Report

on the **Implementation of the Convention on the Rights of Persons With Disabilities in Portugal**

of the **National Mechanism for Monitoring the Implementation of the Convention on the Rights of Persons with Disabilities (2017–2026)**

MeCDPD
Mecanismo Nacional
de Monitorização da Implementação da Convenção sobre os **Direitos das Pessoas com Deficiência**

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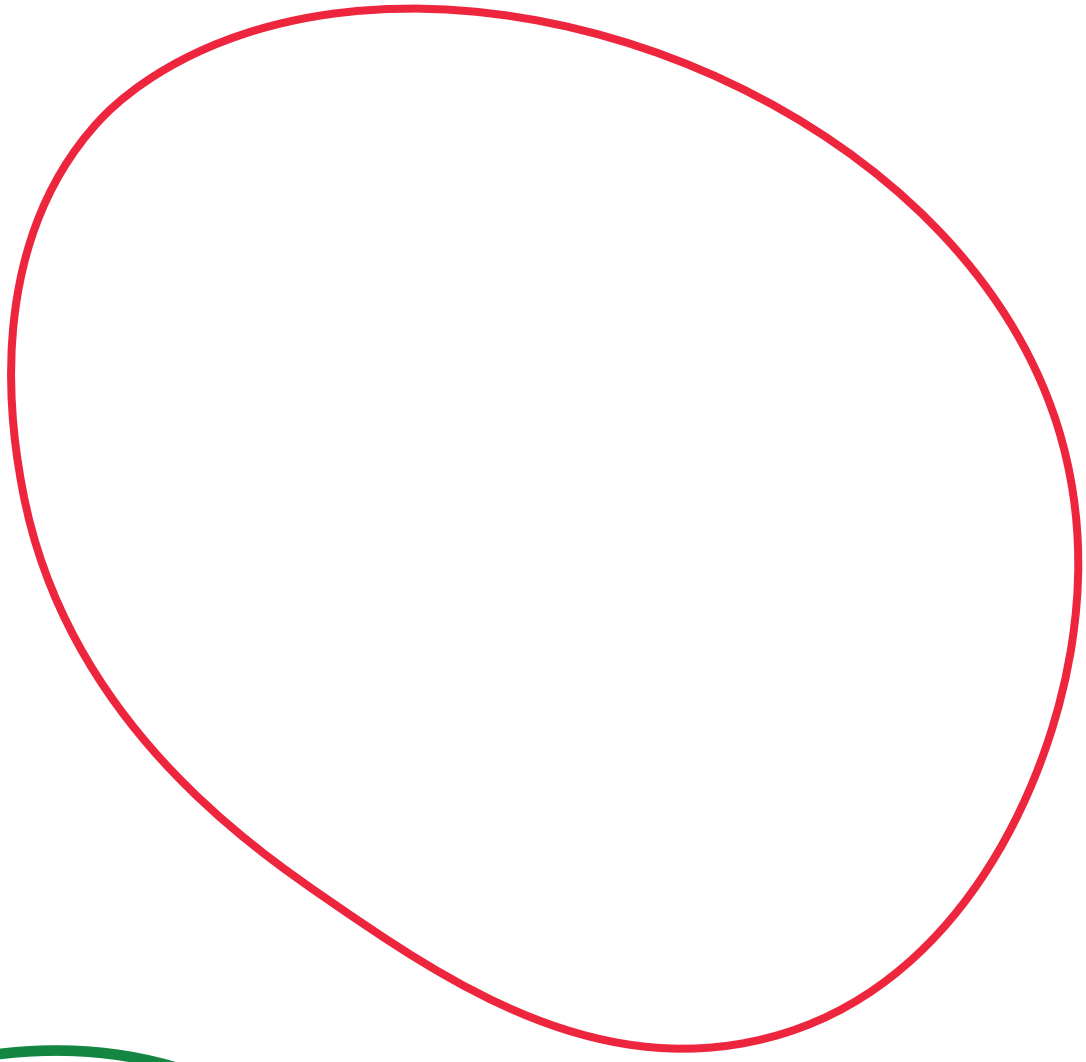
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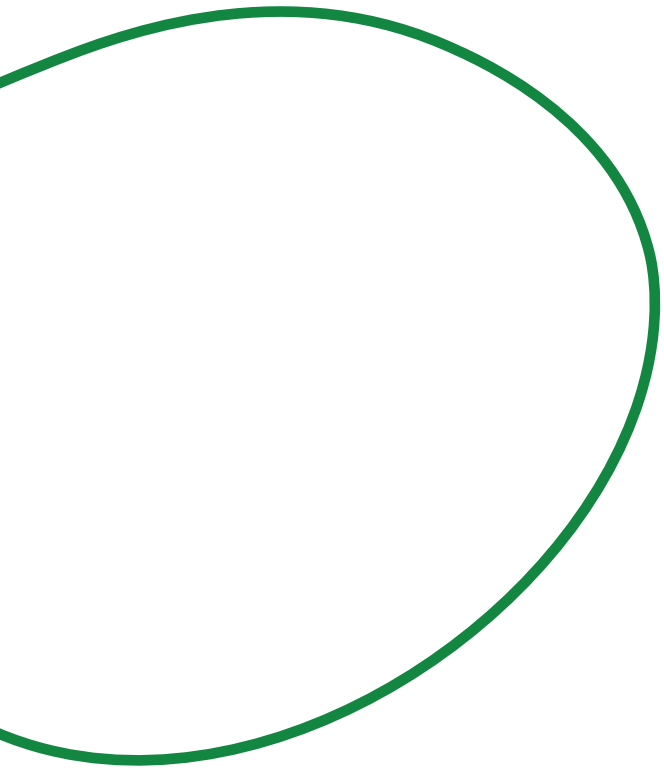
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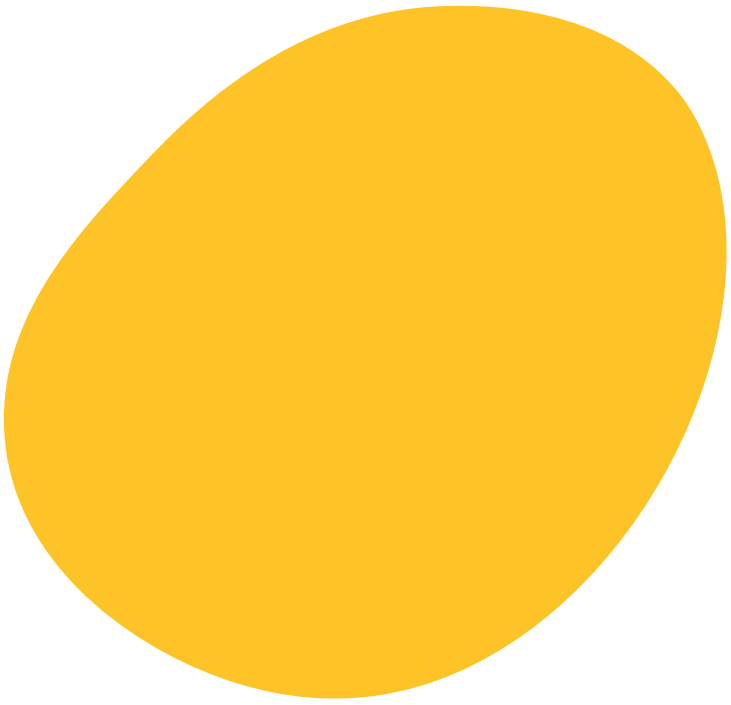
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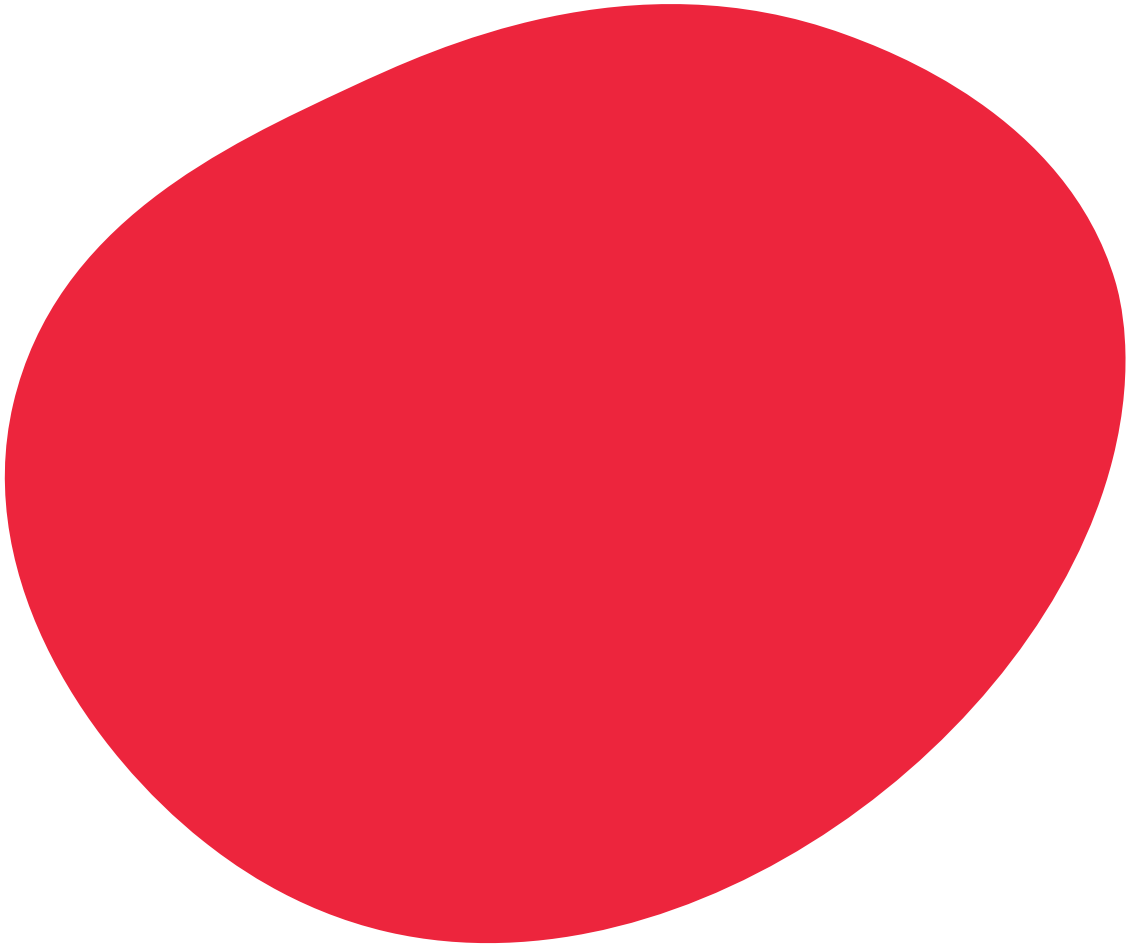
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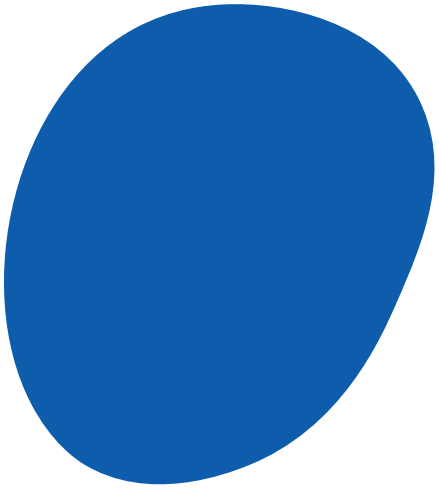
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Abbreviations and acronyms

ACAPO	Association of the Blind and Visually Impaired of Portugal
ACT	Authority for Working Conditions
APD	Portuguese Association of Disabled Persons
BE	Bloco de Esquerda - Political Party
CACDLG	Committee on Constitutional Affairs Rights Freedoms and Guarantees
CACI	Centres for Activities and Training for Inclusion
CAO	Occupational Activity Centres
CATL	Leisure Activity Centres
CAVI	Independent Living Support Centres
CDS-PP	Centro Democrático e Social – Political Party
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CFR	Charter of Fundamental Rights of the European Union
CH	Chega - Political Party
CIG	Commission for Citizenship and Gender Equality
CPA	Commission for the Promotion of Accessibility
CRC	Convention on the Rights of the Child
CRP	Constitution of the Portuguese Republic
CRPD	Convention on the Rights of Persons with Disabilities
EDPD	National Strategy for the Rights of Persons with Disabilities
EMPA	Mission Structure for the Promotion of Accessibility
ENEC	National Strategy for Citizenship Education
ENIND	National Strategy for Equality and Non-Discrimination
ENIPD	National Strategy for the Inclusion of Persons with Disabilities
EU	European Union
FAPPC	Portuguese Federation of Associations for Cerebral Palsy
FENACERCI	National Federation of Social Solidarity Cooperatives
FPAS	Portuguese Federation of Associations for the Deaf
FRA	European Union Agency for Fundamental Rights
GNR	National Republican Guard
GREVIO	Group of Experts on Action against Violence against Women and Domestic Violence
IAS	Social Support Index
ICCPR	International Covenant on Civil and Political Rights
ICESCR	International Covenant on Economic, Social and Cultural Rights
ICT	Information and Communication Technologies
IDiPD, I.P.	Institute for the Rights of Persons with Disabilities, Public Institute
IEFP, I.P.	Institute for Employment and Vocational Training, Public Institute

INR, I.P.	National Institute for Rehabilitation, Public Institute
IPPS-ISCTE	Institute for Public and Social Policy
IPSS	Private Social Solidarity Institution
JMAI	Disability Assessment Medical Boards
L	LIVRE - Political Party
LGP	Portuguese Sign Language
MAVI	Independent Living Support Model
Me-CDPD	National Mechanism for Monitoring the Implementation of the Convention on the Rights of Persons with Disabilities
No.	Number
ODDH	Disability and Human Rights Observatory
OE	State Budget
ONU	United Nations
OPDs	Organization of Persons with Disabilities
PAN	Partido Animais e Natureza - Political Party
para.	Paragraph
PAVMVD	Action Plan for the Prevention and Combating of Violence Against Women and Domestic Violence
PCP	Partido Comunista Português - Political Party
PRR	Recovery and Resilience Plan(s)
PS	Partido Socialista - Political Party
PSD	Partido Social Democrata - Political Party
PSI	Social Inclusion Benefit
PSP	Public Security Police
RAI	Homes for Empowerment and Inclusion
RASI	Annual Internal Security Report
RNAVVD	National Support Network for Victims of Domestic Violence
SA	Strategic Axis
SAPA	Support Products Allocation System
SAVI	Independent Living Support Service
SB	State Budget
SDGs	Sustainable Development Goals
SEASI	Secretariat of State for Social Action and Inclusion
SECAI	Seal of Accessible and Inclusive Cultural Spaces
SIPI	Inclusion Policy Indicator System
UDHR	Universal Declaration of Human Rights
UNESCO	United Nations Educational, Scientific and Cultural Organization
VMVD	Violence against Women and Domestic Violence
WHO	World Health Organization

Relevant legislative instruments

Convention on the Rights of Persons with Disabilities (UN), 13 December 2006, opened for signature on 30 March 2007.

Resolution of the Assembly of the Republic No. 56/2009, of 30 July 2009, approves the Convention on the Rights of Persons with Disabilities, adopted in New York on 30 March 2007.

Decree of the President of the Republic No. 71/2009, of 30 July 2009, ratifies the Convention on the Rights of Persons with Disabilities, adopted in New York on 30 March 2007.

Notice No. 114/2009 of the Ministry of Foreign Affairs, of 29 October 2009, announcing that the Portuguese Republic deposited with the Secretary-General of the United Nations, on 23 September 2009, its instrument of ratification of the Convention on the Rights of Persons with Disabilities, adopted in New York, on 30 March 2007.

Optional Protocol to the Convention on the Rights of Persons with Disabilities, adopted in New York on 30 March 2007.

Resolution No. 57/2009, of 30 July 2009, approves the Optional Protocol to the Convention on the Rights of Persons with Disabilities, adopted in New York on 30 March 2007.

General Comment No. 1, of 11 April 2014, on equal recognition before the law (Article 12 of the CRPD).

General Comment No. 2, of 11 April 2014, on accessibility (Article 9 of the CRPD).

Council of Ministers Resolution No. 68/2014, of 21 November 2014, designating the national focal points and the national coordination mechanism and establishing the national mechanism for monitoring the implementation of the Convention on the Rights of Persons with Disabilities.

General Comment No. 3, of 26 August 2016, on women and girls with disabilities (Article 6 of the CRPD).

General Comment No. 4, of 26 August 2016, on the right to inclusive education (Article 24 of the CRPD).

General Comment No. 5, of 31 August 2017, on independent living and the right to live in the community (Article 19 of the CRPD).

General Comment No. 6, of 9 March 2018, on equality and non-discrimination (Article 5 of the CRPD).

General Comment No. 7, of 21 September 2018, on the participation of persons with disabilities, including children with disabilities, through their representative organizations, in the implementation and monitoring of the Convention (Article 4(3) and Article 33(3) of the CRPD).

Law No. 71/2019, of 2 September, establishing the National Mechanism for Monitoring the Implementation of the Convention on the Rights of Persons with Disabilities.

General Comment No. 8, of 9 September 2022, on the right of persons with disabilities to work and employment (Article 27 of the CRPD).

Documents issued by the Me-CDPD (2017–3/2026)

Year	Type	No.	Title/Theme
2017	Recommendation	1/Me-CDPD/R/2017	Recognition of Portuguese Sign Language (LGP) as a language in its own right
2017	Opinion	1/Me-CDPD/P/2017	Social Inclusion Benefit (PSI)
2017	Opinion	2/Me-CDPD/P/2017	Model for Support for Independent Living (MAVI) for Portugal – Personal Assistance – Pilot Projects for the period 2017–2020
2017	Opinion	3/Me-CDPD/P/2017	Proposal to amend the legal framework for inclusive education
2017	Opinion	4/Me-CDPD/P/2017	Draft amendments – Extends parental protection to parents of children with disabilities or a rare disease
2017	Opinion	5/Me-CDPD/P/2017	Draft amendment to the Labour Code – Parental leave in the event of the birth of a child with a disability or rare disease within 60 days
2017	Opinion	6/Me-CDPD/P/2017	Draft Law establishing the Supported Adult Scheme, replacing the former institutions of legal incapacity and disqualification
2018	Opinion	1/Me-CDPD/P/2018	Draft Law establishing the Supported Adult Regime, replacing the former institutions of interdiction and incapacitation
2018	Opinion	2/Me-CDPD/P/2018	Draft Ministerial Order approving the Regulations for the National Competition for Access and Entry into Public Higher Education for the 2018/2019 academic year
2018	Opinion	3/Me-CDPD/2018	Draft Law No. 861/XIII/3 - Establishes the obligation to employ 2% of workers with functional diversity
2018	Opinion	4/Me-CDPD/2018	Draft Law No. 860/XIII/3 - Special programme for the recruitment of Persons with disabilities into the civil service

2018	Follow-up	1/Me-CDPD/2018	Decree-Law No. 129/2017: Model Programme for Support for Independent Living (MAVI)
2018	Follow-up	2/Me-CDPD/2018	Law No. 49/2018 of 14 August establishes the Legal Framework for Supported Living
2018	Follow-up	3/Me-CDPD/2018	Decree-Law No. 54/2018 partially complies with Article 24 of the CRPD
2018	Follow-up	4/Me-CRPD/2018	Decree-Law No. 126-A/2017 of 6 October establishes the Social Inclusion Benefit (PSI)
2019	Opinion	1/Me-CDPD/2019	Ordinance on the Legal Framework for Building Accessibility
2019	Opinion	2/Me-CDPD/2019	Draft Law No. 830/XIII – Legal Framework for the National Mechanism for Monitoring the Implementation of the CRPD
2019	Recommendation	1/Me-CDPD/2019	To the National Electoral Commission – Exercise of the right to vote by voters with disabilities
2020	Opinion	(with the Observatory on Disability and Human Rights)	National Strategy for the Inclusion of Persons with disabilities (ENIPD) 2020–2025
2020	Opinion	1/Me-CDPD/2020	Draft Law 165/XIV/1st, which aims to ensure equal treatment in the enjoyment of retirement benefits for Persons with disabilities
2021	Opinion	1/Me-CDPD/2021	Draft Law No. 83/XIV/1 – Approves the Electronic Communications Law and transposes Directive 2018/1972, which establishes the European Electronic Communications Code
2021	Recommendation	1/Me-CDPD/2021	Draft Additional Protocol to the Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine – involuntary admission and treatment of persons with mental illness
2021	Recommendation	2/Me-CDPD/2021	Legal Status of Portuguese Sign Language (LGP) and the linguistic rights of deaf people
2021	Recommendation	3/Me-CDPD/2021	Revision of Law No. 36/98 of 24 July (Mental Health Act)

2022	Opinion	1/Me-CDPD/2022	Draft Law No. 6/XV – Approves the Electronic Communications Law and transposes Directive 2018/1972, the European Electronic Communications Code
2022	Letter	1/Me-CDPD/2022	Response to the humanitarian emergency resulting from the invasion of Ukraine
2022	Recommendation	1/Me-CDPD/2022	Law No. 5/2022, concerning the scheme for early retirement due to disability – Compatibility of the legislative solution with the principles of the CRPD
2022	Recommendation	2/Me-CDPD/2022	Ratification of the European Charter for Regional or Minority Languages by the Portuguese State: the case of Portuguese Sign Language (LGP)
2022	Recommendation	3/Me-CDPD/2022	Draft Law No. 24/XV/1, Mental Health Act
2022	Official Letter	5 December 2022	Secretary-General of the Assembly of the Republic: acquisition of legal personality by the Me-CDPD – Handling of matters relating to the organisation and operation of the Me-CDPD
2023	Opinion	4/Me-CDPD/2023	Proposed regulation establishing the conditions for the creation, establishment, organisation and operation to be followed by the MAVI social response
2023	Recommendation	1/Me-CDPD/2023	Constitutional review regarding the Rights of Persons with Disabilities and Portuguese Sign Language
2023	Recommendation	2/Me-CDPD/2023	Draft Mental Health Act No. 24/XV/1st
2024	Opinion	1/Me-CDPD/2024	Draft Law No. 816/XV/1, to amend the Statute of Informal Carers
2024	Opinion	2/Me-CDPD/2024	Draft Law No. 32/XVI/1, to ensure the implementation in national law of Regulation (EU) No. 2022/2065 on a single market for digital services and amending Directive 2000/31/EC

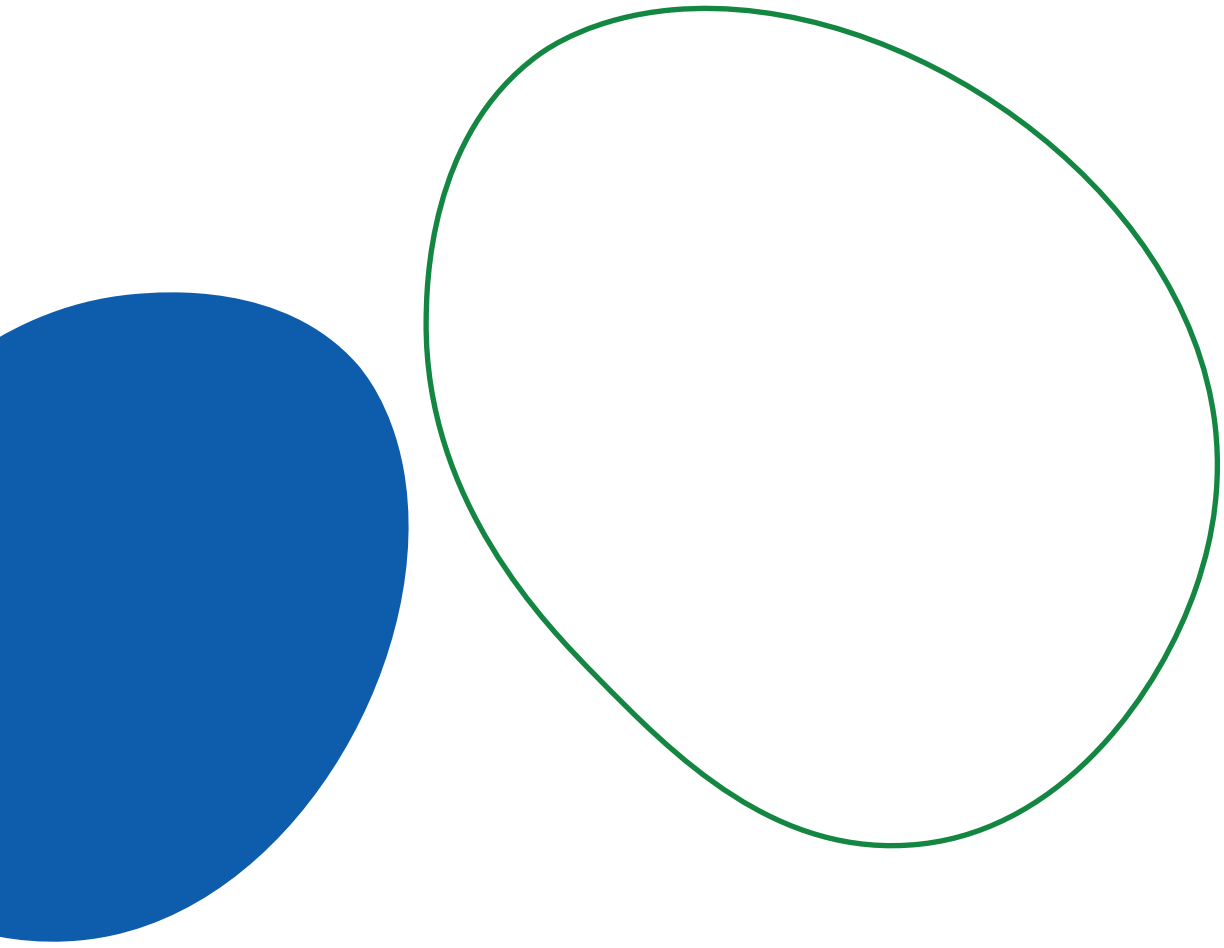
2024	Recommendation	1/Me-CDPD/2024	Decree-Law No. 86/2024 of 6 November, approving the Statute of the Informal Carer. And Regulatory Decree No. 5/2024 of 6 November, establishing the terms and conditions for the recognition of the status of informal carers, as well as support measures for informal carers and those receiving care
2024	Contribution	1/Me-CDPD/2024	Annual report of the EU Agency for Fundamental Rights (FRA) for the year 2024, dedicated to political participation and equality in electoral processes, focusing on issues such as diversity and inclusion, violence and intimidation, and disinformation (including online).
2024	Report	2024 Activity Report	"Structural fragility" of the Me-CDPD – Administrative and financial challenges seriously compromise the Me-CDPD's operational capacity
2025	Opinion	1/Me-CDPD/2025	Proposed amendment to Decree-Law No. 93/2009 of 16 April, establishing the system for the allocation of support products to Persons with disabilities and persons with temporary incapacity (submitted by the Secretary of State for Social Action and Inclusion – SEASI)
2025	Opinion	2/Me-CDPD/2025	Draft Law No. 365/XVI/1st (PCP) – 'Establishes the Programme for the Removal of Obstacles and Hazards on Roadways'.
2025	Opinion	3/Me-CDPD/2025	Bill No. 93/XVI/1 (Livre or "L"), which seeks to amend Law No. 64/2014 of 26 August, extending the scheme for subsidised housing loans to members of the household living with a person with a disability.

2025	Opinion	4/Me-CDPD/2025	Proposed Ministerial Order which "Establishes the dematerialisation of medical board procedures for the assessment of disability, approves the list of conditions for which a multi-purpose medical certificate of disability may be issued, with exemption from the medical board assessment of disability, and sets out new provisions relating to medical boards for the assessment of disability".
2025	Opinion	5/Me-CDPD/2025	Proposed Amendment to Ordinance No. 70/2021 of 26 March, regulating the general conditions for the construction and operation of Centres for Activities and Training for Inclusion ("CACI")
2025	Opinion	6/Me-CDPD/2025	Draft Law No. 290/XVII/1st (PCP) – Extends the conditions of access for Persons with disabilities to the Social Benefit for Inclusion and amends the point from which this benefit is payable to beneficiaries (5th amendment to Decree-Law No. 126-A/2017 of 6 October)
2025	Opinion	7/Me-CDPD/2025	Draft Law No. 291/XVII/1st (PCP) – Improves the scheme for bringing forward the age of entitlement to an old-age disability pension (1st Amendment to Law No. 5/2022 of 7 January)
2025	Opinion	8/Me-CDPD/2025	Draft Law 313/XVII/1 (Partido Socialista) – Clarifies the criminalisation of forced sterilisation, particularly of Persons with disabilities, and implements measures to guarantee the reproductive Rights of Persons with Disabilities or reduced capacity, establishing the National Family Planning Scheme for Persons with disabilities or in Situations of Incapacity and the Mechanism for Monitoring Sterilisation Procedures
2025	Opinion	9/Me-CDPD/2025	Strategy for the Rights of Persons with Disabilities 2026–2030 (EDPD 2026–2030)

2025	Recommendation	1/Me-CDPD/2025	Recommendation of the National Mechanism for Monitoring the Implementation of the Convention on the Rights of Persons with Disabilities
2025	Recommendation	2/Me-CDPD/2025	Recommendation by Me-CDPD on the Criminalisation of Forced Sterilisation in Portugal
2025	Recommendation	3/Me-CDPD/2025	Recommendation of the National Mechanism for Monitoring the Implementation of the Convention on the Rights of Persons with Disabilities regarding the right to accessible voting in all electoral processes in Portugal. NOTE: This was erroneously published as Recommendation No. 2.
2025	Recommendation	4/Me-CDPD/2025	Recommendation of the National Mechanism for Monitoring the Implementation of the Convention on the Rights of Persons with Disabilities on the National Strategy for Education 2026
2025	Recommendation	5/Me-CDPD/2025	Recommendation of the Me-CDPD on the inclusion of the labour Rights of Persons with Disabilities within the framework of the Labour Law Reform (draft bill – July 2025)
2025	Recommendation	6/Me-CDPD/2025	Me-CDPD Recommendation on the Rights of Persons with Disabilities in the State Budget (OE) 2026: Contributions to an inclusive policy
2025	Recommendation	7/Me-CDPD/2025	Compatibility with the CRPD of the reference to the possible application of a means-test condition for access to SAVI
2025	Recommendation	8/Me-CDPD/2025	Analysis of the differentiation introduced in support for carers of children with disabilities, chronic illnesses or cancer within the framework of the State Budget (OE) for 2026
2025	Contribution	1/Me-CDPD/2025	Contributions to the review of the National Strategy for the Inclusion of Persons with disabilities 2021–2025 (ENIPD 2021–2025)
2025	Contribution	2/Me-CDPD/2025	Strategy for Promoting the Employability of Persons with disabilities in Portugal | Action Plan

2025	Contribution	3/Me-CDPD/2025	Contribution from Me-CDPD to the UN Special Rapporteur on the rights of persons with disabilities, regarding Article 29 of the CRPD
2025	Contribution	4/Me-CDPD/2025	Contributions from the National Monitoring Mechanism for the Convention on the Rights of Persons with Disabilities, under Recommendation No. 6/2025 – "Rights of Persons with Disabilities in the 2026 State Budget: Contributions towards an inclusive policy".
2026	Opinion	1/Me-CDPD/2026	Analysis of Draft Law No. 309/XVII (PS), Extraordinary procedure for resolving outstanding cases of medical boards for the assessment of disability
2026	Opinion	2/Me-CDPD/2026	Analysis of Draft Law No. 329/XVII/1st (BE), which aims to criminalise the forced sterilisation of Persons with disabilities and strengthen the protection of their sexual and reproductive rights.
2026	Opinion	3/Me-CDPD/2026	Analysis of Draft Law No. 327/XVII/1st (PAN), which criminalises the sterilisation of Persons with disabilities and/or those who are incapacitated and regulates the conditions for performing irreversible sterilisation, amending Law No. 3/84 of March, the Penal Code and the Civil Code
2026	Opinion	4/Me-CDPD/2026	Technical notes supporting the analysis of legislative initiatives on the criminalisation of forced sterilisation of persons with disabilities in Portugal
2026	Opinion	5/Me-CDPD/2026	Draft Law No. 312/XVII (PS), establishing the Legal Framework for Students with Special Educational Needs in Higher Education
2026	Opinion	6/Me-CDPD/2026	Draft Law No. 31/XVII/1st (CH) on the Promotion of the Inclusion of Young People with Special Educational Needs in Higher Education

2026	Recommendation	1/Me-CDPD/2026	Implementation of the European Plan for Affordable Housing with a focus on accessibility and inclusion for Persons with disabilities in Portugal
2026	Recommendation	2/Me-CDPD/2026	Equal Participation of Persons with disabilities in Political and Public Life Convergence between the United Nations Special Rapporteur and the Me-CDPD National Contribution
2026	Contribution	1/Me-CDPD/2026	Contribution as part of the public consultation – Strengthening the European Strategy on the Rights of Persons with Disabilities 2021–2030
2026	Proposal	1/Me-CDPD/2026	Assessment of legislation concerning access to justice for Persons with disabilities



Opening statement

The Convention on the Rights of Persons with Disabilities (CRPD) represents a historic milestone in the affirmation of the rights of persons with disabilities, marking a paradigm shift that moves the focus away from disability as an individual condition towards an approach based on human rights, equality, participation and full inclusion in society.

