverty and homelessness action and regional poverty plans, with close consultation and active involvement in monitoring effective implementation. New Zealand was asked to co-design and co-produce reform to address inequalities in support, including consideration of an integrated model with consistent standards. These recommendations suggest examining who is involved when responsibility shifts between agencies, regions or funding streams, and whether people excluded by the existing system can influence its redesign. An agency's consultation with its current beneficiaries alone may fail to expose the exclusions that the review process seeks to address.¹⁷¹

10.2 Accessible administration and effective remedies

The administrative system should provide clear eligibility rules, accessible information, assistance with claims, proportionate evidence requirements, timely decisions, understandable reasons and independent review. Payment channels must be accessible to people who cannot use a standard bank account, biometric process, mobile application or online portal without assistance.

Data protection and autonomy must be preserved when family members, support persons or intermediaries assist with a claim. Automated systems should not make it impossible to understand or contest an adverse decision. Fraud prevention must be proportionate and should not presume dishonesty because someone's support needs vary or because a disability is not visible.¹⁷²

Remedies may include reconsideration, reinstatement, arrears, compensation, interim protection, changes to eligibility rules, accessible procedures and wider structural reform. The appropriate remedy depends on the forum and finding. Effective enforcement matters as much as a favourable decision: Muelle Flores demonstrates how an unimplemented pension judgment can leave the underlying right unrealized.¹⁷³

Accessibility of administration includes communication and recurring burdens, not just the initial form. Hungary was asked to make its entitlement system accessible and easy to use through alternative and augmentative communication; France to simplify local procedures and provide accessible information, including Easy Read; and Mauritius to reduce the burden of reassessments for people already found eligible. These recommendations support examining the cumulative demands placed on a claimant throughout the life of an award. A system can provide an accessible application form yet remain exclusionary through repeated evidence requests, inaccessible reassessment notices or procedures that assume one mode of communication.¹⁷⁴

¹⁷⁰ CRPD Committee, Benin (2024), *supra* note 12, para. 56(b); CRPD Committee, concluding observations on Bangladesh (2022), para. 54(b) (Article 28 extract in IDA compilation, p. 24); CRPD Committee, Mongolia (2023), *supra* note 32, para. 56(a); CRPD Committee, Seychelles (2018), *supra* note 30, para. 48.

¹⁷¹ CRPD Committee, Belgium (2024), *supra* note 44, para. 59(b); CRPD Committee, concluding observations on New Zealand, *supra* note 41, para. 54(b).

¹⁷² Special Rapporteur on extreme poverty, A/HRC/50/38, *supra* note 8; Special Rapporteur on extreme poverty, A/74/493, *supra* note 8.

¹⁷³ Muelle Flores v. Peru, *supra* note 133.

¹⁷⁴ CRPD Committee, Hungary (2022), *supra* note 164, para. 55(c); CRPD Committee, France (2021), *supra* note 42, para. 57; CRPD Committee, Mauritius (2024), *supra* note 42, para. 50(c).

Integrity and accountability must protect recipients as well as public funds. China was asked to prevent corruption in local allocation and distribution of welfare benefits; the Russian Federation to improve transparency and Convention safeguards in the administration of support; and Montenegro to establish procedures enabling women to recover earnings or benefits taken by relatives. These findings identify risks at several stages—public allocation, administrative decision and private control after payment. An effective oversight system should therefore be able to detect both wrongful exclusion and diversion of awarded support. Stronger administrative control is not an adequate response if the person remains unable to obtain or exercise control over their entitlement.¹⁷⁵

10.3 Evidence and monitoring

Monitoring should examine coverage and exclusion, benefit adequacy, unmet support needs, waiting times, interruptions, appeals, accessibility and community-living outcomes. Disaggregation should address sex, age, disability, location and other relevant factors, with safeguards for privacy and against misuse. Counting beneficiaries alone does not reveal whether people can exercise their rights.

For litigation or international submissions, the most useful evidence usually combines the governing rule, individual circumstances, actual and unmet expenses, the decision-making record, comparison groups where relevant, and the consequences for living standards or inclusion. Expert evidence and testimony from representative organizations can help establish systemic patterns, but should not obscure the person's own account.