Since its entry into force in Portugal in 2009, the CRPD has served as a fundamental legal and political framework for the development of public policies aimed at promoting the dignity, autonomy and equal opportunities of persons with disabilities. Its ratification bound the Portuguese State to adopt legislative, administrative and programmatic measures designed to ensure the effective implementation of the rights enshrined therein. Under Article 33 of the CRPD, States Parties must establish institutional structures to ensure the implementation and monitoring of the Convention at national level, clearly distinguishing the functions of public policy implementation from those of promotion, protection and independent monitoring of rights. It is within this framework that the National Mechanism for Monitoring the Implementation of the Convention on the Rights of Persons with Disabilities (Me-CDPD) operates, whose mission is to independently monitor the application of the Convention in Portugal, contributing to the scrutiny of public policies and to the strengthening of regulatory compliance with international human rights standards.

In carrying out this mission, the Me-CDPD has sought to promote systematic and informed monitoring of the implementation of the CRPD through the issuance of opinions, recommendations and technical contributions, participation in legislative and public policy processes, and institutional dialogue with public bodies, academia, civil society and, in particular, with organisations representing persons with disabilities, whose participation constitutes a fundamental principle of the Convention.

This report reflects that commitment. Prepared on the initiative of the Me-CDPD, it provides an analysis of progress in the implementation of the CRPD in Portugal and systematises the work carried out by this Mechanism within the scope of its mandate.

Covering the period from 2017 to March 2026, it identifies progress, persistent challenges and priority areas for action in the field of the Rights of Persons with Disabilities. At the same time, it constitutes an exercise in institutional transparency and reflection on the state of implementation of the Convention in Portugal.

Through this report, the Me-CDPD also seeks to contribute to the international monitoring dialogue, including through its submission to the United Nations Committee on the Rights of Persons with disabilities, the body responsible for overseeing the implementation of the CRPD by States Parties. It provides a structured analysis of the national context, the developments that have taken place and the challenges that remain in ensuring the Rights of Persons with Disabilities in Portugal.

Despite notable progress in several areas, the analysis highlights the persistence of structural barriers to the full implementation of the rights enshrined in the Convention. Barriers remain in access to inclusive education, employment, political and public participation, justice, accessibility, independent living and adequate living conditions. Addressing these barriers requires coherent public policies, adequate funding, systematic data collection, effective monitoring mechanisms and the active participation of persons with disabilities and their representative

organisations in defining, implementing and evaluating the measures that concern them.

The CRPD constitutes a legally binding commitment that requires a structural transformation of public policies, institutions and social practices. Its effective implementation must result in concrete changes in the lives of persons with disabilities and in the removal of the barriers that continue to limit their full participation in society.

At a time when a new strategic cycle of public policies in this area is beginning, notably with the preparation of the Strategy for the Rights of Persons with Disabilities 2026–2030, it is particularly important to strengthen the alignment of national policies with the principles and obligations arising from the CRPD.

The Me-CDPD hopes that this report will contribute to an informed and constructive debate on the Rights of Persons with Disabilities in Portugal, serving as a tool for reflection for policy-makers, public institutions, civil society organisations, the academic community and all those committed to building a fairer, more inclusive and accessible society. The CRPD provides the normative framework for this path; it is for institutions and society to ensure that this commitment becomes a reality.

The implementation of the CRPD is ultimately measured by tangible improvements in the living conditions and quality of life of Persons with disabilities. Ensuring real choices, full participation and inclusion in the community is the true measure of the effectiveness of human rights.



Vera Bonvalot, President of the Me-CDPD

Lisbon, March 2026

Executive summary

This report contributes to the monitoring of the implementation of the Convention on the Rights of Persons with Disabilities (hereinafter "CRPD") in Portugal. It was prepared on the initiative of the National Mechanism for Monitoring the Implementation of the Convention (hereinafter "Me-CDPD").

The report provides a clear and concise overview of the work carried out by the Me-CDPD within its mandate between 2017 and 15 March 2026, the date on which elections were held for a new term of office[1] (2026–2031).

The analysis is based on two complementary perspectives: (i) the activities of the Me-CDPD between 2017 and 2026; and (ii) the development of CRPD implementation in Portugal, based on selected thematic areas (Figure 1).

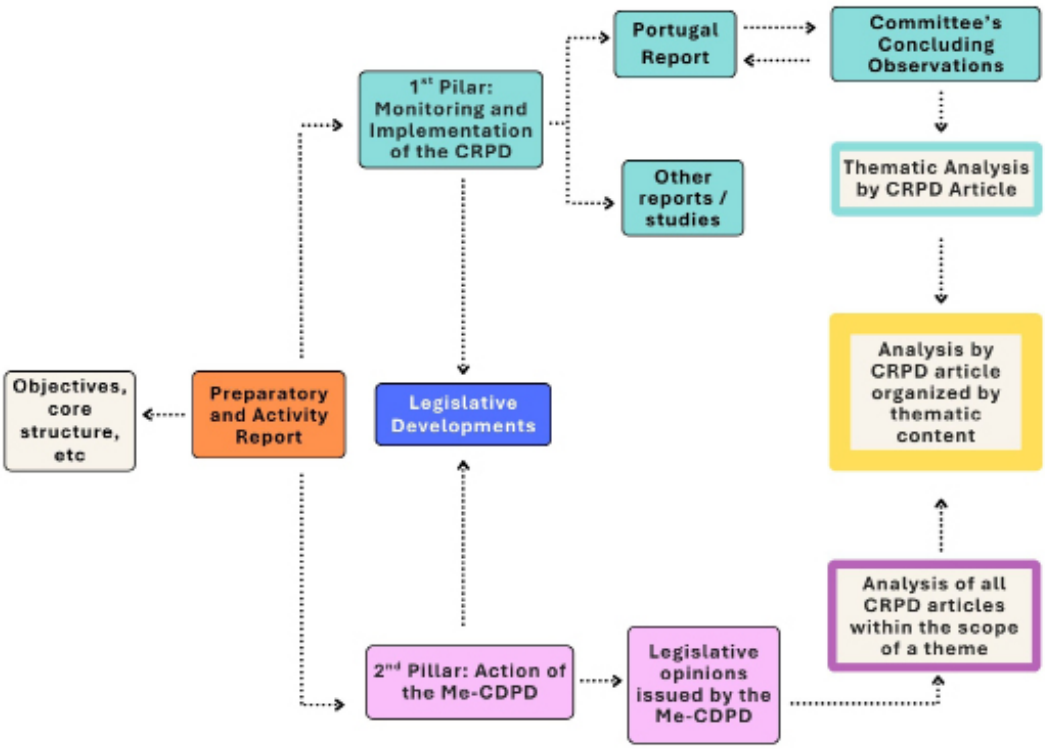


Figure 1 – Report Analysis Model

The methodology is based primarily on documentary analysis, including recommendations, opinions, technical contributions, parliamentary hearings, national and European strategies, and monitoring reports produced by other bodies, including the Observatory on Disability and Human Rights (ODDH) and the Ombudsman.

[1] However, it should be noted that this report includes contributions and updates the information up to 3 March 2026. No new information has been included since that date.

This report aims to provide a comprehensive overview of the legal, social, institutional and policy dimensions involved in the implementation of the CRPD in Portugal. The Me-CDPD acknowledges certain methodological limitations, in particular the absence of an empirical component and the fact that the report does not provide an exhaustive analysis of all public and private measures in the field of disability.

As mentioned previously, based on the dual guiding perspective of the analysis, certain articles of the CRPD were selected to be the subject of an independent analysis. The selection of articles does not imply any hierarchy of rights, but rather aims to provide a focused analysis of progress in the implementation of the CRPD and of the activities of the Me-CDPD in Portugal. The report is intended to serve as a basis for future updates, enabling a more comprehensive and systematic coverage of all CRPD articles over time.

The independent analysis of the selected articles is structured around three components:

i) **General framework:** contextualisation of the right enshrined in the relevant article of the CRPD and the applicable international, European and national legal framework;

ii) **Observations, recommendations and developments**: analysis of progress in public policies in Portugal, based on the 2016 Concluding Observations of the Committee and on national policy instruments, in particular the National Strategy for the Inclusion of Persons with Disabilities (hereinafter "ENIPD") 2021–2025;

iii) **Specific topics:** in selected articles, in-depth analysis of areas in which the Me-CDPD has been particularly active, including its opinions and recommendations.

In addition, several cross-cutting aspects are highlighted.

Firstly, regarding the periodic report on the implementation of the CRPD, it should be noted that, since the ratification of the CRPD, Portugal has submitted only its initial report to the Committee, which gave rise to the Committee's 2016 Concluding Observations. The submission of subsequent periodic reports was repeatedly postponed, at the request of the Portuguese State itself, with the Committee's approval, which has limited the existence of regular cycles of international monitoring and scrutiny.

A second relevant aspect relates to the fact that this report has been drawn up whilst a reform of the Public Administration is underway, which has entailed a high volume of legislative activity aimed at restructuring various bodies, entities and/or structures. Of particular note in this context is the publication of Decree-Law No. 60/2026 of 24 February, which restructures the National Institute for Rehabilitation, I.P. ("INR, I.P.") and establishes the Institute for the Rights of Persons with Disabilities, I.P. ("IDiPD, I.P."). This change to the Institute's structure and its very designation as the "entity responsible for implementing public policies aimed at Persons with disabilities" aims to "strengthen

its institutional effectiveness" and "rationalise its operational instruments, integrating the powers of the Mission Structure for the Promotion of Accessibility" (Decree-Law No.60/2026, of 24 February 2026, preamble). That said, and considering that under the terms of Article 2 of the aforementioned Decree-Law No. 60/2026 of 24 February, all references to "INR, I.P." in laws and regulations, acts, contracts and other normative instruments are deemed to refer to IDiPD, I.P.; the Me-CDPD has therefore chosen to use the current designation in this report.

The IDiPD, I.P. is a public body within the State's indirect administration, endowed with administrative autonomy, to which powers are assigned for the coordination, implementation and monitoring of policies in the areas of inclusion, participation, data collection, the promotion of equality and accessibility, and which also incorporates the structure previously dedicated to the promotion of accessibility. The legislation also provides for the creation of an Advisory Council for the Rights of Persons with Disabilities, with functions relating to monitoring and the participation of relevant bodies, including representative organizations.

From a legal and institutional perspective, it is important to emphasise that, under Article 33 of the CRPD, the implementation and monitoring of the Convention must be based on a structure that clearly distinguishes between implementation functions and independent monitoring. In this context, the IDiPD, I. P., as the public body responsible for the implementation and coordination of policies, should not be confused with the Me-CDPD, which is responsible for the independent function of promoting, protecting and monitoring the implementation of the Convention. **The functional and institutional distinction between these bodies is essential to ensure compliance with the Paris Principles, particularly with regard to independence, autonomy and the capacity for external monitoring.**

It is expected that the new institutional framework may contribute to greater coherence and integration of public policies, including in the field of accessibility, but its effectiveness will depend on the clarity of the delineation of competences, the existence of mechanisms for coordination with the independent monitoring system, and the guarantee of meaningful participation of Persons with disabilities and their representative organisations, in accordance with the CRPD.

A third aspect relates to the ENIPD 2021–2025. Following the entry into force of Ministerial Order No. 467/2025/1 of 23 December, at the time of drafting and publication of this report, the ENIPD 2021–2025 remained in force. Pursuant to Article 2(1) of the aforementioned Ordinance, the ENIPD 2021–2025 "shall remain in force after the expiry of the relevant period, until the entry into force of the EDPD 2026–2030, to be approved by resolution of the Council of Ministers by the end of the first quarter of 2026"

(Ordinance No. 467/2025/1 of 23 December 2025, Article 2(1)). According to para. 2 of that article, this extension covers "all strategic objectives, priorities, measures, planning instruments, mechanisms for interministerial coordination, monitoring, evaluation and reporting" (Ordinance No. 467/2025/1, of 23 December 2025, Article 2, no. 2).

Article 3 stipulates that the public bodies responsible for implementing the measures set out in the ENIPD 2021–2025 "shall ensure the continuity of their implementation during the extension period", with ongoing actions to remain integrated into their respective activity plans, strategic planning instruments and budgets (Ordinance No. 467/2025/1, of 23 December 2025, Article 3, nos. 1 and 2).

It should also be noted that throughout this extension, the powers of IDiPD, I.P. (formerly known as "INR, I.P.") regarding the coordination, supervision, monitoring and evaluation of ENIPD 2021–2025 remain unchanged (Ordinance No.467/2025/1 of 23 December 2025, Article 4).

For this reason, **this report has analysed only the ENIPD 2021–2025 and the respective implementation reports that have been published, the latest of which covers measures implemented up to 31 December 2024, and the measures of the EDPD 2026–2030 and its action plan** (which, as of the date of publication of this report, had not been formally published) have not been included.

In this context, it should be noted that the Me-CDPD contacted the IDiPD, I.P. to confirm whether there was a more recent implementation report on the measures of the ENIPD 2021–2025, in particular regarding measures implemented up to 31 December 2025. In response to this request, IDiPD, I.P. replied on 18 February 2026, stating that to date there was "no additional information beyond that already contained in the 2024 Report", approved in October 2025.

In view of the above, IDiPD, I.P. added that, given the current reform process underway in the Public Administration, "there has been increased difficulty in communicating with partner entities, and IDiPD, I.P. is currently consolidating updated information on the implementation of measures, monitoring indicators and results achieved." In this regard, IDiPD, I. P. has requested that entities with measures assigned to them under the ENIPD 2021–2025 inform it of the expected completion of these measures by the end of the first quarter of 2026, giving them until 9 March to submit this information.

In this context, IDiPD, I.P. informs that the implementation report for 2025 "will only be [available] once the new Strategy comes into force, thereby ensuring the consistency and integrity of the analysis."

Finally, the last point concerns the EDPD 2026–2030 and its Action Plan. As with the request for information sent to IDiPD, I.P. regarding the implementation reports for ENIPD 2021–2025, Me-CDPD sent a request for information regarding the process of drafting the new Strategy for the Rights of Persons with Disabilities (EDPD 2026–2030). On 3 March 2026, IDiPD, I.P. formally responded to the request, stating that "the preparation of the

new Strategy was based on a structured, participatory and collaborative process, which included formal mechanisms for consulting and involving Persons with disabilities and their representative organisations, as well as the greatest possible number of public administration services and bodies." (Communication from IDiPD, I.P. sent to the Me-CDPD regarding the request for information – on the drafting of the new Strategy for the Rights of Persons with Disabilities 2026–2030, 2026, para. 2). In particular, IDiPD, I.P. reported that the following were organised: (i) public hearings, which enabled the incorporation of proposals from various sources, ranging from public bodies to civil society organisations, academic institutions and individual citizens, and which were organised by key areas (Territories, Citizenship, Education, Employment and Training, and Health); (ii) Interministerial sectoral meetings, which enabled to ensure technical coordination between the different government departments responsible for implementing the ENIPD; (iii) Focus groups with Non-Governmental Organizations of Persons with Disabilities (ONGPD), hereinafter referred to, where appropriate, as organizations of persons with disabiliteis, at national, regional and local levels, where strategic priorities, critical success factors and concrete proposals for action were discussed; and (iv) A meeting of self-advocates, which promoted the direct participation of Persons with disabilities in defining the strategic guidelines.

As described by IDiPD, I.P., this process enabled the collection of "qualified and diverse" contributions, ensuring that the Strategy reflects the needs identified by persons with disabilities and the organisations representing them (NGOs for persons with disabilities) "in line with the principles of active participation enshrined in the United Nations (hereinafter 'UN'), namely through the Convention on the Rights of Persons with Disabilities." (Communication from IDiPD, I.P. sent to the Ministry of Social Affairs and the Rights of Persons with Disabilities regarding the request for information – drafting of the new Strategy for the Rights of Persons with Disabilities 2026–2030, 2026, para. 5).

Furthermore, a "governance" model has been defined to ensure the participation of Persons with disabilities and/or the organisations representing them in the implementation of the EDPD 2026–2030, in particular in the follow-up, monitoring and any adjustments deemed necessary to the Strategy's measures throughout its duration. In this context, according to the IDiPD, I.P.:

- "Overall coordination of the Strategy and its Action Plans is the responsibility of the Institute for the Rights of Persons with Disabilities, I.P., in conjunction with the Government member responsible for social action and inclusion;
- A Technical Monitoring Committee (CTA) has been established, chaired by the Institute for the Rights of Persons with Disabilities, I.P., which meets twice a year and includes representatives from the main government departments and relevant bodies;
- Thematic working groups are planned, to meet at least quarterly in the first year of implementation, thereby strengthening cross-sectoral coordination;
- Additional representatives may be invited whenever the nature of the topics so

warrants;

- A Strategy Advisory Council has also been established, comprising, amongst others, representatives of national-level NGOs and representatives from higher education and research centres, ensuring regular consultation with civil society and the scientific community ." (Communication from IDiPD, I.P. sent to the Me-CDPD regarding the request for information on the drafting of the new Strategy for the Rights of Persons with Disabilities 2026–2030, 2026, para. 7).

The analysis carried out in this report identifies several structural trends in the implementation of the CRPD in Portugal:

- **The persistence of approaches based on the medical model of disability** in various legal and administrative frameworks, which are inconsistent with the human rights model enshrined in the CRPD;
- **The persistence of structural barriers to access inclusive education, employment, housing, justice, health and participation in public and political life**, limiting the full and equal exercise of rights;
- **Relevant legislative developments in specific areas**, notably in the fields of mental health, independent living and equal recognition before the law, although significant challenges remain regarding their effective implementation;
- **Persistent weaknesses in the systematic collection of data on disability** and in the monitoring of public policies, undermining impact assessment, the definition of evidence-based measures and compliance with obligations under the CRPD;
- **Insufficient participation of persons with disabilities and their representative** organisations in the design, implementation and evaluation of public policies, in breach of Article 4(3) of the CRPD**;**
- **A gap between the formal recognition of rights and their effective implementation in institutional practices, public services and real-life conditions;**
- **Difficulties in translating the legal principles of the CRPD into consistent institutional practices,** accessible services and genuinely person-centred responses;
- **Insufficient institutional, operational and resource conditions for the independent monitoring mechanism,** in accordance with Article 33 of the CRPD, limiting its capacity to ensure effective, independent and continuous monitoring of the Convention's implementation;
- **The need to reinforce the centrality of the CRPD as the normative framework for the new cycle of public policies,** particularly in the context of the EDPD 2026–2030 and its Action Plan, ensuring measurability, coherence, continuity and alignment with international human rights standards.

Introduction

Human rights are defined as a set of basic, essential and universal rights that are founded on the inherent human dignity of all people. In the preamble to the CRPD, States Parties reaffirm this principle, in particular: the "universality, indivisibility, interdependence and interrelatedness of all human rights and fundamental freedoms and the need to ensure that persons with disabilities enjoy them fully without discrimination;" (Preamble, subpara. c).

The CRPD was adopted by the United Nations General Assembly on 13 December 2006 in New York. Portugal signed the Convention on 30 March 2007 and ratified it through Resolution of the Assembly of the Republic No. 56/2009 and Decree of the President of the Republic No. 71/2009. The Convention entered into force in the Portuguese legal order on 23 October 2009.

The CRPD is supplemented by the Optional Protocol, adopted on the same date. Portugal signed and ratified the Optional Protocol through Resolution of the Assembly of the Republic No. 57/2009 and Decree of the President of the Republic No. 72/2009. It entered into force for Portugal on 23 October 2009.

The ratification of these instruments legally bound the Portuguese State to the obligations arising from the CRPD and its Optional Protocol, and also entailed acceptance of the international monitoring mechanisms provided for therein, namely the individual communications procedure and the inquiry procedure conducted by the Committee on the Rights of Persons with Disabilities.

The CRPD enshrines a paradigm shift in the conceptualisation of disability. Under Article 1 of the CRPD, Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which, in interaction with various barriers, may hinder their full and effective participation in society, on an equal basis with others. This definition reflects a paradigm shift away from a strictly medical model centred on the individual, towards a human rights model in which disability is understood as the result of the interaction between the person and social, institutional and environmental barriers.

The Committee has reiterated that persons with disabilities are rights holders and subjects of law. States Parties are therefore required to remove barriers, prevent discrimination and adopt structural measures to ensure substantive equality and effective participation (General Comment No. 6 (2018)).

This approach reinforces the understanding that disability results from the interaction between individuals and barriers in the environment, rather than from inherent limitations. (United Nations, 2008, para. 11).

The objective of the CRPD is to "promote, protect and ensure the full and equal

enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity" (Article 1 of the CRPD).

In order to achieve this objective, eight guiding principles of this Convention have been established in Article 3:

a) Respect for the inherent dignity, individual autonomy, including the freedom to make one's own choices, and independence of persons;

b) Non-discrimination;

c) Full and effective participation and inclusion in society;

d) Respect for difference and acceptance of Persons with disabilities as part of human diversity and humanity;

e) Equality of opportunity;

f) Accessibility;

g) Equality between men and women;

h) Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.

One of the central concepts in the CRPD, which appears in both Article 3 and Article 4, is that of "equality and non-discrimination". Article 5 provides that States Parties: "recognise that all persons are equal before and under the law and are entitled, without any discrimination, to the equal protection and equal benefit of the law" (para. 1); and that "they shall prohibit all discrimination on the basis of disability and guarantee to persons with disabilities equal and effective legal protection against discrimination of any kind" (para. 2). Para. 3 elaborates by stating that: "in order to promote equality and eliminate discrimination, States Parties shall take all appropriate measures to ensure the provision of reasonable accommodation", and para. 4 states that "specific measures which are necessary to accelerate or achieve de facto equality for persons with disabilities shall not be considered discrimination under this Convention".

In short, it is important to bear in mind the concepts defined by the CRPD itself, in particular:

"**Discrimination on the basis of disability**" means any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field. It includes all forms of discrimination, including the denial of reasonable accommodation;

"Reasonable accommodation" means the necessary and appropriate modifications and adjustments that do not impose a disproportionate or undue

burden, where required in a particular case, to ensure that Persons with disabilities enjoy or exercise, on an equal basis with others, all human rights and fundamental freedoms;

"Universal design" means the design of products, environments, programmes and services to be used by all people, to the greatest extent possible, without the need for adaptation or specialised design. 'Universal design' shall not exclude assistive devices for particular groups of Persons with disabilities where necessary. (Article 2, para.s 3, 4 and 5).

According to Degener, the remaining articles of the CRPD apply to the context of disability "the existing catalogue of human rights from the International Bill of Human Rights" (Degener, 2017, p. 35), which consists of three instruments: the Universal Declaration of Human Rights ("UDHR"), the International Covenant on Economic, Social and Cultural Rights ("ICESCR"), and the International Covenant on Civil and Political Rights ("ICCPR").

As explained in the previous section, throughout this report attention will be given to several of these articles, in particular Article 6 **(Women with disabilities)**, Article 7 **(Children with disabilities)**, Article 9 **(Accessibility)**, Article 12 **(Equal recognition before the law)**, Article 13 **(Access to justice)**, Article 16 **(Freedom from exploitation, violence and abuse)**, Article 19 **(Living independently and being included in the community)**, Article 21 **(Freedom of expression and opinion, and access to information)**, Article 24 **(Education)**, Article 25 **(Health)**, Article 27 **(Work and Employment)**, Article 28 **(Adequate Standard of Living and Social Protection)**, Article 29 **(Participation in Political and Public Life)** and Article 33 **(National implementation and monitoring)**.

However, in order to provide context for and complement the information set out in the separate analyses that follow, the Me-CDPD considers that certain articles of the CRPD, given their cross-cutting nature, warrant brief consideration in this introduction:

Article 4 (General Obligations)

In line with the Committee's Concluding Observations on Portugal (2016), **the Me-CDPD notes that the legal criteria for assessing the support needs of persons with disabilities remain grounded in a medical model.**

This approach is not consistent with Article 1 of the CRPD, which understands disability as resulting from the interaction between the person and the social, environmental and attitudinal barriers that prevent their full and effective participation

on an equal basis with others. **The continued reliance on impairment-based criteria restricts access to social programmes, support measures and benefits, and perpetuates a limited understanding of persons with disabilities as rights holders.** This approach has structural implications for the design, implementation and evaluation of public policies, distancing them from the human rights model underlying the Convention and undermining substantive equality and full inclusion (Committee on the Rights of Persons with Disabilities, 2016, paras. 7–8).

In this context, **the Me-CDPD emphasises that Decree-Law No. 202/96 of 23 October, which establishes the system for assessing the disability of persons with disabilities for the purposes of accessing the measures and benefits provided for by law, is not fully consistent with the CRPD and the UN General Comments.** In addition to reinforcing the medical perspective to the detriment of the human rights model advocated by the CRPD (Article 1 of the CRPD and General Comment No. 6), the system is characterised by a slow and inefficient assessment process with accessibility barriers (Articles 13 and 19 of the CRPD; and General Comment No. 5), failing to provide for the involvement and participation of persons with disabilities (Article 4 of the CRPD and General Comment No. 7 of the CRPD); imposing administrative and economic barriers (Article 9 of the CRPD and General Comment No. 2) and failing to provide for periodic reviews of the assessment criteria (Article 31 of the CRPD) (Opinion No.4/Me-CDPD/2025, on the draft Ministerial Order which "Determines the digitisation of medical board procedures for the assessment of incapacity, approves the list of conditions for which a multi-purpose medical certificate of incapacity may be issued, without the need for a medical board assessment of incapacity, and issues new provisions relating to medical boards for the assessment of incapacity", 2025, p. 3).

However, the Me-CDPD highlights the developments in this area, namely the approval of Ordinance Nº 171/2025/1, of 10 April, which provides for the digitisation of medical assessment panel procedures, approves the list of conditions eligible for the issuance of a multi-purpose medical certificate of incapacity, exempting the need for a medical assessment panel, and sets out new provisions regarding medical assessment panels (hereinafter "JMAI"). Within the scope of its remit and powers, the Me-CDPD had the opportunity to issue Opinion No. 4/Me-CDPD/2025, of 17 March, while it was still being drafted, in which it issued a number of recommendations aimed at improving the draft and ensuring its compliance with the CRPD, in particular with regard to accessibility, equality and non-discrimination of Persons with disabilities, and inclusion (Opinion No. 4/Me-CDPD/2025, on the proposed Ministerial Order which "Determines the digitisation of medical board procedures for the assessment of incapacity, approves the list of conditions for which a multi-purpose medical certificate of incapacity may be issued, without the need for a medical board assessment of incapacity, and issues new provisions relating to medical boards for the assessment of incapacity", 2025).

On this subject, **the Me-CDPD issued Opinion No. 1/Me-CDPD/2026, concerning Draft Law No. 309/XVII (P), on the extraordinary procedure for clearing the backlog of cases at the JMAI,** at the request of the 9th Parliamentary Committee – Health (Me-CDPD, 2026c). This Draft Law resulted in Law No. 8/2026, which establishes an extraordinary procedure for the resolution of outstanding cases at JMAI to operate within local health units.

Law No. 8/2026, of 25 February, partially incorporates the intention of the Opinion by establishing an extraordinary mechanism for clearing JMAI backlogs, with defined deadlines for the removal of pending applications and for the implementation of the clearance process, in line with the main objective identified by the Me-CDPD of reducing delays that hinder access to the Multi-purpose Medical Certificate of Incapacity and, consequently, to basic social protection and health rights.

However, there is no substantial incorporation of the specific recommendations of the Me-CDPD into the final text of the law: the approved legislation was limited to administrative measures to speed up the process, without incorporating mechanisms that address the substantive issues highlighted in the Opinion, specifically: guarantees of substantive equality (prioritisation criteria based on vulnerability), procedural and accessible communication, harmonisation of practices across healthcare units, monitoring of differential impacts, or safeguards for the effective participation of those being assessed.

Thus, **although the legislation moves towards reducing the backlog (the central objective of the Bill and recognised by the Me-CDPD), the recommendations of the Mechanism regarding human rights (accessibility, equality, participation and quality of assessments) are not reflected in the final approved tex**

Also within the scope of Article 4 of the CRPD, the Committee recommended in its Concluding Observations that Portugal should (i) carry out a comprehensive review of its legislation in order to bring it into line with the provisions of the CRPD; (ii) ensure adequate funding for national strategies on disability (including specific budgets, fixed implementation timetables and monitoring mechanisms), allocating, in particular, European Union funds (hereinafter 'EU') for the development of policies that contribute to the implementation of the CRPD; and (iii) involve organisations of persons with disabilities in the drafting, monitoring and evaluation of policies that contribute to the implementation of the CRPD (Committee on the Rights of Persons with Disabilities, 2016, paras. 9–12).

The last two aspects mentioned relate to issues that remain to be addressed, particularly regarding the substantive equality of persons with disabilities in Portugal. **In several of its opinions, recommendations and contributions, the Me-CDPD highlights the need for the Portuguese State to effectively and rigorously comply with the provisions of Article 4 (2) and (3):**

> 2 - With regard to economic, social and cultural rights, each State party undertakes to take measures to maximise its available resources and, where necessary, within the framework of international cooperation, with a view to progressively realising the full enjoyment of these rights, without prejudice to the obligations under this Convention that are immediately applicable in accordance with international law.
>
> 3 - In the development and implementation of legislation and policies to implement this Convention and in other decision-making processes regarding matters relating to Persons with disabilities, States Parties shall consult closely with and actively involve Persons with disabilities, including children with disabilities, through their representative organisations.

More recently, regarding Article 4 (2), the Me-CDPD issued Official Letter No. 17/2026, sent to the Minister of State and Finance, the Deputy Secretary of State and the Secretary of State for the Budget, the Secretary of State for Tax Affairs, the Secretary of State for the Treasury and Finance, and the Secretary of State for Administration, in which it expresses its concern regarding the removal of references to the CRPD in crucial mandatory provisions of the funding regulations for the EU (Me-CDPD, 2026b). The draft budget issued in July 2025 by the European Commission removed the obligation to comply with the CRPD when using EU funds, previously ensured by the so-called 'enabling conditions', and now replaced by the 'Horizontal Principles'. However, as stated in the letter, the absence of any reference to the CRPD in these "Horizontal Principles". Represents a weakening of the protection of the Rights of Persons with Disabilities. For this reason, **Me-CDPD calls on the Portuguese State,** through its aforementioned representatives, **(i) to support the reinstatement of the CRPD in the "Horizontal Principles" governing the use of EU funds between 2028 and 2034; (ii) as well as to ensure that this point is included in the Council of Europe's negotiating position regarding the Regulation establishing a framework for monitoring budgetary expenditure, performance and other horizontal rules; (iii) and in the Regulation establishing the European Fund for Economic, Social and Territorial Cohesion.**

The appropriate allocation of resources is an essential condition for the progressive realisation of the economic, social and cultural Rights of Persons with Disabilities. **For this reason, the Me-CDPD believes that allocation alone is not sufficient, but rather to plan, structure, monitor and supervise to ensure concrete and measurable results in the realisation of human rights and fundamental freedoms.**

Data from the national study 'System of Indicators for Inclusion Policies' (hereinafter 'SIPI') show how Persons with disabilities in Portugal continue to face significant inequalities across multiple aspects of social life (CIES-ISCTE, 2025). These data reflect the structural barriers that persist in areas such as physical, digital and accessible communication, as well as in access to education, healthcare and housing.

In this context, in addition to a system of continuous monitoring of public policies, with the systematic collection of disaggregated and comparable data (Article 31), it is important to ensure sustainable funding that effectively guarantees the full inclusion of persons with disabilities. In this regard, the Me-CDPD issued the following recommendations:

Recommendation No. 6/Me-CDPD/2025, of 4 October 2025, on the Rights of Persons with Disabilities in the 2026 State Budget: Contributions to an inclusive policy (Me-CDPD, 2025m);

- Contribution No. 4/Me-CDPD/2025, of 6 November 2025, in the context of the consultation initiated by the 5th Committee on the Budget, Finance and Public Administration with the Me-CDPD, based on Recommendation No. 6/2025 (Me-CDPD, 2025c).

Finally, and in line with Article 4(3) in conjunction with General Comment No. 7, **the Me-CDPD reiterates that the full implementation of the CRPD will only be possible through the full participation of Persons with disabilities:** "the active and informed participation of all in decisions affecting their lives and rights is consistent with the human rights-based approach to public decision-making processes and ensures good governance and social accountability" (simple translation) (General Comment No. 7 (2018) on the participation of persons with disabilities, including children with disabilities, through their representative organizations, in the implementation and monitoring of the Convention, 2018, para. 2).

Article 26 (Habilitation and rehabilitation)

In the context of monitoring Article 26 of the CRPD, **the Me-CDPD notes that access to adequate housing is a key factor for autonomy, community participation and the effectiveness of habilitation and rehabilitation processes.** The recent adoption of the European Plan for Affordable Housing (European Commission, 2025) represents a strategic opportunity to integrate the principles of accessibility, universal design and independent living into public housing policies, thereby preventing housing exclusion which undermine pathways to social and economic inclusion. As highlighted in Recommendation No. 01/Me-CDPD/2026 (Me-CDPD, 2026h), the national implementation of this Plan must align with the obligations arising from Articles 9, 19, 28 and 4 (3) of the CRPD, ensuring that public investment does not reproduce structural barriers or promote segregating solutions.

Given the housing crisis in Portugal and its disproportionate impact on the lives of persons with disabilities and their households, **the Me-CDPD reiterates the need to provide for specific measures, verifiable targets and independent monitoring mechanisms to ensure the effective inclusion of this group in affordable housing programmes.**

Article 30 (Participation in cultural life, recreation, leisure and sport)

Recently, with the approval of the 2026 State Budget, the Government adopted several measures under this article; however, **as of the date of drafting this report, the Me-CDPD had not received any requests for opinions directly related to the issues enshrined in Article 30.**

The Me-CDPD recognises the importance of initiatives such as Ministerial Order No. 432/2025/1, of 5 December, which established the 'Accessible and Inclusive Cultural Spaces' Seal ('SECAI') and approved the award regulations; Order No. 2276/2025, of 19 February, which approved the Regulations for the 'Accessible Festivals' Programme for the period 2024 to 2026; as well as the approval by the 25th Government of "the Decree-Law providing for free admission for persons accompanying persons with disabilities, a measure that contributes to the removal of economic barriers to access to cultural goods and events" (25th Government of Portugal, 2026).

Despite the progress noted, it is important to emphasise that the implementation of Article 30 requires more than isolated measures or instruments of formal recognition. Cultural accessibility must encompass physical, communication and digital accessibility, incorporate binding technical criteria, and be accompanied by independent monitoring mechanisms, impact indicators, and the active participation of persons with disabilities and their representative organizations, in accordance with Article 4 (3) of the CRPD. Accessible culture is not limited to access as audiences; it also includes the right to artistic creation, the development of creative potential and the full participation of Persons with disabilities as cultural actors.

The implementation of Article 30 is thus an essential indicator of social inclusion and substantive equality. Ensuring that cultural life, sport and leisure are effectively accessible and inclusive represents a binding international legal obligation, as well as the concrete expression of democratic quality and the State's commitment to an accessible society, in all its dimensions, for all persons.

Article 31 (Statistics and data collection)

The lack of consistent and comparable data on the living conditions of persons with disabilities is one of the issues repeatedly highlighted by the Me-CDPD in its contributions, opinions, press releases and official correspondence as requiring urgent action. It is necessary to ensure the production, harmonisation and dissemination of reliable data, as well as to guarantee that public and legislative debate on the Rights of Persons with Disabilities is grounded in reliable and objective evidence. (Me-CDPD, 2025i).

This gap was also highlighted by the Committee's 2016 Concluding Observations on the initial report of Portugal, where it expressed concern about the lack of consistent and comparable data, and the

absence of human rights indicators in the data available at the time. The Committee recommended that Portugal, in cooperation with persons with disabilities and their representative organisations, implement a human rights-based system of indicators, as well as a comprehensive system for the collection of disaggregated data that enables comparison (Committee on the Rights of Persons with Disabilities, 2016, paras. 60–61).

This recommendation is also in line with target 17.18 of the Sustainable Development Goals (hereinafter 'SDG'): By 2020, strengthen capacity-building support for developing countries, including least developed countries and small island developing states, to significantly increase the availability of high-quality, timely and reliable data, disaggregated by income, gender, age, ethnicity, migratory status, disability, geographic location, and other relevant characteristics in national contexts (simple translation) (United Nations, 2015a).

Recently, with regard to the European Strategy on the Rights of Persons with Disabilities 2021–2030, Me-CDPD reiterated the need to strengthen the monitoring and evaluation component, moving towards a paradigm of "evidence-based, impact-driven and accountable strategy, in full compliance with Article 31 of the CRPD" (Me-CDPD, 2026a, p. 10). This position, explained in detail in Contribution No. 1/Me-CDPD/2026 regarding that Strategy, is, however, in the view of the Me-CDPD, applicable to all legislative measures and public policies, at national, European and international levels. Thus, **in addition to the implementation of comprehensive mechanisms for periodic and independent monitoring and evaluation, the Me-CDPD recommends:**

- The express need for disaggregated, reliable and comparable data that provides an accurate picture of the reality faced by persons with disabilities;
- Harmonisation of data collection indicators so that measures appropriate to social reality can be implemented;
- Strengthening of accountability;
- The provision of accessible and transparent information on the results of public or legislative measures;
- Adoption of inclusive budgeting models;
- Implementation of human rights-based evaluation models (Me-CDPD, 2026a, p. 2).

In this regard, to reinforce the evidence-based monitoring approach, the **Me-CDPD sets out**, in the annex to this report, **the main conclusions of the national study *'Attitudes and Perceptions of the Portuguese Adult Population regarding Disability'***, developed by the ODDH (ISCSP-ULisboa) and commissioned by the Me-CDPD as part of its remit to promote, protect and monitor the CRPD **(Annex 1). This study constitutes a key contribution by the Me-CDPD to the systematic understanding of the national situation, reinforcing the importance of Article 31 of the CRPD.**

Article 6
Women with disabilities

1. States Parties recognize that women and girls with disabilities are subject to multiple discrimination, and in this regard shall take measures to ensure the full and equal enjoyment by them of all human rights and fundamental freedoms.

2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.

Article 6
Women with disabilities

General Framework

In this context, Portugal is a State party to several binding international instruments: CRPD, the United Nations Convention on the Elimination of All Forms of Discrimination against Women (hereinafter "CEDAW"), and the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention).

In accordance with General Comment No. 3 issued by the Committee, para. 1 of this article recognises that women with disabilities are subject to multiple and intersectional forms of discrimination and requires States Parties to take measures to ensure the full and equal enjoyment of all human rights and fundamental freedoms by women with disabilities (General Comment No. 3 (2016) on women and girls with disabilities, para. 13).

Article 1 of CEDAW defines discrimination against women as: "any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, the enjoyment or exercise by women, irrespective of their marital status, on the basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural and civil fields or in any other field" (Article 1).

Under subpara.s (f) and (g) of Article 2 of CEDAW, State Parties are required to provide legal protection and to abolish or amend discriminatory laws and regulations, in particular with regard to women "who are particularly vulnerable to discrimination", as is the case, according to General Recommendation No. 28 issued by the CEDAW Committee, with women and girls with disabilities (General Recommendation No. 28 (2010) on the core obligations of States Parties under Article 2 of CEDAW, para. 31).

Achieving gender equality remains one of the Sustainable Development Goals (SDG) of the 2030 Agenda (SDG 5). Target 5.6 aims to ensure universal access to sexual and reproductive health and reproductive rights (United Nations, 2015b, Target 5.6).

Despite the normative and programmatic advances, the following analysis highlights the persistence of structural inconsistencies between the national legal and political framework and the obligations arising from the Convention, as interpreted by the Committee.

Observations, recommendations and developments

In its 2016 concluding observations, in paragraph 17 and 18, the Committee expressed concern regarding the lack of specific support measures to prevent

and combat the multiple and intersectional discrimination faced by women and girls with disabilities and the lack of information in this regard; recommending that the Portuguese State incorporate (i) the "perspective of women and girls with disabilities into its policies, programmes and strategies on gender equality", as well as (ii) "a gender perspective into its strategies on disability" (para. 18).

Ten years after these observations were issued, the data continue to show that across Europe, women are disproportionately affected by poverty due to deep-rooted structural gender inequalities that influence various aspects of life (Advisory Committee on Equality between Women and Men, 2026, p. 3).

In line with those recommendations, the Portuguese State, in the ENIPD 2021–2025, recognised that persons with disabilities face "processes of multiple and intersectional discrimination that exacerbate their vulnerability", acknowledging "the importance of taking measures to raise awareness of the rights of women and girls with disabilities" with the aim of "eliminate stereotypes, prejudices and violence, including discriminatory practices that violate, seriously impair or nullify the enjoyment of their human rights and fundamental freedoms, constituting an impediment to their full, equal and effective participation in society, the economy and political decision-making" (ENIPD 2021–2025, 2021, pp. 8–9).

This commitment is specifically reflected in measure EE1-2.2.4, which consists of "promoting coordinated intervention in the areas of disability and the prevention and combating of violence against women and domestic violence, in particular based on the specialised reception services for women with disabilities provided by the National Support Network for Victims of Domestic Violence ('RNAVVD')" (ENIPD 2021–2025, 2021, p. 26). This measure was implemented through a protocol signed on 23 December 2021 between the (at the time) INR, I.P. (now IDiPD, I.P.) and the Commission for Citizenship and Gender Equality (hereinafter "CIG") (INR, I.P., 2025a, p. 48).

With regard to the sexual and reproductive rights of women and girls with disabilities, the ENIPD, in Strategic Axis (hereinafter "SA") 6 - 1.3.2. provides for the revision of the National Health Plan to address the "needs of Persons with disabilities in terms of health, sexual and reproductive health, HIV/AIDS and sexually transmitted infections" (ENIPD 2021-2025, 2021, p. 55). According to the implementation monitoring report for ENIPD 2021–2025, as of 31 December 2024, this measure was considered 50% implemented (INR, I.P., 2025a). This percentage is justified, according to information from the DGS, by the approval of an Order establishing the Priority Programme for Sexually Transmitted Infections and Human Immunodeficiency Virus Infection, which paved the way for restructuring of this priority area and includes measures that "apply across the board to all people, regardless of whether they have an illness, disability or impairment." (INR, I.P., 2025a, p. 223). In light of this report, the IDiPD, I.P. considered

that the measure should be “analysed as part of the review of the ENIPD 2021–2025” (INR, I.P., 2025a, p. 223).

In the National Strategy for Equality and Non-Discrimination (hereinafter “ENIND”) 2018–2030, an intersectional perspective is one of the cross-cutting themes in the definition and implementation of this strategy and its respective action plans. This intersectional perspective is reflected, in particular, in Specific Objective 61, which aims to “ensure the protection and empowerment of women and people in situations of social and economic vulnerability”, one of whose impact indicators concerns actions to promote equality and inclusion among women and men with disabilities (R80) (National Strategy for Equality and Non-Discrimination 2018–2030, 2018, p. 247).

However, these **measures continue to be, generally of a programmatic and non-binding nature, and are not accompanied by clear mechanisms for implementation, monitoring and impact assessment specifically targeting women and girls with disabilities.**

Forced sterilisation of persons with disabilities

Although there is growing recognition of the need to protect women and girls with disabilities through public policies that incorporate an intersectional perspective, Portugal continues to violate various human rights provisions in one specific area: the forced sterilisation of persons with disabilities.

This situation constitutes a serious, ongoing and systematic violation of the Convention, despite the repeated recommendations of international human rights bodies (UN General Assembly, 2017; European Disability Forum, 2022).

In the Committee’s latest concluding observations (2016) regarding Portugal, in paragraph 36, the Committee expressed concern that persons with disabilities, “especially those declared legally incapable, continue to be subjected against their will to termination of pregnancy, sterilisation, scientific research, electroconvulsive therapy or psychosurgical interventions”. In this regard, in para. 37, it recommended that all measures be taken to ensure that the right to free, prior and informed consent to medical treatment is respected and that measures to support decision-making are implemented.

In addition to the provisions of Article 6 of the CRPD, this discriminatory practice violates several provisions of the CRPD, in particular Article 5 (equality and non-discrimination), Article 17 (protecting the integrity of the person), Article 12 (equal recognition before the law), Article 16 (protection from exploitation, violence and abuse) and Article 23 (respect for home and the family), in particular the provisions of subparagraphs (b) and (c) of paragraph 1, which expressly stipulate that States Parties shall take effective and appropriate measures to ensure: “the rights of persons with disabilities to decide freely and responsibly on the number and spacing of

their children and to have access to age-appropriate information, reproductive and family planning education are recognized, and the means necessary to enable them to exercise these rights are provided" (subpara. b); and that "Persons with disabilities, including children, maintain their fertility on an equal basis with others" (subpara. c).

In parallel with these provisions, it is also important to note the Committee's General Comment No. 1, which stipulates that all decisions regarding sexual and reproductive health must be made by the individual themselves, through their prior, informed and free consent (General Comment No. 1 (2014), Equal recognition before the law, 2014, 40-41). In the Committee's General Comment No. 3 (2016), forced sterilisation is identified as a practice that violates the rights of women with disabilities enshrined in the CRPD, recommending its prohibition and criminalisation in all its forms (General Comment No. 3 (2016) on women and girls with disabilities, 2016, para. 63(a)).

Data provided by the European Disability Forum (2017) show that although this practice affects persons with disabilities across the board, including men and boys with disabilities, it is women and girls with disabilities who face the greatest risk of being subjected to forced sterilisation.

The need to criminalise this discriminatory practice is supported by other international instruments. Under the provisions of Article 39 of the Istanbul Convention, Portugal is obliged to take the necessary legislative or other measures to ensure the criminalisation of surgical procedures that have the purpose or effect of "terminating a woman's natural reproductive capacity without her prior and informed consent or without her understanding the procedure".

According to the report by the Group of Experts on Action against Violence against Women and Domestic Violence ("GREVIO") on the progress of the implementation of the Istanbul Convention in Portugal, once again, women and girls with disabilities are identified as a group particularly exposed to various forms of discrimination and institutional violence, highlighting the persistence of guardian-like and paternalistic approaches (GREVIO, 2025, p. 13; Me-CDPD, 2025h, p. 3).

The CEDAW Committee, in the concluding observations of its report on Portugal, also affirms the need for the Portuguese State to ensure the full, free and informed consent of women with disabilities for any medical intervention or treatment (CEDAW Committee, 2022, para. 41–c).

Action by the Me-CDPD

On 14 March 2025, **the Me-CDPD, on its own initiative, decided to issue a set of recommendations on this matter, with a view to ensuring that Portugal fully complies with its international obligations and protects the Rights of Persons with Disabilities.** Thus, Recommendation No. 02/Me-CDPD/2025 stems from an analysis of various legislative proposals on the criminalisation of forced sterilisation, concerns expressed by civil society organisations, and the need to highlight ongoing non-compliance with the provisions of the CRPD and the UN General Comments. In summary, the following

recommendations were put forward:

1. Criminalise forced sterilisation by amending the Penal Code to include a penalty for this practice and repealing any legal provision that permits sterilisation by decision of a third party or court order;
2. Create mechanisms to support decision-making;
3. Prohibit substitute decisions regarding sterilisation, in particular by amending Law No. 49/2018 of 14 August to include provisions ensuring that no decision-support measure can be interpreted as permission for coercive sterilisation;
4. Establish a mechanism for redress for victims of forced sterilisation;
5. Train professionals in the health, social services and justice sectors;
6. Establish an independent monitoring and sanctions mechanism to ensure compliance with the ban on forced sterilisation (Me-CDPD, 2025j).

Following the issuance of this recommendation, the Me-CDPD, within the scope of its powers and responsibilities[2], issued three further opinions on this matter regarding the following draft laws:

- Draft Law No. 313/XVII/1 (PS) – Clarifies the criminalisation of forced sterilisation, particularly of persons with disabilities, and implements measures to guarantee the reproductive Rights of Persons with Disabilities or reduced legal capacity, establishing the National Family Planning Scheme for Persons with disabilities or in Situations of Incapacity and the Mechanism for Monitoring Sterilisation Procedures.
- Draft Law No. 327/XVII/1 (PAN) – Criminalises the sterilisation of persons with disabilities and/or incapacitated persons and regulates the conditions for the practice of irreversible sterilisation methods, amending Law No. 3/84 of 24 March, the Penal Code, and the Civil Code.
- Bill No. 329/XVII/1 (BE) – Criminalises the forced sterilisation of persons with disabilities and/or those who are incapacitated and guarantees the protection of their sexual and reproductive rights.

These resulted in the following opinions and technical notes requested by the 1st Committee – Constitutional Affairs, Rights, Freedoms and Guarantees ("CACDLG"):

- Opinion No. 8/Me-CDPD/2025, of 16 December 2025, on Draft Law No. 313/XVII/1 (PS) (Me-CDPD, 2025h);
- Opinion No. 02/Me-CDPD/2026, of 22 January 2026, concerning Draft Law No. 329/XVII/1.ª (BE) – Criminalises the forced sterilisation of Persons with disabilities

[2] Article 3(2)(a) of Law No 71/2019 of 2 September stipulates that the Me-CDPD is responsible for: "a) Issuing a mandatory, non-binding opinion on draft legislation concerning the Rights of Persons with Disabilities".

and/or incapacitated persons and guarantees the protection of their sexual and reproductive rights (Me-CDPD, 2026d);

- Opinion No. 03/Me-CDPD/2026, of 22 January 2026, regarding Draft Law No. 327/XVII/1st (PAN) – Criminalises the sterilisation of persons with disabilities and/or those lacking capacity and regulates the conditions for the practice of irreversible sterilisation methods, amending Law No. 3/84 of 24 March, the Penal Code, and the Civil Code (Me-CDPD, 2026e);
- Opinion No. 04/Me-CDPD/2026, of 22 January 2026, Technical notes supporting the analysis of legislative initiatives on the "Criminalisation of forced sterilisation of Persons with disabilities in Portugal": Draft Law No. 313/XVII/1st (PS); Draft Law No. 327/XVII/1st (PAN); Draft Law No. 329/XVII/1st (BE), under the remit of the CACDLG (1st Committee) (Me-CDPD, 2026f).

In this way, the Me-CDPD acknowledges the efforts made to eliminate a discriminatory practice that has harmful effects on the lives of many persons with disabilities, in particular women and girls. However, it is essential that the draft laws break with a regulatory paradigm that the CRPD aims to eradicate, going beyond specific technical and legal issues, and reformulating the legal framework so that it does not permit any form of sterilisation without personal, free and informed consent.

The Me-CDPD considers that full compliance with Article 6 of the CRPD requires a clear and unequivocal legislative response, accompanied by effective implementation measures, in line with the Committee's recommendations.

The Me-CDPD considers it crucial that Portugal fully complies with the CRPD and international human rights standards; to this end, it is essential to implement the following recommendations: (i) the absolute criminalisation of forced sterilisation; (ii) support for decision-making; (iii) multidisciplinary training for professionals (involving the participation of persons with disabilities as co-trainers); (iv) training for persons with disabilities on their sexual and reproductive rights and safeguards; (v) the establishment of a reporting mechanism, monitoring system and a system of redress. Finally, in addition to a comparative analysis of measures already implemented in other European countries against this practice[3] , it is recommended that, for a more detailed and in-depth analysis of the subject, readers consult the aforementioned Recommendation and Opinions issued by the Me-CDPD on the matter in question.

[3] In this regard, the cases of Spain and Malta are noteworthy. In Spain, Organic Law 2/2020 of 16 December amended the Criminal Code, expressly repealing the previous Article 156, which permitted the sterilisation of persons declared legally incapable by means of a court order. Malta, through the adoption of Act No. X of 2024 – Criminal Code (Amendment No. 4) Act, 2024, replaced Article 251F of the Maltese Criminal Code and criminalised the offence of "enforced sterilisation". Under the new Article 251F(1), a person commits this offence if they carry out the surgical removal or damage of the reproductive organs of a minor, or of an adult without that person's free and informed consent, resulting in sterilisation; the offence is punishable by imprisonment for a term of five to nine years, as well as a fine, in accordance with the law (Me-CDPD, 2025h, pp. 9–10).

Analytical Summary

Article 6 of the CRPD requires States to adopt specific measures to address the forms of multiple and intersectional discrimination affecting women and girls with disabilities. Although Portugal has made progress at the policy level, notably through the ENIPD and the ENIND, significant gaps remain in the implementation of structured measures, accompanied by implementation, monitoring and impact assessment mechanisms specifically targeted at this population group.

It is important to highlight as particularly worrying the persistence of practices incompatible with the State's international obligations, such as the forced sterilisation of Persons with disabilities, which constitutes a serious violation of various rights enshrined in the CRPD and other international human rights instruments.

In this context, the Me-CDPD considers that full compliance with Article 6 of the CRPD requires the strengthening of public policies with a focus on the intersection between gender and disability, but also the adoption of clear legislative and institutional measures that ensure the effective protection of the sexual and reproductive rights of women and girls with disabilities, in line with the repeated recommendations of international human rights mechanisms.

Finally, it is worth noting that between 2025 and 2026, the Me-CDPD formally expressed its views on this issue on five occasions, through Opinions, Recommendations and Technical Notes addressed to Parliamentary Groups, Individual Members of Parliament and the Committee on Constitutional Affairs, Rights, Freedoms and Guarantees; to date, no legislative developments have been adopted.

Summary Table

Rights of Women and Girls with Disabilities

Multiple and intersectional discrimination (Article 6 of the CRPD)

Current situation

Portugal is bound by various international instruments that reinforce this right, including the CRPD, CEDAW and the Istanbul Convention.

- Some progress has been made, particularly through the adoption of national strategies such as the ENIPD and ENIND. However, significant gaps remain, including the absence of structural measures and effective monitoring mechanisms, and the lack of meaningful participation of women and girls with disabilities, as well as systematic impact assessments.
- There is a persistent gap between the normative framework and its practical implementation.

Identified Issues

Structural and intersectional discrimination persists, with women and girls with disabilities still facing multiple forms of discrimination, including institutional violence and paternalistic practices.

A critical concern is forced sterilisation, which constitutes a serious violation of the CRPD and other international human rights instruments.
This practice disproportionately affects women and girls with disabilities, often occurring without their free and informed consent.

Recommendations of the Me-CDPD

To ensure compliance with article 6 of the CRPD, the State should prioritise the following four areas:

- **Intersectionality:** Development of policies that address the intersection between gender and disability.
- **Effective protection:** Adopt legislation that criminalises forced sterilisation and ensures sexual and reproductive rights. Ensure free and informed consent and provide support for decision-making.
- **Capacity building:** Training professionals and empowering Persons with disabilities.
- **Accessible protection mechanisms:** Establishing accessible systems for reporting, monitoring and redress.

Activities of the Me-CDPD

The Me-CDPD has played an active role in engaging with State authorities, despite the lack of legislative progress in this area:

- **Five formal interventions**, including opinions, recommendations and technical notes.
- **Targeted stakeholders:** Government, parliamentary groups, individual Members of Parliament, the Parliamentary Committee on Constitutional Affairs, Rights, Freedoms and Guarantees, organisations of Persons with disabilities and Persons with disabilities.
- **Current status:** Legislative developments remain pending.

Article 7
Children with disabilities

1. States Parties shall take all necessary measures to ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children.

2. In all actions concerning children with disabilities, the best interests of the child shall be a primary consideration.

3. States Parties shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, on an equal basis with other children, and to be provided with disability and age-appropriate assistance to realize that right.

Article 7
Children with disabilities

General Framework

In accordance with Article 3(h), one of the principles of this Convention is "respect for the capacities and development of children with disabilities and respect for the right of children with disabilities to preserve their identities".

This article is closely linked to several articles of the CRPD, in particular Article 8 (awareness-raising), Article 18 (freedom of movement and nationality), Article 23 (respect for the home and the family), Article 24 (education), Article 25 (health), Article 28 (adequate standard of living and social protection), among others.

Portugal is a State party to the Convention on the Rights of the Child (hereinafter "CRC"), which, in its Article 2, expressly establishes the principle of non-discrimination in relation to all children. In this regard, the Committee on the Rights of the Child recognises in General Comment No. 9 that children with disabilities face discrimination in various aspects of their lives, making them a group particularly vulnerable to social discrimination, stigma and even physical or mental violence (General Comment No. 9 (2006) on the rights of children with disabilities, 2007, para. 8).

Furthermore, Article 23 of the CRC recognises the obligation of States to guarantee children with disabilities "the right to a full and decent life in conditions that ensure their dignity, promote their autonomy and facilitate their active participation in the community" (para. 1). In particular, and with a view to ensuring social integration and effective access to education, training, healthcare, rehabilitation, preparation for employment and recreational activities, the CRC establishes in para.s 2 and 3 of that same article the right of children to benefit from special care, encouraging and ensuring, to the extent of available resources, the provision of assistance which should be free of charge (whenever possible), corresponding to the request made and adapted to the child and the situation of the parents or those responsible for the child.

As noted in General Comment No. 9 on the CRC, the essential idea of this article "is that children with disabilities must be included in society", and to this end, measures must be implemented in areas such as health and education, whose "explicit objective" is the full inclusion of children with disabilities. To this end, States must pursue the maximum inclusion of children with disabilities in society (General Comment No. 9 (2006) The rights of children with disabilities, 2007, para. 11). For this reason, the Committee on the Rights of the Child clarifies that Article 23(2) of the CRC establishes the obligation of States to ensure appropriate assistance to eligible children and their carers (taking into account the circumstances of the parents or other carers) (General Comment No. 9 (2006) The rights of children with disabilities, 2007, para. 12).

At EU level, in addition to the provisions of Articles 21 (Non-discrimination), 24 (Rights of the Child) and 26 (Inclusion of Persons with disabilities) of the Charter of Fundamental Rights of the European Union (hereinafter "CDFEU"), Commission Recommendation (EU) 2024/1238 of 23 April 2024 should be highlighted, which calls on Member States to adopt measures to develop and strengthen integrated child protection systems, ensuring the best interests of the child. In this regard, and considering that the recommendation itself identifies children with disabilities as a group at greater risk of being victims of violence and abuse in both family and institutional settings (European Union Agency for Fundamental Rights (FRA), 2015a), the Commission advocates that these integrated child protection systems must be inclusive, "ensuring that all children are always treated fairly and without discrimination." (Commission Recommendation (EU) 2024/1238 of 23 April 2024, para. 11).