The reviews specify what disaggregation should reveal. Azerbaijan was asked to collect living-condition and access data by sex, age, gender, ethnicity, residence and migration, refugee or asylum status. The Philippines was asked to report both the number and percentage receiving minimum protection, including persons with intellectual or psychosocial disabilities. Iran was asked to work with representative organizations on coverage of in-home support, pensions and complementary health insurance, including minority beneficiaries. These recommendations favour linked measures of need, population and receipt: a rise in the number of beneficiaries alone cannot show that coverage gaps have narrowed if the eligible or excluded population is unknown.¹⁷⁶

Monitoring must also make findings usable. Viet Nam was asked to use indicators for disability inclusion in poverty and rural-development programmes, publish disaggregated results for decision-makers, the population and representative organizations, and record beneficiaries of public and social housing. Kenya was asked to ensure regular distribution of assistance and monitor actual changes in living conditions, while Slovakia was asked to monitor whether schemes reduce poverty. The resulting evaluative approach distinguishes legal entitlement, effective receipt and outcomes. Reporting should explain persistent non-receipt, interruptions and unequal results, and identify the

¹⁷⁵ CRPD Committee, concluding observations on China (2012), para. 44 (Article 28 extract in IDA compilation, p. 54); CRPD Committee, concluding observations on Russian Federation (2018), paras. 56–57 (Article 28 extract in IDA compilation, p. 39); CRPD Committee, Montenegro (2017), *supra* note 52, para. 51.

¹⁷⁶ CRPD Committee, concluding observations on Azerbaijan (2024), para. 62(a) (Article 28 extract in IDA compilation, p. 15); CRPD Committee, concluding observations on Philippines (2018), para. 49 (Article 28 extract in IDA compilation, p. 36); CRPD Committee, concluding observations on Iran (Islamic Republic of) (2017), para. 53 (Article 28 extract in IDA compilation, p. 44).

corrective action taken; the existence of a data collection exercise is not itself evidence that protection has improved.¹⁷⁷

11. Practical synthesis for advocacy and legal analysis

A strong assessment of a social protection scheme should answer the following questions.

- What is the benefit or service intended to secure: basic income, replacement of earnings, disability-related expenses, health protection, community support or a combination? Distinguishing these functions prevents an inappropriate eligibility rule from being carried across different purposes.
- Who is excluded, and why? Examine contribution histories, impairment lists, work-capacity tests, age limits, residence conditions, household resources, documentation and digital access.
- Is the protection adequate in practice? Assess ordinary living costs and disability-related expenses, including unmet needs, service charges, geographic differences and changes in purchasing power.
- Does the arrangement preserve choice and control? Consider the payee, legal capacity, supported decision-making, provider restrictions, living arrangements and the availability of community alternatives.
- Does it support employment and participation? Examine benefit withdrawal, continuity of essential extra-cost support, transition rules and rapid reactivation when work ends.
- What is the cumulative effect of reform? Evaluate cash benefits, housing, health, transport, personal assistance and local services together, and test less harmful alternatives.
- Were persons with disabilities closely consulted through their representative organizations? Examine timing, accessibility, representation, resources and actual influence.
- Can people enforce their rights? Assess reasons, review, legal assistance, procedural accommodations, timely payment, interim protection and implementation of favourable decisions.
- Housing and essential services: test affordability, accessibility, tenure, water and sanitation, and the availability of community support; track actual access as well as eligibility
- Continuity across life stages: identify support lost at education, employment or retirement transitions, and distinguish ordinary income replacement from continuing disability costs.
- Implementation and redress: connect legal duties to budgets, timetables, responsible institutions and disaggregated outcomes; where reform has caused harm, assess restoration and appropriate remedies.

The most established international propositions are that social protection must be nondiscriminatory, practically accessible and adequate; disability-related costs cannot be ignored; support must enable autonomy and community inclusion; and reforms require serious examination of their effects. More specific questions (such as the precise amount of a benefit, a particular asset threshold or the full range of publicly funded services) remain sensitive to the applicable treaty, the evidence, the national system and the forum's approach.

The emerging convergence is nevertheless substantial. CRPD interpretation, Human Rights Council resolutions and much regional jurisprudence increasingly connect social security with the material

¹⁷⁷ CRPD Committee, Viet Nam (2025), *supra* note 25, para. 56(a)–(b); CRPD Committee, Kenya (2015), *supra* note 25, para. 50; CRPD Committee, concluding observations on Slovakia (2016), para. 76 (Article 28 extract in IDA compilation, p. 48).

conditions for exercising rights. Ultimately, a system should therefore be judged by whether people can live with dignity, make choices and participate in their communities, rather than whether or not a payment or programme exists on paper.