Observations, recommendations and developments

In 2016, in para.s 19 and 20 of the Concluding Observations issued by the Committee to Portugal, the following concerns were noted: i) the effects of austerity measures on support services for families with children and on "inclusive and high-quality education" for these children; and ii) how the Strategies on disability and children's rights failed to take into account the needs of children with disabilities. The Committee therefore recommended that the Portuguese State take the necessary measures to minimise the impact of austerity measures on children with disabilities, by strengthening support for their families and taking the necessary measures to ensure that they receive an inclusive and high-quality education[4] (Committee on the Rights of Persons with Disabilities, 2016, paras. 19–20).

Similarly, the Committee on the Rights of the Child, in its Concluding Observations on Portugal dated 9 December 2019, included, among various recommendations, subpara. (b): "to adopt, in consultation with children with disabilities and their families, a new comprehensive strategy for the inclusion of children with disabilities in all areas of life and allocate adequate human, financial and technical resources for its monitoring and implementation" and (d) "strengthen coordination between social security, education and health authorities in order to ensure the effective implementation of social measures" (Committee on the Rights of the Child, 2019, p. 9).

Despite the overall improvements recorded regarding the rights of children with disabilities, national and European studies on the Rights of Persons with Disabilities continue to highlight the risk of poverty and social exclusion faced by these children and their families, as well as persistent inequalities, compared to persons without disabilities (National Action Plan for the Guarantee for Children, 2022–2030, 2023, p. 23).

[4] The matter of inclusive education is addressed in Article 24 of the CRPD.

The ENIPD 2021–2025 reaffirms several principles contained in the CRPD, notably respect for the evolving capacities of children with disabilities (p. 8). With regard to concrete actions, EE3 – Education and Qualifications – includes various measures under the general objective "to strengthen support mechanisms for learning and the consolidation of the current inclusive education system"; as well as in EE 6 – Social Measures, Services and Support – under Specific Objective 1.3, which aims to promote improved access to and the creation of support services and facilities that enable the reconciliation of family and professional life and contribute to the quality of life of persons with disabilities and their families; measure no. 1.3.1 states: "Re-evaluate and reformulate the existing model of support services to supplement school hours for children and young Persons with disabilities, so as to effectively enable them to remain outside school hours and engage in inclusive leisure and holiday activities." (ENIPD 2021–2025, 2021, pp. 36, 55). According to the report on activities carried out under the ENIPD up to 31 December 2024, this measure had a 0% implementation rate (INR, I.P., 2025a, p. 221).

The Single Strategy on the Rights of Children and Young People 2025–2035 does not explicitly mention specific measures for children with disabilities, but rather provides an organisational framework centred on eight strategic areas and their respective lines of action: 1) Holistic development and well-being of all children and young people; 2) The right to grow up in a family environment; 3) Active citizenship of children and young people as an investment in a democratic society; 4) Zero-tolerance policy towards poverty and social exclusion of children and young people; 5) An inclusive society for all children and young people; 6) A culture of non-violence; 7) Safety in the digital age; and 8) Scientific knowledge and education (p. 2). In this regard, it is worth highlighting the strategy's vision, which states that "All children and young people have the right to their full development on an equal footing and without discrimination, in a healthy, inclusive and safe family environment, and to the full exercise of their rights." (Single Strategy on the Rights of Children and Young People 2025–2035, 2025, p. 4).

It is also important to mention the National Strategy to Combat Poverty 2021–2030, which includes measures specifically designed with children with disabilities in mind, namely: EE1 – 1.1.1.6 – "Ensuring an integrated response for the effective inclusion of children with disabilities in the education system, focused on removing barriers to access to learning and maximising their potential;" and EE1 – 1.3.2. – "Ensure, in collaboration with local authorities and other community institutions, universal access to extracurricular activities, family support services, and leisure and holiday activities, which must include children with disabilities and other children particularly vulnerable to exclusion;" (National Strategy to Combat Poverty 2021–2030, 2021, pp. 24 and 26).

Leave and allowance for caring for a child with a disability, chronic illness or cancer

In 2019, Law No. 90/2019 of 4 September strengthened parental protection by amending the Labour Code and Decree-Law No. 89/2009 of 9 April, which regulates parental protection in the context of maternity, paternity and adoption for public sector workers

covered by the convergent social protection scheme; and Decree-Law No. 91/2009 of 9 April, which establishes the legal framework for social protection in parenthood within the social security system and the solidarity subsystem. Among the various amendments, particular note should be taken of the amendment to Article 53 of the Labour Code, which now provides, in addition to leave to care for a child with a disability or chronic illness, for leave to care for a child with cancer (para. 1); it added the possibility of extending this leave up to a "maximum of six years", subject to a medical certificate (para. 3), and stipulated that the maximum limit does not apply to cases of children with "prolonged terminal illness, confirmed by a medical certificate". Similarly, the articles relating to the "amount of allowances" provided for in Decree-Law No. 89/2009 (Article 23) and Decree-Law No. 90/2019 of 9 April (Article 36) were amended to also cover cases of care for a child with cancer. To date, the daily allowance for caring for a child with a disability, chronic illness or cancer has not been amended and remains as set out in the original legislation: "equal to 65% of the beneficiary's reference remuneration, with a maximum monthly limit of twice the Social Support Index ('IAS')" (Articles 4 and 6 of Law No. 90/2019 of 4 September).

Among the various draft laws that gave rise to it[5], are Draft Law No. 461/XIII/2ª (BE), which extended parental protection to parents with children with a disability or rare disease, and Draft Law No. 455/XIII/2ª (PCP), which extended the period of parental leave by 60 days in the event of the birth of a child with a disability or rare disease, and introduced parental leave for premature births associated with a disability or rare disease occurring more than six weeks before the expected date of delivery.

Action by the Me-CDPD

The Me-CDPD was asked, within the scope of its remit and powers, to issue an opinion on these two draft laws, resulting in the following opinions:

- Opinion No. 4/Me-CDPD/P/2017, of 20 September 2017, concerning Draft Law No. 461/XIII, relating to the legal framework for parental leave (BE).

In its analysis of the aforementioned draft law, **the Me-CDPD considered** that, whilst it was "on the whole" in line with the CRPD, it emphasised **the essential need to ensure the right to an extension of the initial parental leave, as well as the possibility of extending the leave period to care for children with disabilities, rare or chronic illnesses** (Me-CDPD, 2017d, para. 8).

- Opinion No. 5/Me-CDPD/P/2017, of 20 September 2017, concerning Draft Law No. 455/XIII, relating to the legal framework for parental leave (CDS-PP).

As regards this draft, the Me-CDPD considered it to be "partially in line" with the CRPD, as it establishes a distinction between parental leave for premature births and parental

[5] For further information on the original texts of the legislative initiatives that gave rise to Law No. 90/2019 of 4 September: https://www.parlamento.pt/ActividadeParlamentar/Paginas/DetalheDiplomaAprovado.aspx?BID=21913 accessed on 15 January 2026.

leave for premature births of children with a disability or rare disease. **In the view of the Me-CDPD, "it would be expected that this measure would be extended to all premature births and not just to births of children with a disability or rare disease"** (Me-CDPD, 2017e, para. 12).

In 2025, the Me-CDPD again commented on these matters through Recommendation No. 8/Me-CDPD/2025, of 11 December 2025. This recommendation was issued following an assessment of the measures approved during the committee stage of the 2026 State Budget, in particular, due to the amendment to the child care allowance scheme, which now provides for different rates of replacement income for carers of children with chronic disabilities (80%) and for carers of children with cancer (100%). The recommendation was intended to be preventive and explanatory in nature, and did not aim, at that time and at the stage the legislative process had reached, to make a definitive judgement as to the compliance of the legislative choice with the CRPD.

As highlighted in the recommendation, although the **Me-CDPD views as positive the intention to strengthen social protection for families providing intensive care to children with disabilities, chronic illnesses or cancer, the differentiation approved "poses significant risks of non-compliance with several key principles of the CRPD"**, namely:

- equality and non-discrimination (Article 5 and General Comment No. 6, regarding indirect discrimination);
- respect for home and the family (Article 23);
- an adequate standard of living and social protection (Article 28);
- participation of Persons with disabilities and their representative organisations in policy-making (Article 4(3)) (Me-CDPD, 2025o, p. 8).

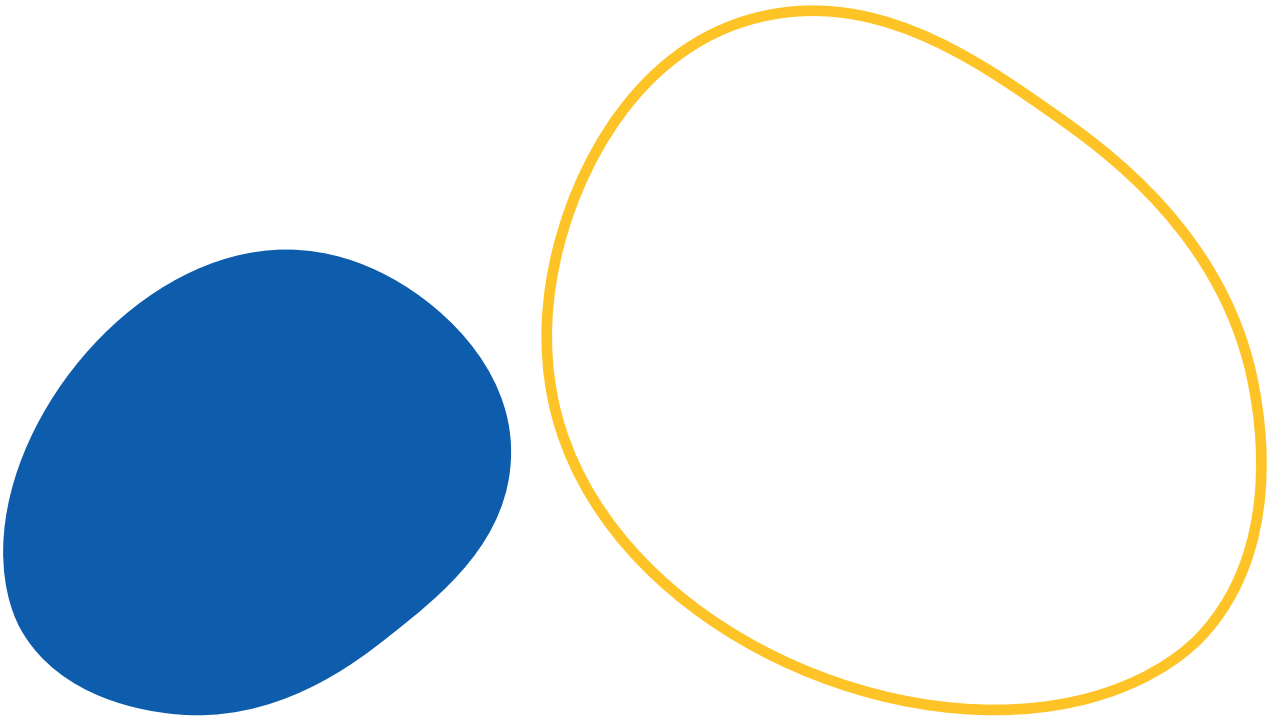
In short, and as emphasised in the text of the **Recommendation, the issue is not the strengthening of protection for families of children with cancer, but rather the legislative choice not to guarantee an equivalent level of protection for families of children with disabilities** (Me-CDPD, 2025o, p. 5).

In summary, in Recommendation No. 8/Me-CDPD/2025, the Me-CDPD identified the following measures:

> (1) "A reassessment of the current model, considering solutions centred on support needs (levels of dependency, intensity of care, need for continuous supervision), rather than on the type of health condition, in line with the recommendations of the CRPD Committee and international best practice.
>
> (2) Ensuring that no family of children with disabilities who have significant support needs is placed in a situation of reduced protection due to the nature of the diagnosis, in particular through mechanisms that allow for equivalent financial protection where care needs are equivalent to those provided for cancer.

(3) Structured involvement of organisations representing Persons with disabilities, including children with disabilities and their families, in the discussion of any future legislative adjustments, in compliance with the provisions of Article 4(3) of the CRPD." (Me-CDPD, 2025o, p. 9).

Finally, it was also **recommended that the Government issue a "public and technical clarification regarding the rationale, proportionality and expected impacts of the measure, including an analysis of the risk of indirect discrimination."** (Me-CDPD, 2025o, p. 8). **However, given that the 2026 State Budget is already in force, this recommendation is deemed to have been disregarded, at least as a precautionary measure.** Nevertheless, given the relevance of clarification on the matter, in February 2026 the Me-CDPD sent a further reminder to the Office of the Secretary of State for Social Action and Inclusion ("SEASI"). On 2 March 2026, the Office of the SEASI replied, informing the Me-CDPD that due to the "complexity of the matters, they are still under review by the relevant departments", and therefore, as of that date, the "conditions for submitting the consolidated contributions" had not yet been met. That said, the SEASI Office informed the Me-CDPD that it would respond as soon as possible; however, no formal response had been received by the date of completion of this report.



Analytical Summary

Article 7 of the CRPD requires the State to adopt effective measures to ensure that children with disabilities enjoy their rights on an equal basis with others, guaranteeing that the best interests of the child and the right to be heard guide all decisions affecting them, with support tailored to their age and participation needs. Although there are relevant programmatic references in national instruments (*e.g.* ENIPD, ENCP and strategies for children), weaknesses remain in the operational and measurable implementation of these commitments, evidenced, for example, by the complete lack of implementation of structural measures aimed at ensuring inclusive provision outside school hours and during school holidays.

Structural risks associated with poverty and social exclusion also persist, as does the insufficient integration of the specific needs of children with disabilities into childhood policies, as reiterated by international mechanisms. With regard to parental protection measures, the Me-CDPD acknowledges positive legislative developments but emphasises that regulatory options based on the type of diagnosis — rather than on the intensity and equivalence of care and support needs — may lead to indirect discrimination and material inequality, undermining the system's consistency with Articles 5, 23 and 28 of the CRPD.

In this context, the Me-CDPD considers it a priority to strengthen an integrated and cross-sectoral approach (*e.g.* social security, education and health), with clear and accessible strategies for implementation, monitoring and accountability, ensuring that no child with a disability (nor their family) is placed in a position of lesser protection due to a lack of inclusive responses, insufficient support or unjustified differences in access to social protection.

Summary Table

Rights of Children with Disabilities

Equality of rights, the best interests of the child and the right to active participation (Article 7 of the CRPD)

Current Situation

Portugal is bound by international instruments that reinforce this right, including the CRPD, the Convention on the Rights of the Child, and the Charter of Fundamental Rights of the European Union.

Progress achieved: Adoption of national strategies (ENIPD and ENCP).

- Remaining gaps: Persistence of paternalistic approaches not centred on the child; predominance of decision-making by third parties; limited effective participation of children; and barriers in accessing fundamental rights.

Identified Issues

Despite the existence of national strategies (ENIPD and ENCP), their practical implementation remains insufficient:

- **Structural shortcomings:** Lack of integrated, child-centred policies; insufficient coordination across sectors (education, health and social protection); limited effective participation of children in decision-making processes; and absence of inclusive responses outside school hours and during holiday periods.
- **Social risks:** Persistent situations of poverty and social exclusion disproportionately affecting children with disabilities.
- **Support measures based on diagnosis rather than needs:** Existing measures continue to rely on diagnostic categories rather than the intensity of support needs. Notably, the State Budget for 2026 introduced differentiated parental benefits based on type of condition chronic disability (80%) vs. oncological disease (100%), raising concerns regarding equality and adequacy.

Recommendations of the Me-CDPD

The Me-CDPD calls for urgent reinforcement in five key areas:

- **Best interests of the child:** Ensuring that this principle is effectively applied as a primary consideration.
- **Participation:** Guaranteeing the right of children with disabilities to be heard and to participate in decisions affecting them.
- **Family support:** Strengthening support measures for families, including leave arrangements, benefits and services.
- **Accessibility of rights:** Removing barriers to access to education, healthcare and social protection.
- **Integrated, rights-based policies:** Promoting coordinated and comprehensive policies grounded in human rights.

Activities of the Me-CDPD

The Me-CDPD has consistently integrated a child rights-based perspective into its analyses and recommendations, advocating for an approach that recognises children with disabilities as rights-holders.

In this area, the Me-CDPD promotes an integrated and intersectional approach aimed at:

- **Coherence:** Ensuring effective coordination between education, health and social services.
- **Transparency:** Establishing monitoring frameworks based on human rights indicators, with measurable targets.
- **Universality:** Ensuring that no child is left without protection due to a lack of inclusive responses or unjustified disparities in access to support.

Article 9
Accessibility

1. To enable persons with disabilities to live independently and participate fully in all aspects of life, States Parties shall take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas. These measures, which shall include the identification and elimination of obstacles and barriers to accessibility, shall apply to, inter alia:

a) Buildings, roads, transport and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces;

b) Information, communications and other services, including electronic services and emergency services.

2. States Parties shall also take appropriate measures to:

a) Develop, promulgate and monitor the implementation of minimum standards and guidelines for the accessibility of facilities and services open to or provided to the public;

b) Ensure that private entities that offer facilities and services which are open or provided to the public take into account all aspects of accessibility for persons with disabilities;

c) Provide training for stakeholders on accessibility issues facing persons with disabilities;

d) Provide in buildings and other facilities open to the public signage in Braille and in easy to read and understand forms;

e) Provide forms of live assistance and intermediaries, including guides, readers and professional sign language interpreters, to facilitate accessibility to buildings and other facilities open to the public;

f) Promote other appropriate forms of assistance and support to persons with disabilities to ensure their access to information;

g) Promote access for persons with disabilities to new information and communications technologies and systems, including the Internet;

h) Promote the design, development, production and distribution of accessible information and communication technologies and systems at an early stage, so that these technologies and systems become accessible at minimal cost.

Article 9
Accessibility

General Framework

Under Article 3(f) of the CRPD, accessibility is one of the Convention's core principles. The Committee defines accessibility as a "prerequisite" for Persons with disabilities "to live independently and participate fully and equally in society"(General Comment No. 2 (2014) on Article 9: Accessibility, para. 1). Article 9 requires the State to adopt concrete measures to identify and remove barriers and to ensure access, on an equal basis with others, to the physical environment, transport, information and communication (including digital technologies) and to services and facilities open to the public, whether provided by public or private entities (General Comment No. 2 (2014) on Article 9: Accessibility, para. 13). Accessibility must therefore be understood as a cross-cutting dimension of public policy, essential for the realisation of substantive equality and for the effective exercise of the rights enshrined in the Convention.

Article 9 is also closely linked to Article 21 of the CRPD (Freedom of expression and opinion and access to information), which complements the right to accessibility by specifying concrete obligations of the State regarding the provision of information and communication in accessible formats, the use of plain and clear language, the adoption of assistive technologies, and the use of alternative and augmentative communication methods. This interconnection highlights that accessibility is not limited to physical or technological dimensions, but also encompasses the communication conditions necessary for the effective exercise of rights, an aspect which will be explored in greater depth in relation to Article 21.

The right of access is already clearly established in international human rights law in binding instruments such as the ICCPR (Article 25(c)) and the International Convention on the Elimination of All Forms of Racial Discrimination (Article 5(f)). Consequently, the Committee states in General Comment No. 2 that accessibility should be understood as a "disability-specific reaffirmation" of the social aspect of this right of access. For this reason, it must be viewed not only in the context of equality and non-discrimination, but also as a form of investment in society and as an integral part of the sustainable development agenda (General Comment No. 2 (2014) Article 9: Accessibility, 2014, para. 4).

In this regard, it is worth highlighting SDG 11 of the UN 2030 Agenda, which aims to make cities and communities inclusive, safe, resilient and sustainable, in particular Target 11.2. "By 2030, provide access to safe, accessible, sustainable and affordable transport systems for all, improving road safety through the expansion of public transport networks, with special attention to the needs of people in vulnerable situations, women, children, persons with disabilities and older people"; and Target 11.7. "by 2030, provide universal access to safe, inclusive, accessible and green public spaces, particularly for women and children, older people and persons with disabilities" (United Nations, 2015b).

At EU level, this objective is addressed, in particular, by Directive (EU) 2019/882 of the European Parliament and of the Council of 17 April 2019 on the accessibility requirements for products and services. Known as the "European Accessibility Act", this Directive aims to improve the functioning of the internal market with regard to the accessibility requirements of certain products and services, by removing the barriers created by divergent rules in the Member States (Directive (EU) 2019/882, 2019, para. 1). Some of these products and services relate to computers and operating systems, ATMs and check-in or ticket-purchasing machines, smartphones, television or telephone equipment related to communication services, air, road, rail and maritime passenger transport services, banking services, e-books or e-commerce (European Commission, n.d.). With regard to the Rights of Persons with Disabilities, this Directive ensures the provision of more accessible products and services on the market at more competitive prices, fewer barriers to access to transport, education and the labour market, and even more jobs available that require specialist knowledge in the field of accessibility (European Commission, n.d.).

Alongside this Directive, other legislative initiatives in various areas have been adopted to make the EU more accessible to persons with disabilities (European Commission, 2021, p. 3), namely: the Web Accessibility Directive (Directive (EU) 2016/2012 of the European Parliament and of the Council, 2016); the European Electronic Communications Code (Directive (EU) 2018/1972 of the European Parliament and of the Council, 2018); and the Audiovisual Media Services Directive (Directive (EU) 2018/1808 of the European Parliament and of the Council, 2018).

In addition to these initiatives, which have a direct impact on Member States' regulations and legislation, the EU is also focusing on operational and practical aspects: (i) establishing rules that make access to shared-management funds conditional upon compliance with accessibility requirements; (ii) incorporating, into public procurement schemes, the obligation to procure accessible goods, services and infrastructure; and (iii) encouraging Member States to incorporate accessibility funding into the Recovery and Resilience Plans ("RRPs") (European Commission, 2021, p. 4). In Portugal, this aspect was implemented through the "Acessibilidades 360" Programme, which forms part of the RRP. Although this is a significant initiative aligned with the promotion of accessibility, its implementation has revealed structural constraints, namely a heavy reliance on the technical and administrative capacity of local authorities, territorial inequalities in access to funding, and increased difficulties faced by smaller municipalities in preparing, formalising and implementing applications (Ferreira, 2025; Maia, 2025; O Mirante, 2025).

From the perspective of the CRPD, it is important to emphasise that accessibility, under Article 9, is not merely a technical or infrastructural issue, but a legal requirement to ensure equal opportunities. In accordance with the clarification provided by General Comment No. 2 of the Committee on the Rights of Persons with Disabilities and Article 5 of the CRPD, as previously outlined, the absence or inadequacy of accessibility measures may thus constitute direct or indirect discrimination, insofar as it prevents or limits the exercise of rights on an equal footing.

In this context, the absence of monitoring mechanisms structured in accordance with the human rights model of disability was also noted, namely indicators designed to assess the impact of measures on the realisation of rights, formal mechanisms for the participation of Persons with disabilities and their representative organisations in the evaluation of the Programme, and a systematic verification of the compliance of interventions with the CRPD. The absence of these instruments makes it difficult to assess the Programme's effective contribution to the realisation of substantive equality.

Furthermore, the **Programme has predominantly adopted an approach centred on the physical and architectural dimensions of accessibility, whilst other dimensions equally covered by Article 9 of the Convention — namely accessibility to information and communication, to services and to participation — remain less developed, which limits the understanding of accessibility as a cross-cutting and structuring principle of substantive equality.**

Finally, it is worth highlighting the initiative proposed by the European Strategy on the Rights of Persons with Disabilities (2021–2030) to establish the European AccessibleEU Resource Centre (European Commission, 2021, p. 5). This Centre, established in 2022 under the Disability Platform, aims to strengthen the coherence of accessibility policies and facilitate access to and the sharing of good practices and relevant knowledge in the fields of accessibility. This Centre, which involves experts and professionals from all fields of accessibility, also monitors the action and progress of each Member State in implementing accessibility legislation and standards[6] (AccessibleEU, n.d.). This framework comprises a set of indicators covering areas such as the built environment, transport, information and communication technologies, and public policies, enabling the assessment of institutional commitments, implementation efforts and the impact of measures on the lives of persons with disabilities (AccessibleEU – European Accessibility Resource Centre, 2024b).

In the case of Portugal, the data highlight the existence of a legislative and strategic framework on accessibility, as well as the inclusion of accessibility objectives in the ENIPD 2021–2025 and the participation of representative organisations in monitoring its implementation. However, the report also identifies limitations in implementation, namely a lack of systematic information on alignment with European standards, weaknesses in structured audit and monitoring mechanisms in the built environment, transport and information and communication technology sectors, as well as gaps in the availability of public data on the results and impact of accessibility policies. These limitations highlight the need to strengthen monitoring systems based on human rights indicators, capable of assessing not only normative commitments but also the effective implementation and impact of measures on the lives of persons with disabilities (AccessibleEU – European Accessibility Resource Centre, 2024a).

[6] In this regard, note the report on Portugal for the year 2024, which, using structural, progress and outcome indicators, assessed implementation and development across nine topics: 1) legislation, policy framework and standards; 2) alignment with European standards; 3) strategic plans; 4) audits; 5) complaints; 6) training; 7) public awareness; 8) incentives; and 9) situation on the ground (AcessibleEU – European Accessibility Resource Centre, 2024a, 2024b).

Under the provisions of Article 9(d) of the Constitution of the Portuguese Republic (hereinafter "CRP"), it is the responsibility of the State to promote the well-being and quality of life of all people and genuine equality among Portuguese citizens, as well as the realisation of economic, social, cultural and environmental rights, through the transformation and modernisation of economic and social structures. In addition to this article, Article 71(2) of the CRP further stipulates that the State is obliged to implement a "national policy of prevention, treatment, rehabilitation and integration" for citizens with disabilities, assuming, in particular, responsibility for the effective realisation of their rights.

Law No. 38/2004 of 18 August sets out the general framework for the legal regime governing the prevention, habilitation, rehabilitation and participation of Persons with disabilities. Two objectives of this law relate to promoting access to support services and fostering a society for all "through the removal of barriers" and the adoption of measures aimed at the full participation of Persons with disabilities (Law No. 38/2004 of 18 August 2004, Article 3, subpara.s c) and d)).

Accessibility is also linked to the legal framework on non-discrimination on grounds of disability, enshrined in Law No. 46/2006 of 28 August, which prohibits discriminatory practices in access to goods and services, including public services, and classifies the refusal to provide reasonable accommodation as a form of discrimination. This framework reinforces accessibility as a condition for equality and the effective exercise of rights.

Within the scope of this law, IDiPD, I.P. recorded 257 complaints of discrimination in 2024, of which 75.61% were on the grounds of disability, focusing mainly on the refusal or restriction of access to public transport (31.71%), access to the built environment (25.21%) and the refusal to provide or allow the use of goods and services (11.38%), which highlights the persistence of structural barriers to the exercise of rights on an equal footing. Among the complaints handled directly by IDiPD, I.P., 35 were directed against public bodies and 42 against private entities, confirming the cross-cutting nature of non-discrimination and accessibility obligations. In procedural terms, it is noted that 40.24% of cases remained pending and only 0.82% resulted in a conviction, which highlights limitations in the effectiveness of the sanctions system and reinforces the importance of ensuring accessible and effective complaint mechanisms (IDiPD, I.P., 2025; INR, I.P., 2024a).

In this context, the complaints mechanism is an essential tool for protection against discriminatory practices. However, challenges remain in terms of universal accessibility, not least because it involves an electronic complaint form available exclusively online on the website of IDiPD, I.P., which provides an adapted version for deaf people (created by the Portuguese Federation of Associations of the Deaf – "FPAS"), but which does not yet constitute a universally accessible resource, particularly for people with other support needs (*e.g.* intellectual and psychosocial disabilities), difficulties in accessing digital media or a lack of technological access. Furthermore, the limited public

dissemination of the complaint form may contribute to its under-use, not necessarily reflecting the actual number of instances of discrimination.

Therefore, this circumstance must be analysed in accordance with Articles 5, 9 and 13 of the CRPD. Article 5 enshrines the principle of equality and non-discrimination, requiring not merely formal equality, but substantive equality, that is, the removal of barriers which, in practice, prevent the exercise of rights on an equal footing. The lack of accessibility or the restriction to a single channel for filing complaints may constitute a form of indirect discrimination, insofar as it has a disproportionate effect on persons with disabilities, restricting their access to protection against discriminatory practices. Article 9 requires the removal of barriers to access to information, communication and services, including administrative mechanisms, while Article 13 requires that persons with disabilities have effective access to justice and redress mechanisms, through accessible procedures and the provision of reasonable accommodation.

Restricting access to the complaint form to a single digital channel, without guaranteeing fully accessible alternative formats and without systematic strategies for public dissemination in clear and accessible language, may undermine the effectiveness of the right to administrative redress and protection against discrimination. The implementation of Law No. 46/2006 thus requires the formal existence of a complaints mechanism, its material accessibility, the provision of multiple accessible channels for lodging complaints, and the adoption of active information measures aimed at Persons with disabilities and their representative organisations, as a condition for ensuring substantive equality in access to legal protection.

Observations, recommendations and developments

In its 2016 concluding observations issued to Portugal, the Committee addresses this matter in para.s 21, 22 and 23. In these observations, in addition to expressing concern about the delay in revising the Accessibility Law (which had been under review for four years at the time), it also expressed concern about the delay in launching the second phase of implementation of the 2011–2015 National Plan for the Promotion of Accessibility, and highlighted how the legislation (at the time) recently adopted provided for an exemption from compliance with accessibility standards. In this regard, it also pointed out that the legislation did not distinguish between the body responsible for licensing and the body responsible for monitoring, and that there were virtually no penalties for non-compliance with accessibility standards.

That said, the recommendations called on the State to observe SDG targets 11.2 and 11.7 and to take effective measures, in "close consultation with organisations representing Persons with disabilities", to ensure that the Accessibility Law was swiftly amended in accordance with the provisions of the CRPD, providing for "effective and accessible complaint and enforcement mechanisms" (Committee on the Rights of

Persons with Disabilities, 2016, paras. 21–23).

The Me-CDPD considers that several of the concerns and recommendations made by the Committee in 2016 remain relevant today, particularly with regard to monitoring compliance with accessibility standards, holding non-compliant entities to account, and the effective removal of barriers in the built environment, transport, information and services. The lack of a subsequent review of these recommendations has contributed to their partial or insufficient implementation.

The Accessibility Law referred to above is Decree-Law No. 163/2006 of 8 August, which established the accessibility regime for buildings and establishments open to the public, public thoroughfares and residential buildings. Although this law was amended in 2014[7], Decree-Law No. 125/2017 of 4 October was responsible for the first significant amendments to the regime. Thus, ten years after the regime's approval, and with a view to regulating adaptations to existing buildings, Decree-Law No. 125/2017 of 4 October was approved, which clarified the powers regarding the inspection and investigation of administrative offences (for non-compliance with accessibility legislation) and established the Commission for the Promotion of Accessibility ("CPA") and the technical teams for the promotion of accessibility. The CPA was established with the aim of assessing the current state of accessibility in the buildings, facilities and spaces of central and local government and public institutions (Decree-Law No. 125/2017 of 4 October 2017, Article 3(1)). The technical teams, meanwhile, were responsible for carrying out the necessary actions to comply with the technical accessibility standards [8] under the accessibility regime for built heritage (Decree-Law No. 125/2017 of 4 October 2017, Article 4). The weakness of enforcement mechanisms and the sporadic application of sanctions continue to constitute one of the main obstacles to the implementation of Article 9, and this aspect should be referred to as a structural issue.

In 2019, a further Decree-Law was approved, amending for the third time the accessibility regime for public spaces, community facilities, and public and residential buildings (Decree-Law No. 95/2019, of 18 July 2019). This legislation then established the regime applicable to the refurbishment of buildings or self-contained units, provided that these are intended to be wholly or predominantly used for residential purposes[9] (Decree-Law No. 95/2019, of 18 July, Article 1, paras. 1–2).

However, in 2020, through Council of Ministers Resolution No. 4/2020, the Task Force for the Promotion of Accessibility ("EMPA") was established to replace the CPA. The EMPA, whose mandate is due to expire on 31 December 2026, has several objectives, namely: to collaborate in the implementation of technical accessibility standards, to provide training to technicians who form part of technical teams promoting

[7] This was a specific amendment to Article 3 of Decree-Law No. 163/2006 of 8 August, introduced by Decree-Law No. 136/2014 of 9 September, as a result of changes that this decree-law made to the RJUE (Legal Framework for Urban Planning and Construction).

[8] To ensure better application of technical standards and to facilitate the legal interpretation of the various legislative instruments in this area, a "Guide to Accessibility and Mobility for All" was produced (National Secretariat for the Rehabilitation and Integration of Persons with disabilities, 2006).

[9] This Decree-Law was further elaborated by Order No. 301/2019 of 12 September, regarding the definition of the design method for improving accessibility for people with reduced mobility in existing residential buildings.

accessibility, to make recommendations to municipalities with a view to adapting spaces, facilities and buildings, to collaborate in the assessment and monitoring activities under the responsibility of the IDiPD, I. P. (formerly INR, I.P.), as well as providing support to a range of bodies and institutes in the context of inspections of central and local government facilities and surrounding areas, among other matters (Council of Ministers Resolution No. 4/2020, amended by Council of Ministers Resolution No. 12-A/2023, 2020, Number 2). On 24 February 2026, with the publication of Decree-Law No. 60/2026, EMPA was dissolved, and the IDiPD, I.P. assumed its responsibilities (Decree-Law No. 60/2026 of 24 February 2026, Article 1(b)).

Finally, in 2024, the accessibility regime was amended once again by Decree-Law No. 10/2024 of 8 January, which reforms and simplifies licensing procedures in the fields of urban planning, spatial planning and industry.

In August of that same year, in light of "new material and technological solutions better suited to ensuring accessibility", a Working Group was set up with the aim of presenting a proposal to revise Decree-Law No. 163/2006 of 8 August (Order No. 9463/2025, 2024). A Working Group with this objective had already been established by a previous Order (Order No. 10752-A/2023), but the previous government's departure from office made it impossible to continue the work, and new appointments had to be made "in line with the structure of the current government" (Order No. 9463/2025, 2024, para. 6). In 2025, the mandate of this Working Group was extended until 31 December 2025 (Order No. 9463/2025, 2025). To date, no proposals to amend the accessibility regime have been published.

For Me-CDPD, the successive establishment of working groups, without public disclosure of results or concrete legislative proposals, reveals persistent difficulties in fulfilling the State's obligations regarding accessibility, despite the time that has elapsed since the adoption of the CRPD and the recommendations made by the Committee in 2016.

The promotion of physical and digital accessibility is one of the key areas with specific initiatives and measures under the ENIPD 2021–2025. The ENIPD 2021–2025 frames the central role of accessibility as one of the guiding principles derived from European strategic documents and "as a prerequisite for participation in society and the economy" (ENIPD 2021–2025, 2021, p. 9). It therefore emphasises the need to optimise the accessibility of built environments, transport and information and communication technologies (ICT), to ensure accessibility to goods and services, including public services, and to support devices, and to promote the inclusion of the themes of 'accessibility' and 'universal design'[10] in academic curricula (ENIPD 2021–2025, 2021, p. 9).

These objectives are ultimately translated into General and Specific Objectives and measures/actions in the ENIPD 2021–2025. Firstly, General Objective 1, which consists

[10] The notion of "universal design" is a central concept within the scope of this article of the CRPD and is defined in Article 2 of the CRPD as "the design of products, environments, programmes and services to be used by all people, to the greatest extent possible, without the need for adaptation or specialised design." This should not exclude assistive devices for specific groups of Persons with disabilities where necessary.

of “promoting accessible and resilient physical, information and communication environments”, and is broken down into four specific objectives and various measures/ actions: promoting accessibility to the built environment (1.1.), public transport and passenger transport systems as a factor in mobility (1.2.), to information and communication (1.3.) and to conditions of accessible communication to public services (1.4). But also Specific Objective 2.1: “to promote teaching, research, dissemination and scientific sharing in the areas of disability, inclusion and rehabilitation”, which includes several specific measures, such as the creation of higher education courses in rehabilitation engineering (2.1.1), the introduction of “universal design” content (2.1.2), accessibility in the field of ICT (2.1.4), and human rehabilitation and accessibility engineering in academic curricula (2.1.5).

With regard to the implementation of these measures, the AcessibleEU report identified “some undergraduate and postgraduate courses on accessibility in higher education in the built environment, transport, ICT and public policy sectors”, highlighting, among others, the course on Accessibility and Universal Design at the University of Minho (AcessibleEU - European Accessibility Resource Centre, 2024b, p. 2).

In summary, **although Portugal has a comprehensive regulatory and strategic framework on accessibility, the Me-CDPD considers that there remains a significant discrepancy between this framework and its practical application. Accessibility is still not ensured, in a systemic and cross-cutting manner, as a prerequisite for the exercise of human rights by Persons with disabilities, as required by Article 9 of the CRPD and General Comment No. 2 of the Committee.**

Electronic communications and digital services

As outlined above, accessibility encompasses various dimensions, including accessibility to information and communication and digital accessibility. Under Article 21 of the CRPD, States Parties have a duty to take appropriate measures to ensure that Persons with disabilities can exercise their right to freedom of expression and opinion, and access to information.

As also outlined, the EU has made legislative efforts in the field of accessibility, one of the initiatives being the adoption of Directive (EU) 2018/1972, which established the European Electronic Communications Code. In 2022, this Directive was transposed into national law through the Electronic Communications Act (Law No. 16/2022 of 16 August 2022, Article 1, para. 1(c)).

Another initiative adopted at EU level in this area was the Web Accessibility Directive (Directive (EU) 2016/2102 of the European Parliament and of the Council, 2016), which has since been transposed by Decree-Law No. 83/2018 of 19 October, which establishes the accessibility requirements for websites and mobile applications of public bodies; and Regulation (EU) 2022/2065 of the European Parliament and of the Council of 19 October 2022 on a single market for digital services.

Action by the Me-CDPD

The Me-CDPD has issued two statements on the subject of accessibility to information and communication. The first was Opinion No. 1/Me-CDPD/2021, regarding Draft Law No. 83/XIV/2 (Government), which approves the Electronic Communications Law, which ultimately lapsed; and later, through Opinion No. 1/Me-CDPD/2022, regarding Draft Law No. 6/XV/1, which enacted the Electronic Communications Law, which ultimately gave rise to Law No. 16/2022 of 16 August.

However, the second opinion (Me-CDPD, 2022a) ultimately stated only that the position set out in the 2021 opinion was maintained, reiterating the need for States Parties, in accordance with Article 4(3) of the CRPD, to actively involve persons with disabilities, through their representative organisations, in the development and implementation of legislation and policies relating to persons with disabilities. In particular, it was argued that this consultation should have been carried out not only by the Assembly of the Republic, within the scope of its legislative powers, but also as an obligation that should have been included in the draft law itself (Me-CDPD, 2022a, para. 4).

The content of the bill that gave rise to Law No. 16/2022 of 16 August was identical to the previous bill that had lapsed and on which the Me-CDPD had already issued an opinion. In this regard, the following key recommendations may be highlighted: respect for universal accessibility on an equal basis with others; in particular, the Me-CDPD suggested that the wording of Article 115(1) concerning "equivalent access and choice for end-users with disabilities" should be amended to state that users with disabilities "have access at the same time as other end-users", rather than as originally stated and ultimately approved in Law No. 16/2022 of 16 August: "have access to electronic communications services (...) on terms equivalent to those available to the majority of end-users" (Me-CDPD, 2021a, paras. 5, 6). Alongside this amendment, the Me-CDPD recommended the clarification of undefined legal concepts ("affordable prices", "equivalent choice and access"), and the setting of deadlines (even if indicative) for the achievement of the established objectives (Me-CDPD, 2021a, para. 12). However, once again, the recommendation was not followed.

As regards the issue of **digital accessibility,** as was the case with Law No. 16/2022 of 16 August, **the Me-CDPD also issued an opinion on a draft law** which, in the meantime, has lapsed and which implement to transpose Regulation (EU) 2022/2065 into national level (Draft Law No. 32/XVI/1)

Thus, in **Opinion No. 2/Me-CDPD/2024 of 18 December 2024,** regarding Draft Law No. 32/XVI/1, the Me-CDPD draws attention to the need for the proposal to align with various articles of the CRPD, in particular Articles 9, 4, 13, 21, 31 and 33. Specifically, with regard to accessibility, **it was recommended that clauses be added which "require service providers and regulatory authorities to adopt assistive technologies and accessible formats for all Persons with disabilities in all interactions relating to notifications, communications, digital services and electronic processing systems compatible with assistive technologies; and follow the standards established by the Web Content Accessibility Guidelines"** (Me-CDPD, 2024a, p. 11).

Following its expiry, **Bill No. 25/XVII/1 was tabled, with the same objective and wording,** and it remains under consideration and in the legislative drafting process. With regard to the latter, **to date, no opinion has been requested from the Me-CDPD.**

Support Products Allocation System (hereinafter "SAPA")

Another issue falling within the scope of Article 9 of the CRPD is SAPA. This issue engages other relevant provisions within the scope of the CRPD, namely Article 5 (Equality and non-discrimination), Article 19 (Right to live independently and be included in the community) and Article 28 (Adequate standard of living and social protection).

Decree-Law No. 93/2009 of 16 April approved the SAPA scheme for persons with disabilities and persons with temporary incapacity, establishing the legal framework for the provision of equipment, devices and technologies designed to compensate for functional limitations and promote autonomy. This scheme[11] was subsequently expanded by various regulatory instruments, notably Order No. 7197/2016 of 1 June, which approved the list of assistive products, in compliance with the provisions of Article 10 of the aforementioned Decree-Law. The SAPA thus constitutes a key instrument for accessibility and the realisation of equality in practice, insofar as the adequate and timely provision of assistive products is a prerequisite for the effective exercise of rights, in line with Article 5 of the CRPD (Equality and non-discrimination). It also contributes to the removal of barriers to access to the environment, information and services, as provided for in Article 9, and to the promotion of personal mobility and functional autonomy, in accordance with Article 20 (Personal mobility). Furthermore, the provision of assistive products forms part of the habilitation and rehabilitation measures set out in Article 26 of the Convention (Habilitation and rehabilitation). Finally, the absence, insufficiency or delay in their provision constitutes a material barrier to the exercise of rights on an equal basis.

In 2024, the Ombudsman's Office produced a report on the SAPA in which it identified several weaknesses and recommended a thorough review of the system (Ombudsman, 2024). Describing the system as "fragmented, complex and inconsistent" (2024, p. 19), the Ombudsman identified structural weaknesses ranging from the difficulty users face in gathering and accessing information about SAPA; to the lack of coordination between entities; to the absence of annual reviews of the approved list of products (provided for in Order No. 7197/2016 of 1 June) and the corresponding simplification of product selection; the complexity and slowness of the entire process; and the insufficient funding to meet all requests for the allocation of support products

[11] Amongst others, note Ministerial Order No. 192/2014 of 26 September, which regulates the creation and maintenance of the SAPA registration database, as well as the processing of information regarding the referral, prescription, allocation, co-payment and reuse of assistive products for persons with disabilities or impairments; Ordinance No. 78/2015, of 17 March, which approves the template for the prescription form for assistive products, within the framework of the SAPA; Order No. 5291/2015, of 21 May, which established the national network of ICT Resource Centres for Special Education as prescribing centres for assistive products of the Ministry of Education and Science under the SAPA Programme, their remit, constitution and team responsibilities, as well as the responsibility for monitoring the activities of these Centres.

that have been submitted and approved (Ombudsman, 2024).

Of the 18 recommendations made regarding the improvement of the current SAPA, the Ombudsman's three recommendations concerning the need to review the SAPA stand out:

1. "Extensively review the current SAPA to streamline and simplify the procedure, ensure proximity to citizens, guarantee the extension of its effective application and the timely provision of products.
2. As part of the review, establish a single point of contact for citizens requiring support products, strengthening communication between the public bodies involved.
3. Create public banks for the reuse of funded support products, with national coverage and encompassing maintenance and repair activities." (Ombudsman, 2024, p. 93).

In 2020, a Working Group was established with the aim of "presenting proposals for the improvement and simplification of the processes and procedures for prescribing and financing assistive devices, within the framework of SAPA" (Order No. 2244/2020, 2020, para. 1(a)). Similarly, the ENIPD 2021–2025 included the measure/action of "evaluation of the SAPA" (EE6-1.5.1.), with the following indicators: to draw up an "evaluation report with proposals for improving and amending the system, following consultation with the Public Prosecutor's Office" and a "proposal to amend legislation" (ENIPD 2021–2025, 2021, pp. 57–58).

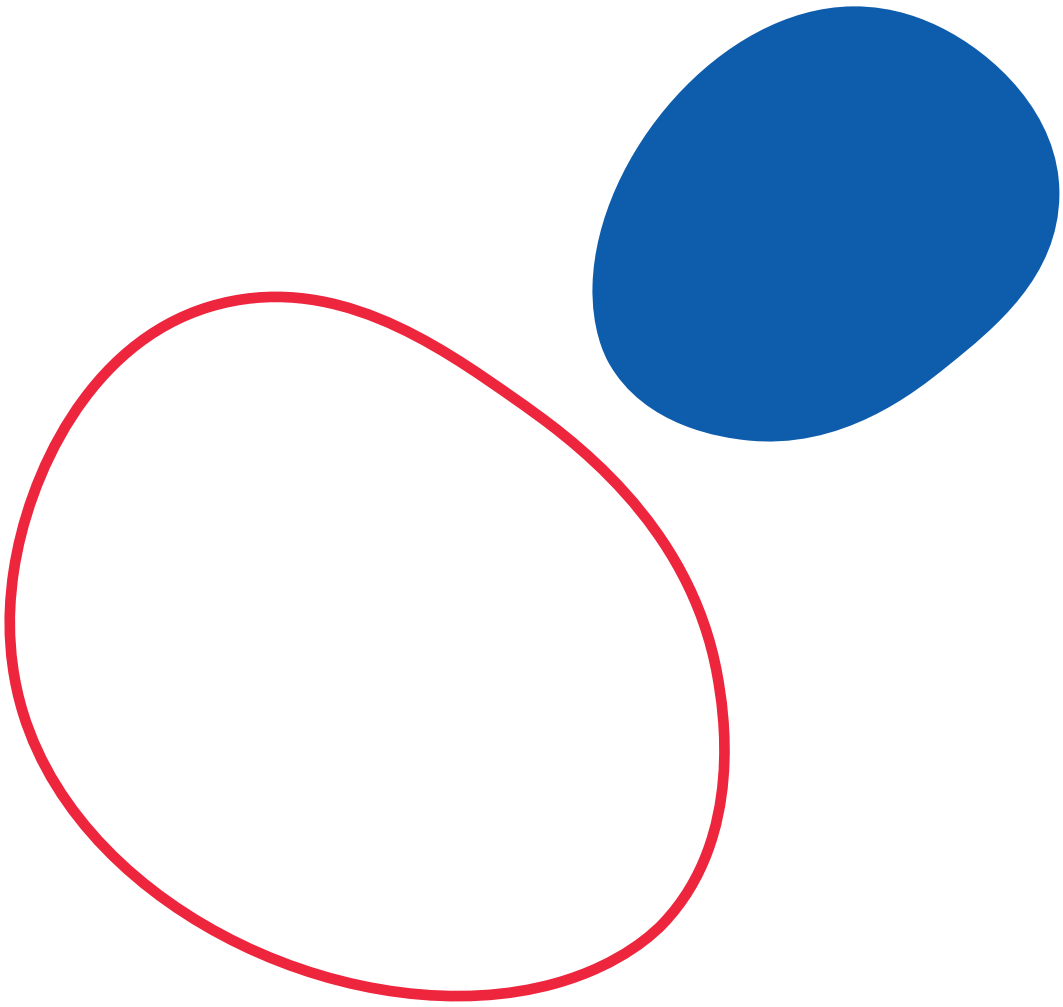
In the December 2024 report, the Ombudsman noted that, to date, the Working Group's findings had not been made public (Ombudsman, 2024, p. 32). The implementation report on the ENIPD 2021–2025, covering the implementation of measures up to 31 December 2024, stated in this regard that "the report drawn up by the working group established for this purpose is awaiting validation by the competent authority." (INR, I.P., 2025a, p. 235). Regarding the proposed legislative amendment, the measure was considered 25% implemented as of 31 December 2024 due to the "drafting of a proposal for a legislative amendment in the report prepared by the appointed Working Group" (INR, I.P., 2025a, p. 237).

Action by the Me-CDPD

To date, and in relation to this issue, the **Me-CDPD has issued a single statement, within the scope of its remit and powers, regarding a proposed amendment to Decree-Law No. 93/2009, which establishes the SAPA for persons with disabilities and persons with temporary incapacity,** submitted by SEASI (Opinion No. 01/Me-CDPD/2025).

Without prejudice to a careful reading of **Opinion No. 01/Me-CDPD/2025,** in this document **the Me-CDPD emphasised the need to revise the proposed amendment to Decree-Law No. 93/2009 of 16 April, to ensure compliance with the CRPD, in particular regarding accessibility, equality and non-discrimination for Persons**

with disabilities, and the "inclusion of explicit guarantees ensuring respect for the Rights of Persons with Disabilities and temporary incapacity in accessing the SAPA" (Me-CDPD, 2025d, p. 15). Recommendations were therefore made, such as: the allocation of resources (human and financial); active consultation with persons with disabilities; cross-cutting training and information for professionals and persons with disabilities regarding the SAPA; effective monitoring and ensuring accessibility (Me-CDPD, 2025d, p. 18).



Analytical Summary

Article 9 enshrines accessibility as a legal prerequisite and cross-cutting condition for independent living, full participation and the effective exercise of rights on an equal basis with others, requiring the State to take concrete measures to identify and remove barriers in the built environment, transport, information, communication and services, whether public or private. According to General Comment No. 2 (2014), accessibility cannot be treated as a purely technical matter: its absence or inadequacy may constitute indirect discrimination and undermine substantive equality, and must be ensured through minimum standards, effective monitoring, proportionate sanctions and accessible complaint mechanisms.

Although Portugal has a comprehensive regulatory and strategic framework, including successive amendments to the accessibility regime, measures in the ENIPD 2021–2025 and initiatives such as the "Acessibilidades 360" programme, there remains a discrepancy between formal commitments and actual implementation, evidenced by the weakness of inspection and accountability mechanisms, the irregular and territorially asymmetrical implementation of funded programmes, and the lack of structured monitoring and evaluation systems focused on results and impact in the area of rights. The successive establishment of working groups without public outcomes or concrete legislative proposals reinforces, in the view of the Me-CDPD, the need for more timely and transparent governance geared towards effective action.

In the digital and electronic communications sector, gaps persist in regulatory consolidation and in the requirement for accessibility "on an equal basis with others", as well as in the structured participation of Persons with disabilities and their representative organisations in the legislative process, in line with Article 4(3) of the CRPD. Furthermore, the effectiveness of the non-discrimination regime (Law No. 46/2006) is limited by barriers to access and a lack of awareness of the mechanisms for complaints, as well as by the limited scope of sanctions, which undermines administrative oversight and protection against discriminatory practices.

Finally, regarding SAPA, the structural weaknesses identified by independent bodies and by the implementation reports themselves (which highlight issues such as complexity, delays, insufficient funding, poor coordination and a lack of transparency regarding reforms) confirm that accessibility also depends on operational support mechanisms and adequate resources. In this context, the Me-CDPD reaffirms that full compliance with Article 9 requires an integrated and binding approach, through the strengthening of oversight and sanctions, regulatory review with deadlines and targets, multi-channel and universally accessible complaint mechanisms, effective participation of organisations of persons with disabilities, and monitoring systems based on human rights indicators that allow for the public assessment of the implementation and real impact of accessibility policies.

Summary Table

Accessibility

A precondition for the exercise of rights (Article 9 of the CRPD)

Universal Accessibility

Accessibility constitutes the foundation for the full and effective participation of Persons with disabilities in all areas of life.

According to General Comment No. 2 (2014) of the CRPD Committee:

- Accessibility is a cross-cutting obligation of the State, and its absence constitutes a form of indirect discrimination.
- It must encompass the removal of barriers in the physical environment, transport, information, communication and services, whether provided by public or private entities.

Current Situation

Portugal has established a comprehensive legal and policy framework in the field of accessibility, including:

- Progress achieved: General accessibility regime; digital accessibility framework; EMPA (now integrated into IDiPD, I.P.).
- the “Acessibilidades 360” programme; and strategic instruments such as ENIPD.
- Remaining gaps: Weak enforcement mechanisms (insufficient inspection and limited accountability); regional disparities in implementation; and lack of transparency and accountability regarding the work of existing working groups and legislative progress.

Identified Issues

- Gap between law and practice: Persistent non-compliance with accessibility legislation and lack of effective enforcement.
- Narrow conceptualisation of accessibility: Often treated as a technical requirement rather than a structural principle of public policy.
- Lack of a systemic approach: Fragmented and inconsistent solutions.
- Digital accessibility shortcomings: Non-compliance with legal standards and absence of consistent monitoring.

Identified Issues

- Assistive Products Provision System (SAPA): Excessive bureaucratic complexity, delays, insufficient coordination and inadequate funding.
- Lack of participation: Failure to comply with Article 4(3) of the CRPD (obligation to consult organisations of Persons with disabilities in legislative processes).
- Ineffectiveness of anti-discrimination mechanisms (Law No. 46/2006): Limited impact due to lack of awareness of reporting channels, accessibility barriers and insufficient sanctions.

Recommendations of the Me-CDPD

The Me-CDPD considers that a binding and integrated approach is essential, with a focus on:

- Strengthening enforcement mechanisms and sanctioning frameworks.
- Integrating universal accessibility as a mandatory and cross-cutting requirement in public policies.
- Ensuring effective implementation of existing legislation.
- Developing a monitoring system based on human rights indicators.
- Securing adequate and sustainable funding for public policies, with measurable impact on the daily lives of Persons with disabilities.
- Promoting technical capacity-building among public and private stakeholders on universal accessibility.
- Ensuring the availability and dissemination of accessible reporting and complaint mechanisms.

Activities of the Me-CDPD

The Me-CDPD has consistently addressed accessibility as a cross-cutting priority in its work, through opinions, recommendations and the monitoring of public policies.

Accessibility is recognised as a precondition for the exercise of rights, and its absence constitutes a form of discrimination.

Article 12
Equal recognition before the law

1. States Parties reaffirm that persons with disabilities have the right to recognition everywhere as persons before the law.

2. States Parties shall recognize that persons with disabilities enjoy legal capacity on an equal basis with others in all aspects of life.

3. States Parties shall take appropriate measures to provide access by persons with disabilities to the support they may require in exercising their legal capacity.

4. States Parties shall ensure that all measures that relate to the exercise of legal capacity provide for appropriate and effective safeguards to prevent abuse in accordance with international human rights law. Such safeguards shall ensure that measures relating to the exercise of legal capacity respect the rights, will and preferences of the person, are free of conflict of interest and undue influence, are proportional and tailored to the person's circumstances, apply for the shortest time possible and are subject to regular review by a competent, independent and impartial authority or judicial body. The safeguards shall be proportional to the degree to which such measures affect the person's rights and interests.

5. Subject to the provisions of this article, States Parties shall take all appropriate and effective measures to ensure the equal right of persons with disabilities to own or inherit property, to control their own financial affairs and to have equal access to bank loans, mortgages and other forms of financial credit, and shall ensure that persons with disabilities are not arbitrarily deprived of their property.

Article 12
Equal recognition before the law

General Framework

This article unequivocally states that **Persons with disabilities have the right to have both their legal personality and their legal capacity recognised, placing on States Parties the duty and responsibility to ensure the exercise of that capacity on an equal basis with others** (Me-CDPD, 2017f, para. 9). Thus, disability or alleged incapacity cannot constitute grounds for denying or restricting the legal capacity of Persons with disabilities, on an equal footing with others (General Comment No. 1 (2014) on Article 12: Equal recognition before the law, para. 9). In this regard, General Comment No. 1, adopted on 19 May 2014 by the Committee, clarifies two distinct concepts: 'legal capacity' and 'mental capacity'. Legal capacity refers to a person's ability to hold rights and duties and to exercise them on an equal basis with others. Mental capacity, in turn, concerns a person's cognitive and psychosocial abilities, which may vary over time and depending on the context; it does not constitute a legal concept nor a legitimate criterion for restricting legal capacity (General Comment No. 1 (2014), Equal recognition before the law, 2014, para. 13).

According to the Committee, the use of mental capacity as a criterion for restricting or denying legal capacity, through an undue conflation of the two concepts, constitutes a discriminatory approach towards Persons with disabilities. Article 2 of the CRPD defines discrimination on the basis of disability as "any distinction, exclusion or restriction on the basis of disability which has the purpose or effect of impairing or nullifying the recognition, enjoyment or exercise, on an equal basis with others, of all human rights and fundamental freedoms in the political, economic, cultural, civil or any other field (...) including the denial of reasonable accommodation". In light of this definition and Article 5 of the CRPD (Equality and non-discrimination), States are thus obliged to provide appropriate measures to ensure the necessary support for the exercise of legal capacity, while respecting the rights, will and preferences of Persons with disabilities; such support must not amount to a substitution in decision-making (General Comment No. 1 (2014), Equal recognition before the law, 2014, para. 17). In this regard, States Parties must abolish systems that permit substitute decision-making and promote alternatives to support the decision-making of persons with disabilities, replacing the paradigm of acting in the "best interests" with that of the "will and preferences" of Persons with disabilities (General Comment No. 1 2014), Equal recognition before the law, 2014, para. 21, 27-28). Naturally, support must respond to the individual support needs of persons with disabilities, and may vary in form and intensity, and be formal or informal (Me-CDPD, 2017f, para. 14).

Article 26(1) of the CRP establishes that everyone is recognised as having the rights to personal identity, the development of personality, legal capacity, citizenship, good

name and reputation, image, freedom of expression, the privacy of private and family life, and legal protection against all forms of discrimination. This article is supplemented by the principle of equality (Article 13 of the CRP).

According to the Civil Code, legal personality is acquired at the moment of full and live birth (Article 66) and ceases upon death (Article 68). Article 67 of the Civil Code provides that persons may be "subject to any legal relationship, unless otherwise provided by law: this constitutes their legal capacity."

Observations, recommendations and developments

In points 28 and 29 of its Concluding Observations (2016) to the Portuguese State, the Committee expressed "deep concern" that "a large number of Persons with disabilities are subject to full or partial guardianship and are consequently deprived of rights such as the right to vote, marry, start a family or manage assets and property". Furthermore, the Committee expressed concern regarding the revision of the Civil Code, which at the time continued to provide for restrictions on the legal capacity of Persons with disabilities. For this reason, it recommended that Portugal i) take appropriate measures to ensure that all persons deprived of their legal capacity can exercise their civil, political and social rights; ii) repeal the regimes of full and partial guardianship; and iii) develop supported decision-making systems in accordance with Article 12 of the CRPD.

Legal Regime for Adults under Support

On 14 August 2018, Law No. 49/2018 was adopted, establishing the legal regime for accompanied adults and abolishing the institutions of interdiction and incapacitation provided for in the Civil Code. This framework sought to provide a more appropriate, flexible and responsive solution than the previous institutions of interdiction and incapacitation. Guided by "principles of necessity, subsidiarity and proportionality", the flexibility of the framework aimed to "tailor protective intervention to the specific needs of each adult" (Public Prosecutor's Office, 2023, p. 3). In principle, the adoption of this regime would mark a "genuine paradigm shift", moving away from a concept of "strict incapacity" towards support measures designed to ensure the person's "well-being, recovery, the full exercise of all their rights and the fulfilment of their duties, subject to legal exceptions or those determined by a court ruling" (Article 140(1) of the Civil Code) (2023, p. 4).

Within the ENIPD 2021–2025, under Priority Area 1 "Citizenship, equality and non-discrimination", with regard to General Objective 1: "To ensure the participation of Persons with disabilities on an equal basis with others", Measure/Action 1.2.1. is included, which concerns "Supporting the implementation of the supported decision-making regime (Law No. 49/2018 of 14 August), through the development of a Support Manual and training initiatives for specific audiences" (ENIPD 2021–2025, 2021, p. 20).

This guide[12] was made available in 2021 (INR, I.P., 2025a, p. 18).

Action by the Me-CDPD

During the drafting and approval of the legal framework for accompanied adults (Law No. 49/2018 of 14 August), the Me-CDPD was invited, within the scope of its remit and powers, to issue **an opinion on the Government's Draft Law No. 100/XIII/3, which resulted in Law No. 49/2018** of 14 August – Opinion No. 1/Me-CDPD/2018 (Me-CDPD, 2018e).

This opinion[13] identified a number of concerns regarding the draft law, namely: i) the terminology used and the underlying prejudices (in particular, the use of concepts such as 'incapable', 'affection', 'physical and mental capacity'); ii) the retention of the protectionist model, to the detriment of the model of empowerment and recognition of rights enshrined in the CRPD; in particular, with regard to the exercise of rights, "a system of substitution" remained in practice (example: Article 145(2)(b), (c) and (d) of the Civil Code) and, as for the need to provide support for decision-making (support measures rather than substitution) and the exercise of rights, the law remained silent; and finally, iii) the maintenance of an approach centred on a medical and disability model, rather than a model of respect for human rights, adopting as a general principle the principle of the capacity of all persons (Me-CDPD, 2017f, paras. 8, 20, 2018e, pp. 5–17).

Given the contradictions between the draft law and the CRPD, Opinion No. 6/Me-CDPD/2017 recommended amending the wording of several articles of the draft law, justifying and substantiating this on an article-by-article basis (Me-CDPD, 2017f). However, as pointed out by the Me-CDPD in Follow-up No. 2/Me-CDPD/2018, it was found that "the vast majority of recommendations were not accepted" (Me-CDPD, 2018b, para. 2).

That said, **it remains the position of the Me-CDPD that the legal regime for accompanied adults under Guardianship does not comply with the provisions of the CRPD, nor does it "fail to promote the transition from a system that restricts the exercise of fundamental rights and legal capacity to a system of empowerment, which allows all persons to exercise their rights on an equal basis with others"** (Me-CDPD, 2018b, para. 2).

Two years after the entry into force of Regime Jurídico do Maior Acompanhado, the Attorney General's Office established a Working Group (by Order of 5

[12] In addition to the guide, available for consultation at https://justica.gov.pt/Guias/guia-do-maior-acompanhado, a handbook on the supervised adult regime was published by the Centre for Judicial Studies: "The Public Prosecutor's Office and the supervised adult regime" in March 2021 (INR, 2025a).

[13] The opinion on draft law no. 100/XIII/3, requested by the CACDLG, was based largely on the opinion previously drawn up regarding the same draft law submitted by the Minister of Justice on 27 October 2017 – Opinion No. 6/Me-CDPD/2017 (Me-CDPD, 2018e, paras. 1–2).

March 2021[14]), with a view to conducting an initial assessment of the application of this regime and to discussing and outlining best practices in this area. **The work of this Group resulted, amongst other actions undertaken, the approval of in(aimed at magistrates of the Public Prosecutor's Office) and a Manual of Good Practice[15] (Public Prosecutor's Office, 2023) a form[16] to request the intervention of the Public Prosecutor's Office for the application of support measures. This Manual states,** amongst other guidelines, **that "support measures subject to a representation regime must be requested on an exceptional basis, only when the capacity to exercise rights and fulfil duties personally, fully and consciously is seriously or completely compromised"; and that "where there is a minimum capacity for self-determination, preference should be given to support measures based on the authorisation of the support person, who assists the person receiving support in their decision-making"** (Public Prosecutor's Office, 2023, pp. 12 and 13). In the context of restricting the exercise of personal rights, in addition to highlighting its exceptional nature and the need for specific justification, **the Manual states that "restriction of the right to vote should not be required, and consideration should be given to appealing against support decisions that, in abstract terms, limit the exercise of the right to vote" (Public Prosecutor's Office, 2023, p. 13).**

Six years after this law came into force, and in view of the persistent challenges in implementing the Legal Framework for Accompanied Adults, the Public Prosecutor's Office, within the scope of its special powers and responsibilities regarding the defence of the interests and promotion of the rights of people in vulnerable situations, **approved the National Strategy for Adults with Vulnerabilities (2025).**

According to the Public Prosecutor's Office, these challenges have not only a significant impact on its activities but also inevitable repercussions for adults benefiting from support measures (2025, p. 2). In particular, **cross-cutting challenges across various jurisdictions are highlighted in areas such as the procedural participation of vulnerable persons, some of which involve cross-border situations requiring international judicial cooperation, and regarding the absence of operational procedures between competent bodies in the fields of social intervention and healthcare** (Public Prosecutor's Office, 2025, pp. 2–3). Regarding this latter challenge, **the Public Prosecutor's Office highlights the high number of cases reported to it for the purpose of applying support measures, relating to adults who, after being medically discharged, remain in hospitals due to a lack of social support** (2025, p. 3). That said, this Strategy proposes the implementation of a Strategic Action Plan between 2025 and 2027, based on three pillars of action – organisation,

[14] The aforementioned opinion can be consulted at https://www.ministeriopublico.pt/sites/default/files/anexos/despachos/desp_maior_acompanhado_5-03-2021.pdf.

[15] The "Good Practice Manual" can be consulted at https://www.ministeriopublico.pt/sites/default/files/2024-12/manual_de_boas_praticas_rjma_03_05_2023_final.pdf .

[16] The form for requesting intervention by the Public Prosecutor's Office is available at https://www.ministeriopublico.pt/sites/default/files/documentos/pdf/requerimento_formulario_m_acomp_17-09-2024.pdf .

training and cooperation – with a view to better safeguarding the human rights of vulnerable adults (Public Prosecutor's Office, 2025).

This Strategy sets out a number of measures aimed at improving the implementation of the system for supported adults, in accordance with the UN Convention on the Rights of Persons with Disabilities (CRPD). These include raising the issue with the Government minister responsible for justice regarding the need to establish or provide a public network of professionals who can perform the role of support worker impartially and independently (a step already taken by the Attorney General's Office in July 2025). To address this lack of impartial professionals capable of performing the role of support person, various local initiatives have been developed by the District Public Prosecutor's Offices; to date, protocols have been established in the districts of Porto, Vila Real and Coimbra for the creation of pools of guardians. These protocols have been concluded with local and local social services and, in the case of Vila Real, also with all the municipalities in the district. In implementing the protocols, these entities nominate, at the request of the Public Prosecutor's Office, suitable individuals, on a voluntary basis, to serve as companions. With a view to contributing to the performance of these duties with respect for the ethical obligations and rights of persons with disabilities, in forthcoming local initiatives (to be implemented in 2026), particularly in the district of Lisbon North, training is planned for the persons to be nominated as companions, in partnership with private social solidarity institutions (hereinafter 'IPSS') and IDiPD, I.P.

Regarding the challenges in implementing the Legal Framework for Supported Adults, in particular the procedural participation of people with vulnerabilities, **in 2026, the Me-CDPD issued, on its own initiative, Proposal No. 1/Me-CDPD/2026, concerning the assessment of legislation relating to Persons with disabilities in access to justice.**

Although this matter relates to Article 13 of the CRPD (Access to justice), it contains a relevant section concerning the Legal Framework for Supported Adults, in particular regarding the need for this framework to be reviewed and improved in certain respects (Me-CDPD, 2026g).

Without prejudice to a careful reading of **Proposal No. 1/Me-CDPD/2026, the Me-CDPD identifies the following problems:**

- In most decisions, and contrary to the provisions of the CRPD and the Committee's case law, the general representation regime, which should be exceptional in nature, continues to be applied more frequently than the special representation regime;
- The appointment of persons with management or administrative responsibilities in social support institutions or entities to the role of support worker, creating a

conflict of interest between their role as support worker for the person receiving support and their function as manager/administrator of the institution;

- The person chosen or nominated by the beneficiary of the support proves unsuitable for the role or is not in the best position to ensure their well-being;
- The appointment of a carer without the knowledge of family members, thereby causing or exacerbating family disputes;
- Conducting the hearing and medical examination remotely, without justification and in breach of the principle of immediacy;
- Issuing summonses to appear in situations where the beneficiary does not attend or states that they do not wish to be heard or make a statement;
- Reviewing measures without a new hearing of the person subject to support measures or medical documentation justifying their continuation, thereby preventing an effective assessment of the current relevance and appropriateness of the measures in force. (Me-CDPD, 2026g, pp. 16–17)

That said, **the Me-CDPD recommended the following amendments to the Legal Framework for Adults under Support:**

- A regulatory clarification establishing the primacy of decision-making support mechanisms, in accordance with Article 12 of the CRPD and General Comment No. 1 (26–29, 40), ensuring that any form of representation is strictly subsidiary, proportionate and limited to what is strictly necessary. Special representation should be a measure of last resort, limited to specific acts and duly justified, with general representation admissible only in absolutely exceptional situations, upon demonstration of the inadequacy of all available support measures.
- “Clarification of the provision stipulating that the Court must appoint the person chosen or nominated by the Beneficiary, with provision for the appointment of another person where this is shown to be in the Beneficiary’s best interests;
- The possibility of appointing a person who professionally performs the role of support person – implying, at the same time, the study and creation of this new profession
- Mandatory identification and notification of family members, allowing them to intervene in the proceedings;
- Revision of procedural rules with the aim of strengthening or clarifying the application of procedural adaptations and/or the appointment of a communication mediator;
- Requirement for the hearing and medical examination to take place in person;
- Establishment of clear rules regarding the notification of the Beneficiary to be

heard;

- Revision of the right to appeal;
- Clarification that the hearing and medical assessment always take place during reviews of measures, even in ex officio reviews" (Me-CDPD, 2026g, pp. 17–18).

Finally, it should be noted that **Proposal No. 1/Me-CDPD/2026 from the Me-CDPD** also **offers proposals for specific amendments to the text of the law;** it is therefore recommended that it be consulted and analysed **for the purposes of revising the Legal Regime for Adults under Support.**

In summary, **despite the repeal of the institutions of interdiction and incapacitation and the introduction of the Legal Regime for Supported Adults, structural elements of substitution in decision-making persist in the legal system and judicial practice which are not fully in line with Article 12 of the CRPD and with the binding interpretation set out in General Comment No. 1** (2014). The continued use of general representation regimes as the predominant solution, the insufficient regulatory development of decision-making support mechanisms based on the person's will and preferences, as well as procedural weaknesses in the hearing and review of measures, reveal the need for a legislative review guided by a human rights model. It is therefore essential to consolidate an effective, legally structured system of support for decision-making, with adequate safeguards, mandatory training for judges and other judicial practitioners, independent monitoring mechanisms, and impact indicators centred on autonomy, self-determination and the full exercise of legal capacity. Only through an unequivocal shift from the paradigm of substitution to the paradigm of support will it be possible to ensure equal recognition before the law in accordance with Articles 12 and 5 of the CRPD.

Analytical Summary

Article 12 enshrines equal recognition before the law as a cornerstone of the human rights model of disability, imposing on the State the duty to ensure, on an equal basis with others, the legal personality and legal capacity of Persons with disabilities in all aspects of life. According to General Comment No. 1, disability or alleged "mental incapacity" cannot justify restrictions on legal capacity. In other words, States must replace substitute decision-making regimes with decision-making support systems grounded in the person's will and preferences, with proportionate and appropriate safeguards, free from conflicts of interest and subject to periodic review.

Despite the Committee's clear recommendations in 2016 to abolish full and partial guardianship and to establish support systems in line with the Convention, and notwithstanding the abolition of the institutions of legal incapacity and incapacitation by Law No. 49/2018, the Me-CDPD considers that the legal regime for accompanied adults does not yet ensure the full transition required by the CRPD. Specifically, structural elements of substitution in decision-making persist, namely the prevalent application of general representation regimes, gaps in the provision of effective support, and procedural weaknesses (*e.g.* hearings, examinations, reviews and guarantees of participation), which continue to undermine the exercise of civil, political, social and economic rights on an equal basis with others.

In this context, and taking into account the practical challenges identified by bodies responsible for implementing the system, the Me-CDPD considers that a legislative and operational review is necessary, guided by Article 12 and General Comment No. 1, which: (i) reinforces, in law, the exceptional nature of general representation and prioritises special representation/graduated support; (ii) ensures clear rules on the prevention of conflicts of interest and on the informed participation of the person and their family; (iii) imposes effective procedural safeguards (*e.g.* in-person hearings, procedural adaptations, reviews with updated assessments); and (iv) incorporates mandatory training for judges and other legal professionals, independent monitoring mechanisms and indicators centred on autonomy and self-determination. The Me-CDPD considers it essential to make a clear transition from the paradigm of substitution to that of personalised support, tailored to the needs and preferences of each individual, there by fully ensuring equal recognition before the law

Summary Table

Equal recognition before the law

Legal capacity, the right to self-determination and supported decision-making (Article 12 of the CRPD)

Key Concept: Full Legal Capacity

Article 12 of the CRPD recognises that Persons with disabilities enjoy legal capacity on an equal basis with others in all aspects of life.

- Legal personality: The right to be recognised as a person before the law.
- Legal capacity: The right to hold rights and duties and to exercise those rights.

General Comment No. 1 clarifies that substitute decision-making regimes must be replaced by supported decision-making models, in which the person is enabled to make decisions based on their own will and preferences.

Current Situation

Portugal has adopted a new legal framework through legal regime for accompanied adults (Regime Jurídico do Maior Acompanhado, Law No. 49/2018), which aimed to:

- Replace previous guardianship models based on interdiction and incapacitation.
- Promote autonomy and respect for the will and preferences of the person.
- Explicitly recognise the right to self-determination.

Identified Issues

Despite this legislative shift, the Me-CDPD considers that the transition remains incomplete:

- Persistence of substitute decision-making practices: Continued reliance on broad forms of representation, including general representation orders.
- Procedural weaknesses: Uneven application of the regime, significant dependence on judicial interpretation and absence of consistent criteria.
- Limited participation of the person: The will and preferences of the person are not always effectively guaranteed.
- Insufficient supported decision-making mechanisms: lack of formal and accessible structures, and limited investment in models tailored to individual support needs.

Recommendations of the Me-CDPD

In order to ensure full compliance with Article 12 of the CRPD, legislative and operational reforms are required, focusing on:

- Priority: Strengthening supported decision-making models that ensure the primacy of the person's will and preferences.
- Safeguards: Developing mechanisms to prevent conflicts of interest between the person and those providing support.
- Procedural guarantees: Ensuring mandatory in-person hearings, periodic review of measures, and procedural accommodations that enabling the person to participate effectively at all stages of the process.
- Capacity-building: Providing mandatory training for all justice sector professionals on the human rights model of disability and the paradigm of autonomy and self-determination established by the CRPD.

Activities of the Me-CDPD

The Me-CDPD has closely monitored the implementation of the legal regime for accompanied adults and has contributed to legislative and institutional debates in this area.

It emphasises that legal capacity must not be restricted through practices that undermine the will, preferences and rights of the person, and calls for the strengthening of supported decision-making frameworks.

Article 13
Access to justice

1. States Parties shall ensure effective access to justice for persons with disabilities on an equal basis with others, including through the provision of procedural and age-appropriate accommodations, in order to facilitate their effective role as direct and indirect participants, including as witnesses, in all legal proceedings, including at investigative and other preliminary stages

2. In order to help to ensure effective access to justice for persons with disabilities, States Parties shall promote appropriate training for those working in the field of administration of justice, including police and prison staff.

Article 13
Access to justice

General Framework

The analysis of this article requires the clarification of key concepts. Article 2 of the CRPD defines "reasonable accommodation" as: "necessary and appropriate modifications and adjustments that do not impose a disproportionate or undue burden, where required in a particular case, to ensure that Persons with disabilities enjoy or exercise, on an equal basis with others, all human rights and fundamental freedoms."

On the other hand, the concept of "procedural accommodations" refers to "all necessary and appropriate modifications and adjustments in the context of access to justice, where necessary in a particular case, to ensure the participation of Persons with disabilities on an equal basis with others" (Neca, 2024, pp. 11–12; United Nations, 2020, p. 9). However, unlike reasonable accommodation, procedural accommodations are not subject to the limitation of "disproportionate or undue burden" (Neca, 2024, pp. 11–12; United Nations, 2020, p. 9).

Article 13 of the CRPD is also closely linked to Article 9, insofar as the guarantee of effective access to justice depends on the removal of physical, communication-related and procedural barriers that hinder the participation of persons with disabilities. The procedural accommodations required by this article — including accessible communication, support for understanding and decision-making, and the adaptation of procedures at all stages of the process — constitute a specific expression of the general obligation of accessibility.

In this context, General Comments No. 1 (2014) and No. 7 (2018) reinforce the obligation of States to ensure the effective participation of persons with disabilities rejecting approaches based on the medical model of disability and substitute decision-making regimes.

In 2020, the United Nations Special Rapporteur on the Rights of Persons with Disabilities published a set of international principles and guidelines to support States in implementing this article: "International Principles and Guidelines on Access to Justice for Persons with disabilities" (United Nations, 2020). This document sets out 10 principles, each of which is accompanied by several international guidelines.

The principles are as follows:

Principle 1: All Persons with disabilities have legal capacity and, consequently, no one should be denied access to justice on the basis of disability.

Principle 2: Facilities and services must be universally accessible to ensure equal access to justice, without discrimination against Persons with disabilities.

Principle 3: Persons with disabilities, including children with disabilities, have the right to appropriate procedural accommodations.

Principle 4: Persons with disabilities have the right to access legal advice and information in a timely and accessible manner, on an equal basis with others.

Principle 5: Persons with disabilities have the right to all substantive and procedural guarantees recognised by international law, on an equal basis with others, and States must provide the necessary adjustments to ensure a fair trial.

Principle 6: Persons with disabilities have the right to free or affordable legal assistance, where necessary.

Principle 7: Persons with disabilities have the right to participate in the administration of justice on an equal basis with others.

Principle 8: Persons with disabilities have the right to lodge complaints and initiate legal proceedings regarding human rights violations and crimes, to have their complaints promptly and effectively investigated, and to have access to effective remedies.

Principle 9: Effective and robust monitoring mechanisms are essential to ensuring access to justice for Persons with disabilities.

Principle 10: All persons working in the justice system should receive awareness-raising and training programmes on the Rights of Persons with Disabilities, in particular with regard to access to justice. (United Nations, 2020, p. 11).

According to Article 20(1) of the CRP, "everyone is guaranteed access to the law and to the courts or the defence of their legally protected rights and interests; justice may not be denied on the grounds of lack of financial means."

This right is further implemented, in particular, by Law No. 34/2004 of 29 July, which regulates the system of access to justice and the courts, transposing Council Directive 2003/8/EC of 27 January. In its current version, this law aims "to ensure that no one is hindered or prevented, on account of their social or cultural status, or due to lack of financial means, from knowing, exercising or defending their rights." (Law No. 34/2004 of 29 July on access to justice and the courts, 2004, Article 1º, para. 1).

Observations, recommendations and developments

In 2016, in paragraphs 30 and 31 the Concluding Observations on Portugal, the Committee expressed concern regarding limited access to justice and the lack of procedural accommodations for Persons with disabilities in Portugal. For this reason, it recommended the adoption of all necessary measures to address discrimination

in access to justice, including the obligation to ensure the provision of procedural accommodations and to fund training for legal professionals on the CRPD.

In this regard, the ENIPD 2021–2025 recognises the need to strengthen awareness-raising among professionals across various sectors who work with persons with disabilities, including those in the justice sector (ENIPD 2021–2025, 2021, p. 9). In addition to this objective, under General Objective 1 (Ensuring the participation of persons with disabilities on an equal and equitable basis with others), measure/action 1.2.3. provides for the establishment of a protocol between the INR, I.P., and the Bar Association, with a view to providing legal support to Persons with disabilities" (ENIPD 2021–2025, 2021, p. 21). This protocol was signed on 31 October 2024; information regarding the "implementation and provision of legal support services" was subsequently expected to be published, but no publicly available information, guidance or documentation on its implementation has been identified to date (INR, I.P., 2024b).

The National Federation of Social Solidarity Cooperatives (hereinafter "FENACERCI") also signed an institutional cooperation protocol with the Bar Association, which resulted in the development of a "Guidance Manual for promoting access to justice for persons with intellectual and/or psychosocial disabilities" (Neca, 2023, 2024; Bar Association, 2024).

This project focused on the experience of defendants with intellectual and/or psychosocial disabilities in criminal proceedings, with the aim of identifying the main forms of support and procedural accommodations required (Neca, 2023, p. 15). This project resulted in a "Guidance Manual", as mentioned above, with the aim of informing judges, prosecutors, lawyers, law enforcement officers and other professionals working on criminal proceedings involving defendants with intellectual and/or psychosocial disabilities (Neca, 2024, pp. 9–10). However, several of the recommendations may also be applied to other participants in criminal proceedings with comparable support needs, such as victims and witnesses, as well as to proceedings in other areas (*e.g.* civil proceedings) (Neca, 2024, p. 10). One of the annexes to this Manual concerns a non-exhaustive list of situations accompanied by examples of specific procedural adaptations. **These adjustments and/or adaptations must be analysed on a case-by-case basis, taking into account the individual and their context, but it remains a document containing "general information on disability and on lived experiences of mental health conditions that may be useful to professionals working in the justice sector, with a view to ensuring the full and effective participation of persons with disabilities in legal proceedings"** (Neca, 2024, p. 56).

In 2023, the **Public Prosecutor's Office,** in **the Good Practice Manual on the system for adults under supervision, recommended that a person trusted by the individual be present at the hearing and, "whenever necessary and possible, an interpreter and/or specialist" to support the person's effective participation in the proceedings** (Public Prosecutor's Office, 2023, p. 11).

Action by the Me-CDPD

In 2026, the Me-CDPD, within the scope of its mandate to promote, protect and monitor the implementation of the CRPD, and in the exercise of its powers, **issued a legislative assessment concerning the Rights of Persons with Disabilities, based on an analysis of situations involving legislative gaps, inadequate legal provisions or non-compliancewith the CRPD regarding access to justice: Proposal No. 1/Me-CDPD/2026**. Following this assessment, concrete and targeted proposals were put forward, in particular to amend the wording of various articles in different legal regimes: the Code of Civil Procedure (Articles 6, 9-A, 40, 135, 19-B, 52-B) and the Code of Criminal Procedure (Articles 61, 64, 67-A, 85-A, 93, 325-A); the Legal Regime for Adults under Guardianship (Articles 143, 145 of the Civil Code; Articles 892, 897, 898, 899, 901 and 904 of the Code of Civil Procedure); the Mental Health Act (Articles 20, 22 and 30); the General Regime for Civil Guardianship Proceedings (Article 18); the Law on the Protection of Children and Young People at Risk (Article 103); the Victims' Statute (Articles 13 and 22); the legal framework applicable to the prevention of domestic violence and the protection and assistance of its victims (Article 25), among others.

That said, **and notwithstanding the positive developments in this area, the Me-CDPD considers that the Portuguese legal framework remains insufficient with regard to both the provision and effective implementation of procedural accommodations.** Based on the above and as further detailed in proposal No. 01/Me-CDPD/2025, **the following solutions are proposed:**

- To extend the role of a trusted person, under the terms of Law No. 35/2023 of 21 July, to all judicial proceedings and processes, including those of a criminal nature, ensuring that persons with disabilities are free to designate such a person on a case-by-case basis and at any time, in accordance with Article 12 of the CRPD and General Comment No. 1. A clear distinction must be ensured from that of a companion, clarifying that the presence of a companion does not prejudice the person's right to choose another trusted person to provide support in specific proceedings.
- Establishment of the role of a communication mediator, who would provide support in communication and comprehension, with a role similar to that of an interpreter;
- Implementation of an individual assessment, prior to the person's first procedural act, to determine what adjustments are necessary in the case, including the choice or acceptance, by the person with a disability, of the trusted person;
- Explicit provision in legislation for specific procedural accommodations, namely exemption from formal dress requirements in court, adaptation of the venue (or selection of a more suitable and informal one), conducting proceedings at a pace

adapted to the individual, using clear and simple language, and providing breaks whenever necessary or useful;

- Provision for procedural accommodations for professionals with disabilities, where required;
- The obligation to ensure that the person is assisted by a lawyer from the outset of proceedings, when they are a party or intervener in proceedings, a suspect or a victim (this requirement being waived when they are merely a witness), including when they are a minor and the case concerns civil guardianship or promotion and protection proceedings, in which legal representation is not mandatory a requirement which, the Me-CDPD emphasises, should apply to everyone. Indeed, although the focus is on Persons with disabilities, the Me-CDPD considers the possibility that those with greater support needs, such as those with disabilities – may be summoned or subject to legal proceedings affecting their personal or property rights without being duly accompanied by a professional to constitute a violation of their fundamental rights, in this case the fundamental right to legal support.
- "The creation, within the context of criminal proceedings where the defendant has a disability, of an assessment of the person's fitness to stand trial." (Me-CDPD, 2026g, pp. 5–6).

In summary, the implementation of Article 13 of the CRPD requires a comprehensive and systemic review of the Portuguese legal framework, ensuring the explicit, systemic and operational enshrinement of procedural adaptations across all jurisdictions and procedural stages. The absence of clear provisions and uniform mechanisms for individualised assessment undermines substantive equality, the right to a fair trial and the full exercise of legal capacity. The establishment of a coherent system of procedural accommodations (not subject to the criterion of disproportionate burden) constitutes an immediate and binding legal obligation of the State,, and must be accompanied by mandatory and continuous training for justice system professionals, independent monitoring mechanisms and measurable human rights impact indicators, in accordance with Articles 5, 9, 12 and 13 of the CRPD and the International Principles and Guidelines on Access to Justice (2020).

Analytical Summary

Article 13 of the CRPD enshrines effective access to justice as a fundamental right that requires States not only to ensure formal access to courts, but also to remove physical, communication, procedural and institutional barriers that prevent persons with disabilities from participating on an equal basis with others. This right entails the provision of appropriate procedural accommodations, not subject to the limitation of "disproportionate or undue burden", and the guarantee that persons with disabilities can participate fully in all stages of judicial proceedings, whether as parties, victims, witnesses or defendants.

Although there are relevant initiatives (namely awareness-raising actions provided for in the ENIPD, institutional protocols to strengthen legal support and projects promoted by organisations of persons with disabilities (OPD), the Me-CDPD considers that the Portuguese legal system continues to present structural gaps in the provision and implementation of procedural accommodations, as well as a lack of consistent and uniform practices across the different branches of the justice system. The absence of comprehensive and systemic mechanisms for the individualised assessment of support needs, of explicit provision for adjustments in various procedural rules, and of clear instruments for monitoring and follow-up continues to significantly limit the full and effective participation of persons with disabilities.

In this context, the Me-CDPD considers that full compliance with Article 13 requires a comprehensive and systemic review of procedural legislation, ensuring the explicit and consistent enshrinement of procedural accommodations across all jurisdictions and procedural stages, the possibility of support from a trusted person or a communication mediator the guarantee of adequate legal support, and the establishment of procedures for the individual assessment of support needs. This review should be accompanied by mandatory and continuous training for judges, lawyers, law enforcement officers and other legal professionals, as well as independent monitoring mechanisms and human rights-based impact indicators to assess the effectiveness of the measures adopted.

Access to justice requires a structured and cross-cutting approach grounded in the human rights model of disability, which translates into genuine and effective participation on an equal basis, as required under Articles 5, 9, 12 and 13 of the CRPD.

Summary Table

Access to Justice

Effective access to justice on an equal basis with others (Article 13 of the CRPD)

Effective Access to Justice

Article 13 of the CRPD guarantees persons with disabilities the right effective access to justice on an equal basis with others, including through the provision of procedural accommodations, appropriate support and the full and effective participation at all stages of legal proceedings.

Current Situation

Portugal has established a legal framework that formally recognises the right to access justice, including legal aid, procedural safeguards and principles of equality and non-discrimination.

However, the system continues to rely predominantly on approaches that are not adequately adapted to the diverse support needs of persons with disabilities.

Identified Issues

Despite legislative developments, the establishment of cooperation protocols and awareness-raising initiatives (ENIPD), the Me-CDPD identifies persistent structural shortcomings:

- Lack of systematic provision of procedural accommodations: Absence of a structured, consistent and operational framework to assess and respond to individual support needs;
- Barriers to accessible communication and information: Limited use of plain language, accessible formats and appropriate interpretation and communication support services;
- Insufficient training of justice sector professionals: Limited awareness and understanding of the human rights model of disability as established in the CRPD;
- Barriers to accessing complaint and reporting mechanisms: Limited accessibility of reporting channels and overly complex procedural requirements.
- These shortcomings have a direct and significant impact on the effective enjoyment of rights, restricting access to justice, protection from exploitation, violence and abuse and the ability to participate fully and effectively in legal proceedings.

Recommendations of the Me-CDP

The Me-CDPD considers that full compliance with Article 13 of the CRPD requires a comprehensive and systemic review of the legal framework:

- A clear and enforceable legal framework for procedural accommodations.
- The right to be accompanied by a trusted person or a communication mediator or other appropriate support.
- Accessible communication throughout all stages of legal proceedings, regardless of the person's procedural status (including as victim, witness or defendant).
- Strengthened mandatory and continuous training for justice sector professionals.
- Provision and effective implementation of supported decision-making mechanisms (in alignment with Article 12 of the CRPD).
- Accessible, effective and multi-channel complaint mechanisms.
- Integration of accessibility as a cross-cutting and structural principle of the justice system.
- Monitoring through human rights-based indicators to assess whether effective access to justice is ensured in practice.

Activities of the Me-CDPD

The Me-CDPD has actively monitored legislative and policy developments in the field of access to justice and has contributed to key legislative and institutional reform processes, including proposals concerning the supported adult regime, mental health legislation and the mainstreaming of procedural accommodations across the justice system.

Access to justice is only effective where all persons are able to understand proceedings, participate fully and be heard on an equal basis in practice.

Article 16
Freedom from exploitation, violence and abuse

1. States Parties shall take all appropriate legislative, administrative, social, educational and other measures to protect Persons with disabilities, both within and outside the home, from all forms of exploitation, violence and abuse, including gender-based aspects.

2. States Parties shall also take all appropriate measures to prevent all forms of exploitation, violence and abuse by ensuring, inter alia, appropriate forms of gender- and age-sensitive assistance and support for persons with disabilities and their families and caregivers, including through the provision of information and education on how to avoid, recognize and report instances of exploitation, violence and abuse. States Parties shall ensure that protection services are age-, gender- and disability-sensitive.

3. In order to prevent all forms of exploitation, violence and abuse, States Parties shall ensure that all facilities and programmes designed to serve Persons with disabilities are effectively monitored by independent authorities.

4. States Parties shall take all appropriate measures to promote the physical, cognitive and psychological recovery, rehabilitation and social reintegration of persons with disabilities who become victims of any form of exploitation, violence or abuse, including through the provision of protection services. Such recovery and reintegration shall take place in an environment that fosters the health, welfare, self-respect, dignity and autonomy of the person and takes into account gender- and age-specific needs.

5. States Parties shall put in place effective legislation and policies, including women- and child-focused legislation and policies, to ensure that instances of exploitation, violence and abuse against persons with disabilities are identified, investigated and, where appropriate, prosecuted.

Article 16
Freedom from exploitation, violence and abuse

General Framework

Under Article 3 of the UDHR, everyone has the right to life, liberty and security of person. This right is reiterated in other provisions of international human rights law, including Articles 2 and 3 of the Charter of Fundamental Rights of the European Union and Article 6 of the ICCPR.

This article is closely linked to the themes addressed under Article 6 (Women with disabilities) and Article 7 (Children with disabilities). Accordingly, several international instruments are also relevant in this context, including: the CRC (Articles 19 and 34), the Istanbul Convention, CEDAW, its Optional Protocol (1999) and General Recommendation No. 19, adopted by the CEDAW Committee (General Recommendation No. 19 on violence against women (1992)).

In the CRP, the right to personal integrity is enshrined in Article 25, which recognises in para. 1 that the moral and physical integrity of persons is inviolable.

The Portuguese Penal Code provides for a range of criminal offences relevant to the scope of this article, ranging from offences against physical integrity (Articles 143 to 152-B), offences against personal liberty (Articles 153 to 162), as well as offences against sexual freedom and self-determination (Articles 163 to 176-C). Of particular note in this context are the offence of domestic violence, set out in Article 152 of the Penal Code, and the offence of ill-treatment in Article 152-A of the Penal Code.

According to the Istanbul Convention, domestic violence encompasses "all acts of physical, sexual, psychological or economic violence occurring within the family or the household, or between spouses or former spouses, or between partners or former partners, whether or not the perpetrator cohabits or has cohabited with the victim" (Istanbul Convention, 2011, Article 3(b)).

Article 152 of the Portuguese Penal Code criminalises the practice of physical or psychological abuse against a spouse or former spouse, or a person with whom the perpetrator has or has had a relationship or a child in common, but also "a person who is particularly defenceless, namely due to age, disability, illness, pregnancy or economic dependence, who cohabits with the perpetrator" (subpara. d) or "a minor who is the descendant of the perpetrator or of one of the persons referred to" above (subpara. e).

The offence of ill-treatment (Article 152-A), on the other hand, involves the infliction of physical or psychological harm, the employment in dangerous, inhuman or prohibited

activities, or the overburdening with excessive work of any minor or particularly defenceless person due to age, disability, illness or pregnancy who is in their care, custody, under their responsibility or working in their service.

Law No. 112/2009 of 16 September establishes the legal framework applicable to the prevention of domestic violence and the protection and support of its victims. This framework establishes that it is the Government's responsibility to draw up a National Plan Against Domestic Violence, which must be evaluated and updated (Law No. 112/2009 of 16 September, as amended in 2009, Article 4). This law is regulated, in particular, by Ministerial Order No. 220-A/2010 of 16 April, which establishes the conditions for the initial use of technical means of telecare (amended by Ministerial Order No. 5/2025/1 of 3 January), and by Regulatory Decree No. 2/2018 of 24 January, which regulates the conditions for the organisation and operation of support services, emergency accommodation responses and shelters forming part of the RNAVVD (amended by Regulatory Decree No. 3/2020 of 14 August).

Law No. 147/99 of 1 September established the legal framework for the promotion of the rights and protection of children and young people in situations of risk, based on the principles of minimum intervention, proportionality, the primacy of the family and the best interests of the child. As part of the State Reform set out in the Government Programme, the Communiqué of the Council of Ministers of 20 February 2026 announced, in principle, the approval of a Decree-Law establishing the National Commission for the Rights of Children and Young People, thereby reorganising the national model for strategic coordination in this area. The legislation provides for the abolition of the National Commission for the Promotion of the Rights and Protection of Children and Young People and the creation of a new public body that consolidates and expands the State's powers in the promotion of rights and the prevention of situations of danger, strengthening the functions of planning, intersectoral coordination, supervision and evaluation of the Commissions for the Protection of Children and Young People.

At the time of drafting this report, it is not possible to analyse the impact of this institutional reorganisation; however, it must also be analysed in the light of Article 7 of the CRPD, which imposes on States the obligation to ensure that children with disabilities enjoy all human rights and fundamental freedoms on an equal basis with other children, ensuring that their best interests are a primary consideration in all actions concerning them. In this regard, the new national structure must explicitly and comprehensively integrate the disability dimension into its planning, supervision and evaluation functions, ensuring adequate training for professionals, the collection of disaggregated data, and mechanisms for the participation of children with disabilities and their families. At the time of drafting this report, no further information is available on the final version of the approved legislation or on the practical implementation of these guarantees; it will therefore be essential to monitor its implementation to assess compliance with the obligations from the CRPD.

Observations, recommendations and developments

The Committee, in paragraphs 34 and 35 of its Concluding Observations addressed to Portugal in 2016, noted that the legislative and policy measures adopted for the protection of Persons with disabilities, in particular women and children, were insufficient to prevent situations of exploitation, violence and abuse. In this context, it recommended that the State, in consultation with organisations representing persons with disabilities, explicitly integrate the disability dimension into legislation, strategies and programmes for prevention and protection, as well as strengthen the training of professionals working in these areas, namely police officers, prosecutors and judges (Committee on the Rights of Persons with Disabilities, 2016, paras. 34 and 35).

The Committee also highlighted the need to take into account the multiple and interlinked forms of discrimination that disproportionately affect women and children with disabilities, requiring specific responses that are sensitive to intersectionality. In this context, it is important to emphasise the need to strengthen the link between violence prevention policies and the accessibility of information, reporting mechanisms and support services, since the inaccessibility of these mechanisms constitutes a significant additional risk factor for persons with disabilities, potentially limiting the identification of situations of violence, access to protection and the effective exercise of rights (Committee on the Rights of Persons with Disabilities, 2016, paras. 34 and 35).

One of the objectives of the ENIPD 2021–2025 was to "promote inclusion, equality and the prevention of violence in organisations and the community", and in particular, "to prevent violence against persons with disabilities and improve the quality of intervention" (EE1 – 2.2.). This objective was to be achieved through various measures, such as: i) the development of a methodological guide to enable the prevention, identification and intervention in situations of risk or violence against persons with disabilities (EE1 - 2.2.1.); ii) the creation and implementation of a nationwide awareness-raising programme for the prevention of violence against persons with disabilities (EE1 - 2.2.2.); iii) the promotion of awareness-raising initiatives among persons with disabilities to prevent violence and abuse (EE1 - 2.2.3.); as well as iv) promotion of coordinated intervention in the areas of disability and the prevention and combating of violence against women and domestic violence, specifically based on the specialised reception services for women with disabilities provided by RNAVVD (EE1 - 2.2.4.); and v) training of professionals and agents in the disability sector in these matters (EE1 - 2.2.5.) (ENIPD 2021-2025, 2021, pp. 24–26).

According to the monitoring report, the implementation rate of the measures as at 31 December 2024 was as follows:

- **EE1 - Measure 2.2.1.** and **Measure 2.2.2.** both had an implementation rate of 50%, since, according to IDiPD, I. P. (at the time INR, I.P.) in 2024 "a report was prepared

consolidating the information analysed and collected" by the Investment, Training and Development Unit regarding the main recommendations on violence against Persons with disabilities. The final document will be presented in 2025" (INR, I.P., 2025a, pp. 43, 45). However, regarding the indicator relating to the implementation of the awareness-raising programme (measure 2.2.2.), the implementation rate at the end of 2024 was 0%, with its commencement scheduled for 2025 (INR, I.P., 2025a, p. 46).

- **EE1 – Measure 2.2.3.** had an implementation rate of 0% (INR, I.P., 2025a, p. 47).
- **EE1 – Measure 2.2.4.** had an implementation rate of 100%, with the protocol having been signed on 23 December 2021 (INR, I.P., 2025a, p. 48).
- **EE1 – Measure 2.2.5.** had two indicators: protocol signed and number of actions carried out. Regarding the first indicator, the implementation report indicated it as 100% implemented; the second, however, was listed as 75% implemented, with 8% of actions carried out by 2025 (INR, I.P., 2025a, pp. 49–51).

In terms of prevention and intervention in situations of violence, in 2011, FENACERCI developed a "Roadmap for prevention and intervention in situations of violence against people with intellectual disabilities and/or multiple disabilities in institutional settings" (Neto et al., 2011). Thus, a person with a disability is considered to be at risk when "caregivers (family/significant others and organisations) endanger their safety, health, training, education or development, or when such danger results from the action or omission of third parties or the person themselves, without them intervening to alter the situation (Neto et al., 2011, p. 19). According to this document, the monitoring of risk situations must be based on an understanding of what is happening to the person with a disability in the different contexts in which they live (family, institutional and community), in order to identify and relate positive and negative influences and to establish a personal intervention plan to promote their rights (Neto et al., 2011, p. 19). **This guide, in addition to identifying risk and protective factors in situations of abuse within an institutional context, also addresses the role of professionals, the importance of their awareness and training, the procedures to be adopted in the face of situations of abuse in institutional contexts, and provides some examples of methodologies, recording tools and monitoring methods to detect these situations** (Neto et al., 2011).

Still **on the subject of violence in institutional settings, data** has recently been released **from a European report commissioned by the European Union Agency for Fundamental Rights** ("FRA") which **highlights "alarming instances of neglect, abuse and violence against Persons with disabilities" living in institutions across the EU, including Portugal** (Fontes & Nogueira, 2024, para. 1).

With regard to the data relating to Portugal, the national analysis concluded that there is a significant discrepancy between the legislative framework (praised for its

excellence) **and its implementation in practice, with the practical application of the legislation, protection measures and reporting mechanisms being characterised as "fragile and ineffective"** (Fontes & Nogueira, 2024, p. 3; Fontes & Nogueira, 2024, para. 4).

The most common experiences of violence reported by Persons with disabilities within institutions revealed situations of physical and/or emotional abuse, mistreatment, deprivation of liberty, disrespect, extortion, dehumanisation, excessive medication and ridicule (Fontes & Nogueira, 2024, p. 3). In particular, three groups of people were identified as being at increased risk of violence within institutions: 1) people with profound and multiple intellectual disabilities who are unable to communicate verbally; 2) people with mental illness admitted to psychiatric hospitals; and 3) people with dual diagnosis (intellectual disability and mental health problems) (Fontes & Nogueira, 2024, p. 3).

The study also concluded that there is a lack of awareness of independent monitoring and reporting mechanisms, largely due to the lack of accessible information within institutions (Fontes & Nogueira, 2024, para. 8). Finally, it identified six main challenges: "the persistence of stereotypes about disability, the lack of human resources and specialised training, public policy models that continue to favour institutionalisation, insufficient monitoring, the poor effectiveness of reporting mechanisms, and the slowness and paternalistic approach of the judicial system" (Fontes & Nogueira, 2024, para. 5).

With regard to violence against women, one of the action plans defined in ENIND 2018–2030 concerns the "Action Plan for the Prevention and Combating of Violence against Women and Domestic Violence (PAVMVD)". This strategy, and its respective action plans, adopted an intersectional perspective, which was reflected in the proposal of measures sensitive to multiple factors of discrimination, including disability. For example, under General Objective 1, which aims to "Prevent and, eradicate social tolerance of the various manifestations of Violence against Women and Domestic Violence ('VMVD'), raise awareness of their impacts and promote a culture of non-violence, human rights, equality and non-discrimination", and in particular Specific Objective 13 on "building capacity for the prevention of VMVD", one of the indicators relating to capacity-building measures for prevention aimed at the social economy sector included the number of NGOs, with the IDiPD, I.P. also listed among the stakeholders in the actions (entities involved) (at the time of publication of the ENIPD designated as INR, I.P.) (National Strategy for Equality and Non-Discrimination 2018–2030, 2018, pp. 99–101).

With regard to the strategic objective of "supporting and protecting – expanding and consolidating intervention", particularly the need to "Strengthen the technical quality of the responses provided by the National Support Network for Victims of Domestic Violence ("RNAVVD")", measure 223 states: "Restructuring of the Information Service for Victims of Domestic Violence, guaranteeing specialised support 24 hours a day, ensuring the accessibility of information by qualified professionals with training tailored to Persons with disabilities in all forms of domestic violence, in accordance with the Istanbul Convention, and immediate intervention in emergency situations." (National

Strategy for Equality and Non-Discrimination 2018–2030, 2018, pp. 121–123).

Finally, without seeking to exhaust all the measures of the ENIND, it is worth highlighting the commitment to "train professionals and services for interventions", which includes measure 416 to train (20% per year) RNAVVD professionals, specifically in the various forms of violence covered by the Istanbul Convention and in working with victims in situations of particular vulnerability: older people, Persons with disabilities, people with mental health conditions, LGBTI+ people, migrants, Roma and people experiencing homelessness." (National Strategy for Equality and Non-Discrimination 2018–2030, 2018, pp. 153–156).

In the final monitoring report covering the years 2018 to 2021, the CIG reports that the training of professionals working with victims in situations of particular vulnerability, specifically Persons with disabilities, was carried out "notably through training courses organised by the INR, I.P., aimed at a total of 76 participants."(National Strategy for Equality and Non-Discrimination Portugal + equal: Final monitoring report (2018–2021), 2022, p. 79). Also within the scope of strategic objective no. 2 of the PAVMVD (support and protect), in particular regarding the objective of "localising the responses of the RNAVVD and specialising interventions", during the reporting period, according to the CIG, this objective was achieved through the creation of two specific services (a shelter for women with disabilities who are victims of domestic violence and another for women with experience of mental illness) and the amendment of Regulatory Decree No. 2/2018 of 24 January by Regulatory Decree No. 3/2020 of 14 August, which stipulates that, in the case of victims with increased vulnerability, shelter provision may last for three months, extendable by a maximum of two equal periods (National Strategy for Equality and Non-Discrimination Portugal + equal: Final Monitoring Report (2018–2021), 2022, p. 65).

From an analytical perspective, **the Me-CDPD recognises that the creation of specialised responses may constitute a necessary initial step in addressing specific needs.However, in the medium and long term, care and shelter responses for victims of violence must evolve towards fully inclusive and cross-cutting models, ensuring universal accessibility across the entire network.** This implies continued investment in the training of professionals, particularly in accessible communication, the adaptation of procedures and the removal of physical and cognitive barriers (*e.g.* fully accessible shelters), in line with Article 9 of the CRPD, which requires the accessibility of services and protection mechanisms as a condition for the effective exercise of rights.

In December 2023, the national report on the initial findings of the project "DIS-CONNECTED – Services and Programmes for the Prevention of Violence against Women and Children with Intellectual and Psychosocial Disabilities" was also published, covering Portugal (Neca & Neto, 2023). This research aimed to "give a voice and visibility" to the experiences of women and children with disabilities who have been victims of violence, as well as to describe the legal framework and the perspectives of professionals in the justice system and victim or child support services; and of organisations supporting Persons with disabilities, particularly regarding challenges and best practices in the prevention, monitoring and reporting of violence (Neca & Neto, 2023, p. 8).

This **study concluded that although Portugal has made progress in this area in recent years,** particularly **in the prevention of violence and the creation of specific responses, there remains a "lack of victim support services accessible to Persons with disabilities** ***(e.g.*** **architectural, communication and information barriers)."** (Neca & Neto, 2023, p. 10).

The **report** also **recommends strengthening tools for identifying and reporting violence, mandatory training for professionals working with Persons with disabilities, the systematic reporting of cases to the competent authorities** — including the Social Security Institute, also for statistical purposes — and **the strengthening of cooperation between victim support services, the justice system and representative organisations.** It further recommends **the involvement of multidisciplinary teams within the framework of the Legal Regime for Supported Adults and the adoption of institutional monitoring mechanisms, as well as the collection and publication of gender-disaggregated data on victims with disabilities** (Neca & Neto, 2023, pp. 82–83).

These recommendations are directly linked to Articles 6 (Women with disabilities), 7 (Children with disabilities) and 16 (Protection from exploitation, violence and abuse) of the CRPD, which require States to adopt specific measures to prevent violence, ensure accessible protection services and guarantee responses that are sensitive to intersectionality and support needs.

Indeed, as has been described, women and children are, in this context, particularly vulnerable groups. In 2015, the FRA issued a report on violence against children with disabilities within the EU, in which it argued that Member States should adopt "an integrated strategy to combat violence against children with disabilities" (European Union Agency for Fundamental Rights (FRA), 2015b, p. 4). Among other aspects, it emphasised that Member States "should prohibit the placement of children, especially those under the age of 3, in institutions , regardless of the type or degree of disability" (European Union Agency for Fundamental Rights (FRA), 2015b, p. 9).

In Portugal, the Single Strategy on the Rights of Children and Young People 2025–2035 identifies "a culture of non-violence" as one of its strategic areas, including among its lines of action "ensuring specialised and multidisciplinary intervention for children and young people who are victims of violence and abuse" and "implementing the Barnahus model in cases of violence against children, in the area of gathering evidence, in investigations and in victim support processes" (Single Strategy on the Rights of Children and Young People 2025–2035, 2025, p. 5).

With regard to the implementation of the Barnahus model as a child-friendly means of gathering evidence of serious crimes, it should be emphasised that it has long been recommended by both the Council of Europe and the European Union.

Accordingly, **the Barnahus model will be an asset as a means of mitigating**

and preventing revictimisation in crimes committed against children and also adults, such as domestic violence, maltreatment, rape, child sexual abuse and other particularly serious offences.

In the same vein, mention should also be made of the National Programme for the Prevention of Violence Across the Life Cycle, established in the health sector, which aims to strengthen, within the framework of health services, mechanisms for prevention, diagnosis and intervention regarding interpersonal violence (Order No. 9494/2019, of 21 October 2019).

Finally, based on the **2024 Annual Internal Security Report ("RASI"),** prepared by the Internal Security System and submitted to the Assembly of the Republic, **this constitutes a key tool for assessing the public security situation in Portugal,** compiling reported crime statistics and the activities of security forces and services over the past year (Internal Security System, 2025). However, this edition **does not** include data disaggregated by socio-demographic characteristics such as nationality, age or gender, nor **does it include specific information on victims or incidents involving persons with disabilities, reflecting a structural limitation in the production of statistical information with potential relevance for the protection of groups in particular situations of vulnerability.**

Despite this gap, **the involvement of security forces in initiatives tailored to the reality of disability is documented in complementary instruments and initiatives.** Among these, the **Significativo Azul Programme developed by the Public Security Police ("PSP")** stands out; this is a specialised response aimed at preventive interaction and support for people with intellectual disabilities and multiple disabilities, structuring police intervention in close coordination with representative organisations and promoting safety in everyday life[17]. Programmes such as this reflect a community policing approach that is sensitive to the specific needs of certain groups within the population with disabilities.

In parallel, **the National Republican Guard ("GNR") runs the Support Programme for Persons with disabilities**[18] and provides an **SMS service for persons with hearing impairments**[19], which forms part of the community policing model and aims to enhance the protection, safety and inclusion of persons with disabilities, particularly those in the most vulnerable situations. At the same time, it also incorporates accessibility measures in communication with the GNR, namely the SMS service for deaf people, enabling requests for help to be made in emergency situations. This initiative aims to prevent situations of violence, isolation or neglect, promote trust in the security forces and ensure a response better adapted to the specific needs of Persons with disabilities.

[17] According to RASI data, in 2024, this Programme carried out 463 awareness-raising activities, involving 256 members of the PSP (Internal Security System, 2025, p. 88).

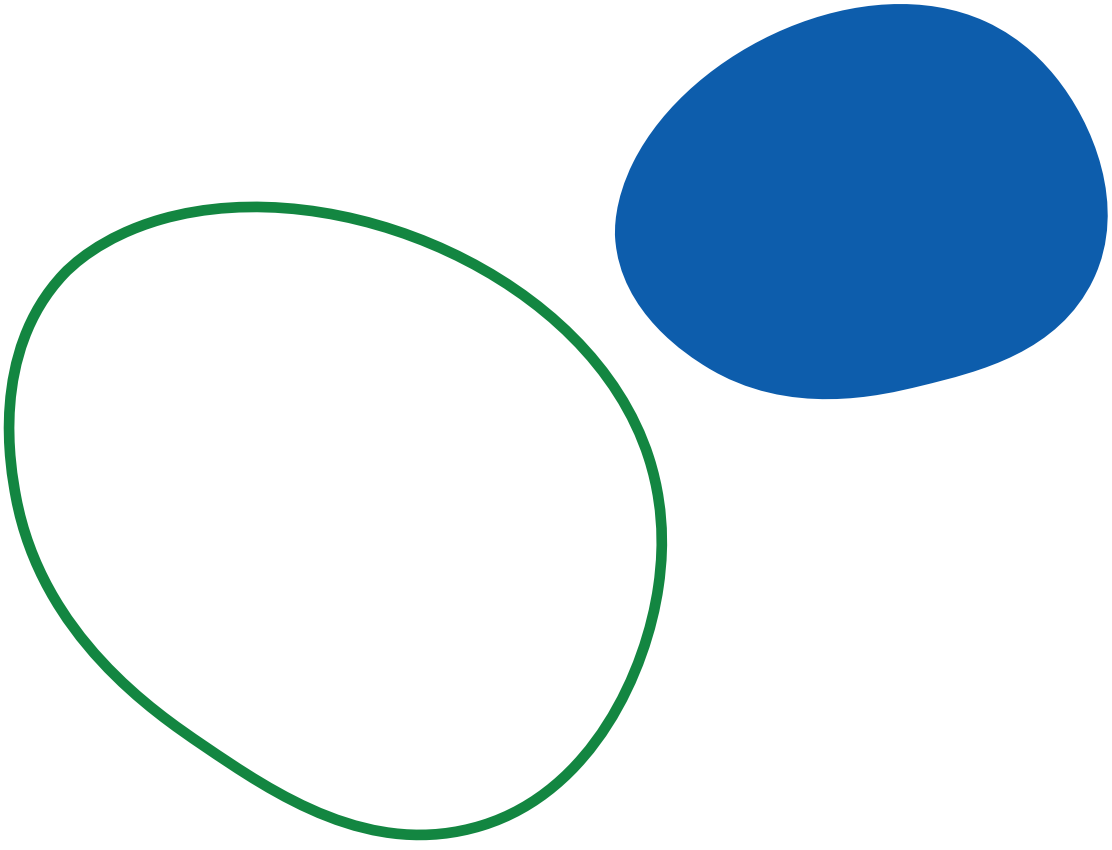
[18] Under this Programme, in 2024, 468 Persons with disabilities were identified and 943 members of the GNR were deployed (Internal Security System, 2025, p. 88).

[19] In 2024, under this measure, the GNR received 928 messages and sent 502 (Internal Security System, 2025, p. 88).

These initiatives relate to operational responses which, although not detailed in the RASI 2024, illustrate progress in promoting accessibility and inclusion within the sphere of internal security. The absence of disaggregated statistical data in the annual report regarding victims or perpetrators of crimes with disabilities indicates, in turn, the need to strengthen the collection and publication of indicators that enable the identification of patterns of victimisation and the assessment of the effectiveness of police and judicial responses in relation to Persons with disabilities, in line with a human rights approach and the monitoring obligations set out, inter alia, in the CRPD.

In this context, **the Me-CDPD continuously and systematically monitors issues relating to the prevention, monitoring and combating of exploitation, violence and abuse against Persons with disabilities,** recognising Article 16 of the Convention as central to guaranteeing the integrity, safety and dignity of these individuals. **The Mechanism's work has included technical and institutional coordination with relevant bodies, notably the Public Prosecutor's Office, within the framework of the "Strategy for Vulnerable Adults", as well as with the Permanent Observatory of Justice at the Centre for Social Studies of the University of Coimbra,** including in work carried out within the framework of initiatives and reports promoted by the FRA.

Although no opinion has yet been issued that is exclusively on Article 16, it has been systematically integrated into the analysis and reasoning of various opinions and recommendations, reflecting its cross-cutting and foundational nature in the implementation of the Convention. **Strengthening monitoring, the collection of disaggregated data and inter-institutional cooperation remains essential to ensure effective, consistent and rights-based implementation that is fully in line with the international obligations undertaken by the Portuguese State.**



Analytical Summary

Article 16 of the CRPD imposes on the Portuguese State a reinforced and cross-cutting obligation to prevent, protect against, investigate and redress all forms of exploitation, violence and abuse against Persons with disabilities, both within and outside the home, with specific attention to gender and age dimensions. This is not merely a matter of criminalising conduct, given that the article requires legislative, administrative, social and educational measures, as well as the provision of accessible protection services, effective reporting mechanisms and independent monitoring of institutions and programmes that provide services/support to Persons with disabilities.

The national framework highlights the existence of a relevant criminal legal framework and public policies (notably in the areas of domestic violence, child protection and victim support). However, an analysis of the recommendations of the Committee on the Rights of Persons with Disabilities (2016) and the implementation of national strategic measures reveals persistent structural weaknesses, in particular: insufficient systemic integration of the disability dimension into prevention and protection strategies; limited accessibility of information, reporting channels and support services; partial implementation of key awareness-raising and capacity-building measures provided for in the ENIPD; and deficits in effective oversight and accountability within institutional settings, where serious cases of abuse, neglect and violence continue to be reported.

In this context, the Me-CDPD emphasises that compliance with Article 16 depends on a human rights-centred approach that combines evidence-based prevention, universal accessibility of responses and procedures, continuous training of professionals (*e.g.* justice, health, education, social services and security forces), independent mechanisms for the supervision of institutions, and the production of disaggregated data that enables the identification of patterns of victimisation and the assessment of policy effectiveness. In this regard, an integrated approach is crucial, combining protection, participation, accessibility and accountability, to ensure the safety, dignity, autonomy and integrity of Persons with disabilities, as required by the CRPD and applicable complementary international instruments.

Summary Table

Freedom from Exploitation, Violence and Abuse

Right to protection from all forms of violence and abuse (Article 16 of the CRPD)

Comprehensive Protection from Exploitation, Violence and Abuse

Article 16 of the CRPD requires States Parties to adopt legislative, administrative, social and educational measures to prevent, identify, investigate and redress all forms of violence and abuse, both within and outside the home, with particular attention to gender, age and institutional settings.

Current Situation

Portugal has established a legal and policy framework in this area, including:

- Criminal legislation and victim protection measures.
- National strategies to combat violence (including ENIPD).
- Alignment with international frameworks, including the CRPD, the Istanbul Convention and CEDAW.
- Formal recognition of the right to protection.

Identified Issues

Despite this framework, the Me-CDPD identifies a number of serious shortcomings:

- Invisibility: Disability remains insufficiently integrated into general victim protection strategies, and there is a lack of disaggregated data (*e.g.* national crime reports such as RASI do not include disability-disaggregated data).
- Heightened risk exposure: Particularly affecting women, children and Persons with disabilities in institutional settings.
- Underreporting of violence: Due to barriers in reporting, difficulties in recognising abusive situations and dependence on third parties.
- Lack of accessibility of support mechanisms.
- Insufficient institutional responses: Lack of specialised approaches and weak coordination between services.
- Persistence of practices incompatible with human rights: Including violence in institutional settings and interventions carried out without free and informed consent (*e.g.* forced sterilisation).
- Need for capacity-building: Insufficient training for professionals in social services, healthcare, law enforcement and justice, as well as for persons with disabilities themselves.

Recommendations of the Me-CDPD

The Me-CDPD considers that compliance with Article 16 requires a comprehensive and integrated approach:

- Evidence-based prevention: Collecting and using data to identify, prevent and address patterns of violence.
- Universal accessibility: Ensuring that all victims can seek help and be understood, regardless of their support needs.
- Professional training: Strengthening the capacity of professionals in justice, law enforcement, healthcare and social services.
- Empowerment of Persons with disabilities: Promoting awareness of abusive situations, ensuring free and informed consent, access to reporting and support mechanisms, and supported decision-making.
- Independent oversight: Preventing institutionalisation as a risk factor and ensuring rigorous external monitoring of care institutions.

Activities of the Me-CDPD

The Me-CDPD has actively monitored public policies in the area of violence prevention, integrated a disability perspective into legislative analysis and ensured alignment with international human rights instruments.

It has also collaborated with the Public Prosecution Service in the adaptation of the “Strategy for Adults in Vulnerable Situations” into easy-to-read format, and has contributed, as a judicial police body and academic partner (OPJ-CES/UC), to initiatives and reports developed by the European Union Agency for Fundamental Rights in this field.

Protection from violence requires an intersectional, person-centred and human rights-based approach.

Article 19
Living independently and being included in the community

The States Parties to this Convention recognise the equal right of all persons with disabilities to live in the community, with choices equal to those of others, and shall take effective and appropriate measures to facilitate the full enjoyment by persons with disabilities of their right to full inclusion and participation in the community, ensuring in particular that:

a) Persons with disabilities have the opportunity to choose their place of residence and where and with whom they live on an equal basis with others, and are not obliged to live in a particular living arrangement;

b) Persons with disabilities have access to a range of home-based, residential and other community support services, including the personal assistance necessary to support their life and inclusion in the community and to prevent isolation or segregation from the community;

c) Community services and facilities intended for the general public are made available, on an equal basis, to Persons with disabilities and are adapted to their needs.

Article 19
Living independently and being included in the community

General Framework

The right to live independently and to be included in the community, as set out in this article, is identified by legal scholars as one of the few rights enshrined in the CRPD that has no clear equivalent in the binding international instruments preceding the adoption of this Convention (Degener, 2017, p. 17). This right, in its dual aspect, constitutes a response to the human rights violations suffered by persons with disabilities resulting from institutionalisation and other methods of exclusion, such as confinement at home or placement in settings removed from the social environment (Degener, 2017, p. 17).

As noted by the Committee in General Comment No. 5, one of the reasons underpinning Article 19 is the fact that, historically, persons with disabilities have been deprived of the ability to choose and control their lives personally and individually. For this reason, it can be said that this article is based on the principle that all human beings are born equal in dignity and rights, and that all lives have equal value (General Comment No. 5 (2017) on living independently and being included in the community, 2017, para. 1, 2).

The principles set out in subpara.s (a) and (c) of Article 3 of the CRPD expand upon Article 19, specifically: respect for inherent dignity, individual autonomy, including the freedom to make one's own choices, and independence of persons; and full and effective participation and inclusion in society.

Respect for independent living and inclusion in the community encompasses a range of civil, political, economic, social and cultural rights, with that right serving as an example of the interrelationship and interdependence of all these rights (General Comment No. 5 (2017) on living independently and being included in the community, 2017, para. 17). In turn, this particular aspect makes Article 19 a reflection of various international human rights provisions, such as Article 29 of the UDHR, which establishes that "everyone has duties to the community, without which the free and full development of his personality is not possible", or Article 11 of the ICESCR, which stipulates that everyone has the right to an adequate standard of living, or even Article 12 of the ICCPR, which guarantees the right to freedom of movement and residence.

Provisions of other Conventions are also relevant in this context, such as Articles 1 and 15 of CEDAW, which establish the principle of non-discrimination on the basis of sex and equality between men and women before the law; and Articles 9, 18 and 20 of the

CRC, which guarantee, respectively, that a child shall not be separated from his or her parents against their will, that States shall ensure appropriate assistance to parents or legal guardians of the child, and that in situations where children are temporarily or permanently deprived of their family environment, they are entitled to special protection and assistance from the State.

The right to independent living and inclusion in the community is also in line with SDG 10 (reducing inequalities) of the 2030 Agenda, in particular with target 10.2: "to empower and promote the social, economic and political inclusion of all, regardless of age, gender, disability, ethnicity, origin, religion, economic status or other factors" (United Nations, 2015b). SDG 11, making cities and communities inclusive, safe, resilient and sustainable, in particular target 11.1: "by 2030, ensure access for all to safe, adequate and affordable housing and basic services, and upgrade slums" is also a dimension of this Article 19 (General Comment No. 5 (2017) on living independently and being included in the community, 2017, para. 14; United Nations, 2015b).

At the national level, the implementation of Article 19 must also be framed in the light of the duty to coordinate and monitor the implementation of the CRPD, ensuring regulatory coherence and cross-sectoral alignment between social, health, education, employment, housing and accessibility policies. The effectiveness of this right therefore depends on institutional mechanisms that guarantee the mainstreaming of the independent living paradigm, the participation of persons with disabilities and their representative organisations, and public accountability for results, preventing isolated sectoral measures from replacing an integrated policy of deinstitutionalisation and inclusion in the community.

In this context, the implementation of Article 19 also implies the existence of diverse housing solutions that enable Persons with disabilities to live in the community, with a genuine choice of where and with whom to live, on an equal footing with other people. In Portugal, various housing and social support options are available, including residential and community-based models of an in e nature. These include the Residences for Autonomy and Inclusion ("RAI"), a social support measure regulated by Ministerial Order No. 77/2022 of 3 February, under the legal framework for social support measures set out in Decree-Law No. 64/2007 of 14 March, as amended by Decree-Law No. 126-A/2021 of 31 December.

At the same time, collaborative or cooperative housing initiatives are identified, which fall within the framework of housing and construction cooperatives (Decree-Law No. 502/99 of 19 November) and public policy instruments for access to housing, such as the 1.º Direito programme (Decree-Law No. 37/2018 of 4 June). Structurally, these measures constitute relevant instruments within the framework of public housing and inclusion policies; in terms of processes, the Me-CDPD is not aware of the

existence of systematic monitoring mechanisms, participation activeof persons with disabilities (*e.g.* participation in the drafting of internal regulations) or the collection of disaggregated data; finally, in terms of outcomes, there is no consolidated public evidence available regarding their effective impact on the promotion of independent living, autonomy and support for decision-making, in accordance with Article 19 of the CRPD.

The Me-CDPD notes the existence of these measures; however, no mandatory prior opinion has been requested regarding them, which limits their preventive assessment. In this context, it is essential to ensure their independent, systematic and human rights-based evaluation, in order to assess their substantive compliance with Article 19 of the CRPD.

Based on Article 19 of the CRPD and the interpretation set out in General Comment No. 5, **the relevance of these solutions depends, however, on the way in which they are designed, managed and implemented, given that their effective contribution to the right to independent living is intrinsically linked to the possibility of real and informed, self- d choice by Persons with disabilities, the existence of individualised support, universal accessibility and inclusion in the community, whilst avoiding the reproduction of institutionalising or segregating approaches.**

Observations, recommendations and developments

In the Portuguese context, the implementation of the principles enshrined in Article 19 has been progressively developed through various public policies and regulatory instruments.

In 2016, the Committee expressed concern regarding two issues within the scope of this article:

i) the fact that the State does not have a national policy on independent living and that the allowance for this type of support is very low. It therefore recommended that, in close consultation with organisations representing Persons with disabilities, a “national strategy for independent living” be adopted, “including increased investment to facilitate independent living in the community rather than institutionalisation, regulating personal assistance, and increasing the availability of sign language interpreters and finger-spelling systems in public services.”

ii) the 2007–2016 National Mental Health Programme (in force at the time), which aimed to expand the National Network for Integrated Long-Term Care, had not yet established (at the time of this report’s publication) community support services. It therefore urged the Portuguese State to establish these support services for people with intellectual or psychosocial disabilities.

This point is particularly relevant in the national context, since the existence of formal care networks (including long-term care and clinical facilities) does not, in itself, ensure compliance with Article 19 when the response remains centred on an institutional approach or on provision through 'collective facilities' rather than personalised support in the community. The realisation of the right to independent living and inclusion in the community requires accessible and sustainable community-based services, with territorial coverage, continuity and a responsive capacity, which support genuine choices regarding where and with whom to live, with professionals trained in accordance with the human rights model of the CRPD, preventing pathways to institutionalisation, in line with the Committee's interpretation in General Comment No. 5.

It is also important to ensure that the organisational and management models of these services do not indirectly reproduce patterns of institutionalisation or external control over a person's life; they must function as a support for self-determination and not as structures that substitute for decision-making.

Independent Living

Independent living, or living independently, means "that Persons with disabilities have all the necessary means to exercise choice and control over their lives and to make all decisions that concern them. Personal autonomy and self-determination are fundamental to independent living, including access to transport, information, communication and personal assistance, place of residence, daily routine, habits, decent employment, personal relationships, clothing, food, hygiene and healthcare, religious activities, cultural activities, and sexual and reproductive rights." (General Comment No. 5 (2017) on living independently and being included in the community, 2017, para. 16(a)).

In this regard, **personal assistance must cover all aspects of daily life, in accordance with the person's needs and choices, and must not be restricted to predefined categories of activities which, in practice, limit the exercise of autonomy.**

Decree-Law No. 129/2017 of 9 October established the **"Independent Living Support Model" ("MAVI") programme, which is implemented through the provision of personal assistance via Independent Living Support Centres ("CAVI")** (Decree-Law No. 129/2017, of 9 October 2017, Article 3). The legislation defined "personal assistance" as "a specialised service supporting independent living, through which support is provided to a person with a disability or impairment to carry out activities which, due to limitations arising from their interaction with the environment, they cannot perform on their own." (Article 5(1)). This assistance took the form of an individualised personal assistance plan, which consisted of person-centred planning, where the power to decide

rests with the person themselves or their representative, and the content of which is determined according to their vision for the future, motivations and wishes (Article 5(2) and 7). This plan also documented personal assistance needs, how these develop, and the monitoring of their implementation (Article 7(2)).

It is important to emphasise that **personal assistance, as a central instrument of Article 19,** is not to be confused with a form of assistance of a charitable nature or one conditioned by strictly economic criteria: **it is a form of support that enables the exercise of rights and self-determination, and must be designed on the basis of individual needs and person-centred planning.** This means that **compliance with Article 19 of the CRPD implies,** however, **that personal assistance must be effectively controlled by the person with a disability, including the possibility of having a decisive influence on the choice, organisation and provision of support, avoiding models that are excessively mediated by service providers.** For this reason, the assessment of access to and the adequacy of support must prioritise functional criteria and support needs, avoiding models that are overly dependent on standardised thresholds or administrative criteria which may, in practice, limit choices and control over one's own life. In this context, **the funding of personal assistance must be adequate, predictable and based on individual support needs; it must not be constrained by standardised ceilings or budgetary availability, lest it compromise the effectiveness of the right to independent living** (in accordance with General Comment No. 5 (2017), paras. 25, 28 and 41).

Within the framework of the MAVI programme, three key stakeholders can be identified : the person receiving personal assistance, the personal assistant and the CAVI.

Persons with disabilities were eligible as recipients of personal assistance if they were "certified by a Multi-purpose Medical Certificate of Disability or an Armed Forces Disability Card, with a degree of disability of 60% or more and aged 16 or over" (Decree-Law No. 129/2017 of 9 October, Article 10(1)). Para. 2 provided that people with intellectual disabilities, people with mental illness and people with autism spectrum disorder, provided they were aged 16 or over, were eligible for personal assistance, regardless of their degree of disability. In the case of persons aged 16 or over who were subject to compulsory schooling, they could only receive personal assistance outside school hours (Article 10(3)).

Under Article 9 of the same legislation, the maximum number of support hours per recipient was 40 hours per week (para. 2); however, para. 3 provided for the possibility of exceeding this limit in exceptional and duly justified situations, where this is necessary for the full realisation of the person's life plan, with support of up to 24 hours a day in such cases, provided that the criteria defined for its allocation are met.

A personal assistant "is the person who helps the person with a disability or impairment to lead an independent life" (Decree-Law No. 129/2017 of 9 October 2017, Article 12). Personal assistants may not have, nor may they ever have had, any legal family relationship with the person receiving personal assistance (Article 15(4)). In turn, CAVI is the management structure for independent living support, responsible for the provision of personal assistance to Persons with disabilities, having the legal status of an NGO (ONGPD) and the status of a Social Solidarity Institution (IPSS) (Article 20). It is the responsibility of the CAVI to undertake the management, coordination and support of personal assistance services and to implement and manage pilot projects in the field of independent living (Decree-Law No. 129/2017 of 9 October 2017, Article 21(1)).

This Decree-Law was regulated by various legislative instruments, including Ministerial Order No. 342/2017 of 9 November, which establishes the criteria, limits and ratios necessary for the implementation of Decree-Law No. 129/2017 of 9 October. This Ministerial Order was subsequently amended in 2020, by Ministerial Order No. 287/2020 of 16 December and, in 2022, by Ministerial Order No. 56/2022 of 27 January, with the aim of strengthening the MAVI public policy measure, namely by extending the duration of pilot projects and adjusting the support provided.

The creation and implementation of the "MAVI" programme, as recognised in the ENIPD 2021–2025 itself, represented, at both national and international levels, "a substantive paradigm shift in public inclusion policies in Portugal" (ENIPD 2021–2025, 2021, p. 15).

The ENIPD 2021–2025 establishes the promotion of autonomy and independent living as its 5th Strategic Objective. Three General Objectives were defined, each with two specific objectives and respective measures/actions for each Specific Objective throughout the strategy's duration, with a view to making autonomous and independent living the "first choice and institutionalisation a last resort" (ENIPD 2021–2025, 2021, p. 15). Accordingly, and to facilitate analysis, the proposed objectives were:

General Objective 1: to create conditions for people and families to support the empowerment and independent living of Persons with disabilities. Specific objectives:

1.1 — Empowering individuals and families to achieve autonomy;

1.2 — Organise, provide and make accessible information relevant to autonomy and independent living.

General Objective 2: to empower institutions and communities to support the empowerment and independent living of Persons with disabilities. Specific objectives:

2.1 — Empower social sector institutions to promote empowerment and independent living;

2.2 — Create solutions at municipal level to consolidate a policy of non-institutionalisation and the promotion of autonomy.

General Objective 3: To consolidate MAVI for Persons with disabilities or impairments and the policy of non-institutionalisation in Portugal. Specific objectives:

> 3.1 — Evaluate and consolidate MAVI — Personal Assistance;
>
> 3.2 — Develop guidelines and methodologies to support the consolidation of a policy on the non-institutionalisation of Persons with disabilities." (ENIPD 2021–2025, 2021, p. 15).

According to the ENIPD 2021–2023 implementation report, the implementation rate of the measures/actions under axis 5 planned for 2023 was 31% (INR, I.P., 2024a, p. 16). In 2024, 56% of the targets/actions under Axis 5 planned for that year were implemented (INR, I.P., 2025b, p. 11).

Two of the measures implemented were 3.1.1. "Evaluate the Personal Assistance pilot projects established by Decree-Law No. 129/2017 of 9 October, involving persons with disabilities and their families and other relevant stakeholders", which resulted in the report (CIES-ISCTE, 2021); and 3.1.2. "Strengthen the current MAVI through the monitoring and evaluation of ongoing pilot projects, with a view to defining a definitive model of personal assistance that meets the needs of Persons with disabilities", which resulted in the publication of Ministerial Order No. 415/2023 of 7 December (ENIPD 2021–2025, 2021, p. 51; INR, I.P., 2025a, p. 193).

In fact, the **interim evaluation report on MAVI** conducted by CIES-ISCTE **noted "very positive impacts (...) both in terms of quality of life (physical, psychological, material and social well-being/self-determination) of the beneficiaries and their families ", allowing for the unequivocal conclusion "regarding its relevance and suitability in terms of a social response to the real social needs that underpinned the policy's design."** (CIES-ISCTE, 2021, p. 8). In light of these results, **the first recommendation of this report was to strengthen MAVI by ensuring the project's continuity and promoting its integration into Portugal's social protection framework "as an autonomous response"** (CIES-ISCTE, 2021, p. 9).

With over a thousand beneficiaries, which – as noted by the evaluation report – "is nonetheless a significant number for a pilot project" (CIES-ISCTE, 2021, p. 1), that evaluation made it possible to identify the necessary improvements and "their incorporation into the definitive model" (Ministerial Order No. 415/2023, of 7 December 2023, Preamble).

This need for definitive integration led to the **approval of Ordinance No. 415/2023, of 7 December, which implements the MAVI, establishes the conditions for the creation, establishment, organisation and operation of the CAVIs,** and regulates the provision of personal care services, defining the target groups covered and the eligibility criteria, as well as the funding arrangements (Ordinance No. 415/2023, of 7 December 2023, Preamble).

Action by the Me-CDPD

The Me-CDPD, within the scope of its remit and powers, **has had the opportunity to monitor and issue its position at various stages of the MAVI's legislative process:**

- The first opinion on this matter was issued during the public hearing on Decree-Law No. 129/2017 of 9 October: Opinion No. 2/Me-CDPD/2017 of 22 March (Me-CDPD, 2017c).
- The Me-CDPD's second statement took the form of a follow-up (Follow-up No. 1/Me-CDPD/2018) to the first opinion, in which it was analysed whether the recommendations made had been accepted, partially accepted or not accepted by the approved legislation, Decree-Law No. 129/2017 of 9 October (Me-CDPD, 2018a).
- The third opinion was Opinion No. 4/Me-CDPD/2023, concerning the draft legislation setting out the conditions for the creation, establishment, organisation and operation to which the MAVI social response must conform (Me-CDPD, 2023a).

Finally, in 2025, in response to the amendment proposed in the 2026 State Budget and subsequently approved (Law No. 73-A/2025 of 30 December, approving the State Budget for 2026, 2025, Article 196), introducing a means-test for access to the Independent Living Support Service ("SAVI"), the Me-CDPD issued Recommendation No. 7/Me-CDPD/2025 (Me-CDPD, 2025n).

Against this backdrop, it is evident that until 2023 there was a legislative framework in which the MAVI Programme, as a pilot project, was regulated by Decree-Law No. 129/2017 of 9 October, which provided for standardised limits on support hours, albeit with exceptional adjustment mechanisms based on individual support needs. With the end of the pilot phase and the consolidation of the model, a regulatory framework for the implementation of MAVI and the personal assistance service came into force, defining conditions for organisation, operation, eligibility and funding, established by Ministerial Order No. 415/2023 of 7 December. In 2024, this Order underwent several amendments through Order No. 79/2024 of 4 March. Ordinance No. 415/2023 of 7 December, in its consolidated version, is regulated by Order No. 4159/2024 of 16 April, which established the national coordinating body for MAVI.

Thus, with regard to the first two statements by the Me-CDPD, although many of the specific recommendations and proposals issued concerning the initial draft of Decree-Law No. 129/2017 of 9 October (Me-CDPD, 2017c, 2018a) no longer a ly reflect the current legislative reality, it is believed that a comparative analysis between these two points in time may be useful. Without seeking to exhaust the content of these opinions, the following recommendations from the 2017 Opinion and Follow-up are highlighted:

Recommendations of the Me-CDPD (2017a, 2018a)	Consolidated text of Decree-Law No. 129/2017 of 9 October	Consolidated text of Ministerial Order No. 415/2023, of 7 December
"Extension of the support measure to young people aged 16 or over" (Me-CDPD, 2018a, p. 29)	Adopted	Accepted and extended to young people aged 14 or over.
"The assessment must be based on a Multidisciplinary Model grounded in support needs and must not rely solely on the Multi-purpose Certificate Model." (Me-CDPD, 2018a, p. 29)	Not eligible	Not accepted
"The fact that the beneficiaries are 'only' Persons with disabilities of 60% or more limits the participation of Persons with disabilities with a lower degree of disability." (Me-CDPD, 2018a, p. 30)	Partially accepted	Partially accepted.
"Ensuring that Persons with disabilities have the freedom to choose their personal assistant, thereby upholding one of the fundamental principles of the Independent Living philosophy." (Me-CDPD, 2017c, p. 33)	Partially accepted	Partially accepted. The role of personal assistant requires a consolidation of the legal framework to ensure the implementation of the legislation from both a formal and substantive perspective, so as not to confuse the rights of personal assistants with those of Persons with disabilities.
"Not to limit personal assistance to a maximum of 40 hours per user, thereby ensuring equal opportunities for all Persons with disabilities." (Me-CDPD, 2018a, p. 31)	Partially accepted	Partially accepted [20]
"It is appropriate to continue to explore legal alternatives for contractual arrangements that simultaneously protect the Rights of Persons with Disabilities and the rights of personal assistants, bearing in mind that their rights are not guaranteed under a service contract." (Me-CDPD, 2018a, p. 32)	Not accepted	Not accepted[21] .

[20] The CRPD does not establish specific quantitative limits for personal assistance, and any restrictions, such as the definition of working hours, must comply with the provisions of Article 4(2), (3) and (4), ensuring the effectiveness of the right enshrined in Article 19. In this context, Article 9(3) of Decree-Law No 129/2017 of 9 October, by providing for the possibility of exceeding the general limits in exceptional and duly justified situations, constitutes a mechanism for adjusting to individual needs, the application of which must ensure substantive compliance with the CRPD.

[21] Without prejudice to the scope for national discretion regarding models for contracting personal assistance, it is important to ensure that these models guarantee, in accordance with Article 19 of the CRPD and General Comment No. 5, effective control by the person with a disability over the provision of support, as well as adequate conditions of quality and stability in the care relationship, including the safeguarding of decent working conditions for personal assistants.

In 2025, during the debate on the 2026 State Budget, a proposal was put forward to amend Article 39-A, which provided for the possibility that access to SAVI would become subject to "verification of means, under terms to be defined by ministerial order." This proposal was ultimately included in the approved law (Law No. 73-A/2025 of 30 December 2025, approving the State Budget for 2026).

That said, and **in line with the position defended and developed in Recommendation No. 7/Me-CDPD/2025, the Me-CDPD reiterates that the introduction of a means-test represents a potential setback in the protection of the right to independent living, with potential discriminatory and disproportionate effects on persons with disabilities.** This constitutes a violation of Article 19 of the CRPD, as interpreted by the binding General Comment No. 5.

Furthermore, any restrictive measure regarding access to personal assistance must be assessed against a rigorous test of necessity, appropriateness and proportionality, underpinned by evidence and a human rights impact assessment, demonstrating that there are no less restrictive alternatives capable of ensuring financial sustainability without compromising the essential content of Article 19. In particular, **the introduction of a means-test tends to disregard the structural additional costs associated with disability and may produce indirect exclusionary effects, disproportionately affecting Persons with disabilities who have significant support needs, with a direct impact on the prevention of institutionalisation and on substantive equality.** Therefore, the implementation of this provision should be accompanied by meaningful consultation (Article 4(3)) and monitoring mechanisms that verifiably demonstrate the measure's impact on autonomy, community participation and the continuity of person-centred support.

There is also an essential dimension of substantive compliance with the right to independent living, relating to the economic impact of support. Compliance with Article 19 of the CRPD further requires that support for independent living, in particular personal assistance, must not result in a reduction in the disposable income of the person with a disability or their household, nor in the transfer of financial burdens associated with the exercise of a fundamental right. Under General Comment No. 5, **the funding of such support must be based on individual needs and must not result in a reduction of personal income; it must ensure the material conditions for the effective exercise of autonomy.**

As explained above, personal assistance "is not a welfare benefit intended to alleviate poverty; it is a necessary support to enable Persons with disabilities to exercise their fundamental rights, such as living independently, making decisions about their own lives, pursuing their education and professional activities, and avoiding institutionalisation." (Me-CDPD, 2025n, p. 5). Introducing a means-test tends to exclude persons with

disabilities who face structural additional costs that are not reflected in traditional income assessments, which constitutes indirect discrimination and a violation of Article 5 of the CRPD (Me-CDPD, 2025n, p. 5).

Given that the recommendation to exclude the reference to means-testing was not followed following the approval of the State Budget Law, the Me-CDPD recommends that:

- "The assessment provided for in Article 39-A should include a human rights impact assessment and consider alternatives that do not restrict access to essential rights.
- The Government ensure meaningful consultation with Persons with disabilities and the organisations representing them, in accordance with Article 4(3) of the CRPD.
- Stable, sustainable and adequate financial solutions be identified to enable territorial expansion, continuity and predictability of the response, whilst preserving the universality of the right to independent living." (Me-CDPD, 2025n, p. 7).

Further on this matter, in February 2026, the Me-CDPD reiterated to the SEASI Office a request for clarification regarding the reasons justifying the decision to create a 'resource condition' for access to SAVI. On 2 March 2026, the SEASI Office replied, informing the Me-CDPD that due to the "complexity of the matters, they are still under review by the relevant departments", and therefore, as of that date, the "conditions for submitting the consolidated contributions" had not yet been met. That said, the SEASI Office informed the Me-CDPD that it would respond as soon as possible, but no formal response had been received by the date of completion of this report.

The consolidation of the right to independent living thus **requires** not only the formal existence of measures, but their **substantive compliance with Article 19 of the CRPD, ensuring effective control by the person with a disability, adequate funding tailored to individual needs, and the existence of flexible support models that allow for choice regarding the organisation and management of care, effectively promoting self-determination and inclusion in the community.**

Centres for Activities and Training for Inclusion ("CACI")

According to the Committee's understanding in General Comment No. 5, Article 19 comprises two dimensions: the right to live independently and the right to be included in society. This latter right thus encompasses a social (community) dimension, which must always be grounded in and stem from the right to access to individualised support and freedom of individual choice, namely how, where and with whom to live (General Comment No. 5 (2017) on living independently and being included in the community, 2017, p. 7).

As previously mentioned, Axis 5 of the ENIPD 2021–2025 is dedicated to promoting autonomy and independent living, with its second general objective being to empower institutions and communities to support the autonomy and independent living of persons with disabilities. One of the measures/actions under this objective involved "reassessing, within the framework of the PRR, the social services provided by Occupational Activity Centres ('CAO'), Independent Living Residences and Residential Homes, Support Homes and the Centre for Care, Support and Social Rehabilitation for persons with disabilities and Impairments" (EE5 - 2.1.2).

As stated in the ENIPD 2021–2025 Implementation Report, in 2021 this measure was rescheduled, with implementation targets of 25% proposed for the following three years. Under the PRR, 56 applications were approved, creating 1,452 places in CACI, and in 2023, 49 applications for CACI were approved. However, the INR, I.P. (now IDiPD, I.P.) itself clarifies that in 2024 there was a "series of withdrawals and revocations in both programmes (CACI and RAI's, due to various constraints on the part of the entities." (INR, I.P., 2025a, p. 186). **The expansion of places and projects, including through extraordinary funding, is an indicator of installed capacity, but does not, in itself, measure the implementation of Article 19, which requires tangible outcomes of inclusion in the community and genuine choice.** Thus, in addition to quantitative targets, monitoring must incorporate outcome indicators (*e.g.* community participation, autonomy, transitions to community-based solutions and a reduction in institutionalisation pathways), in order to ensure that public investment translates into effective opportunities for independent living.

With regard to the number of places, measure 1.1.3. of Axis 6, which aimed to "consolidate and strategically adapt the network of social facilities for Persons with disabilities through the contracting of places, to be filled on the recommendation of the Social Security Institute's services (reserved places)", was considered by the INR, I.P. (now known as IDiPD, I.P.) as 70% implemented in 2024, despite there having been a "percentage increase in the number of places in CACI and Residential Homes reserved for Social Security, compared to the previous year / 5% in each year from 2021 to 2025". According to the INR, I.P. (now known as IDiPD, I.P.) "the expansion of places should continue, particularly in CACI" (INR, I.P., 2025a, pp. 203–204).

In 2021, with the approval of Ministerial Order No. 70/2021 of 26 March, the CAOs were replaced by the CACIs. This legislative amendment aimed to adapt the regulatory framework to a perspective that views "employment as a process and instrument for the empowerment, training and skills development of Persons with disabilities and impairments, with a view to their autonomy, from a social inclusion perspective." (Ordinance No. 70/2021, of 26 March 2021, preamble).

The CACI is intended for "persons with disabilities, aged 18 or over, who are unable, either temporarily or permanently, to continue their educational pathway or pursue

professional activity on their own, or who are in the process of socio-professional inclusion, particularly between work placements." (Ordinance No. 70/2021 of 26 March 2021, Article 5). With a view to achieving their stated objectives (Article 4), the CACI centres carry out occupational activities (Article 9), therapeutic activities (Article 10), activities involving interaction with the environment (Article 11), socially useful activities (Article 12) and activities aimed at social and professional inclusion (Article 13). These activities must be planned and organised in an "individualised" manner, taking into account the abilities, functionality, interests and needs of the person with a disability and "respecting their choices, needs, interests and wishes." (Ordinance No. 70/2021, of 26 March 2021, Article 8).

Pursuant to the provisions of Article 16(2)(c), the organisation managing the CACI undertakes, in the development of socially useful activities and activities aimed at social and professional inclusion, to ensure the monthly payment of monetary compensation to the person with a disability. The amount of the compensation is calculated "according to the nature and complexity of the tasks performed" and is set at between 10% and 50% of the IAS, which in 2026 corresponds to a range of values between €53.71 and €268.56 (Ordinance No. 70/2021, of 26 March 2021, Article 19).

Given the nature of the socially useful and skills-building activities carried out, it is essential to ensure a clear legal distinction between training/occupation and situations likely to take on the characteristics of employment, particularly where there is regularity, subordination and the generation of economic value. Where such elements are present, risks of precarious and unprotected work must be prevented, ensuring a framework compatible with Articles 27 and 28 of the CRPD and adequate safeguards for social and economic protection, and dignity at work. **This clarification is crucial to ensure that the evolution of the CACI model does not result in collective responses that substitute for the right to independent living, but rather functions as a transition tool towards community inclusion and, where appropriate, access to the open labour market.**

Action by the Me-CDPD

In 2025, a proposal to amend Ordinance No. 70/2021 regulating CACI was submitted to the Me-CDPD by the Secretary of State for Social Action and Inclusion, with a request for an opinion in accordance with its remit and powers. This request and the analysis of this proposal resulted in Opinion No. 05/Me-CDPD/2025, dated 10 November.

Without repeating the detailed analysis set out in that opinion regarding the proposed amendment itself. However, it is important to reaffirm that t**he Me-CDPD considers that the revision of the Ordinance should be regarded as a strategic opportunity**

to consolidate the national commitment to the CRPD. In particular, he progressive transformation of social responses towards independent living and community-based models should be ensured, through person-centred funding, universal accessibility and the effective participation of Persons with disabilities. (Me-CDPD, 2025e, p. 21)

The Me-CDPD reiterates the importance of ensuring that CACI services evolve into a mechanism for promoting empowerment, equality and full citizenship. To this end, it is essential to introduce structural and procedural adjustments that ensure:

- the integration of robust monitoring mechanisms, including outcome and impact indicators on quality of life and community inclusion [for every person with a disability attending a CACI service];
- the progressive replacement of collective services with personalised, flexible and community-based support, in accordance with Article 19 of the CRPD and General Comment No. 5 (2017);
- the orientation of CACI activities towards empowerment, autonomy and social participation, ensuring measurable prospects for inclusion and transition to open labour market employment;
- the recognition and establishment of a clear legal framework for activities generating economic value, ensuring the labour and social protection provided for in Articles 27 and 28 of the CRPD and General Comment No. 8 (2022);
- the establishment of permanent mechanisms for the participation of persons with disabilities and their representative organisations, in accordance with Articles 4(3) and 29 of the CRPD; and
- specific training for professionals and supervisory bodies in the CRPD's human rights model, so that the assessment of CACI is guided by criteria of dignity, inclusion and self-determination, and not merely by physical or administrative parameters." (Me-CDPD, 2025e, pp. 20–21).

In this context, **the Me-CDPD recommends a structural review of the CACI social response model, ensuring the progressive replacement of collective structures with personalised, community-based and person-centred support, in accordance with Article 19 of the CRPD and General Comment No. 5** (2017).

Informal Carers and Support Framework

In 2019, the Statute of the Informal Carer was established in Portugal by Law No. 100/2019 of 6 September. This Statute has since undergone three amendments.

In summary, the first amendment, approved by Law No. 20/2024, essentially aimed to clarify the definition of a primary carer. The second amendment, introduced by Decree-Law No. 86/2024 of 6 November, broadened access to informal carer status (including persons without family ties), simplified recognition procedures, and strengthened support, respite and monitoring measures. Finally, the third amendment, introduced by Decree-Law No. 138/2025 of 29 December, revised the support allowance for primary informal carers, integrating it into the family protection subsystem and reinforcing its function as a mechanism to address dependency-related costs.

In parallel, several regulatory instruments have been adopted and amended. The following are particularly relevant:

- Regulatory Decree No. 1/2022, which establishes the framework for recognition of informal carer status and associated support measures for informal carers and care recipients, in the consolidated version (incorporating the amendments of Ministerial Order No. 139/2022 of 22 April, Regulatory Decree No. 5/2024 of 6 November and Decree-Law No. 138/2025 of 29 December).

- Ordinance No. 335-A/2023 of 3 November, which regulates respite support for informal carers, in its consolidated version(amended by Ordinance No. 21/2026 of 21 January).

Upon its entry into force, Regulatory Decree No. 1/2022 repealed several previous ordinances governing the recognition and operation of the informal carer framework, consolidating the applicable legal regime.

Within the ENIPD 2021–2025, under EE 6 (social measures, services and support), in EE 6, concerning social measures, services and support, under General Objective 1 “To promote, expand and enhance an innovative network of social services, facilities and support, tailored to the characteristics of the territories and the profile of the needs of Persons with disabilities and their families”, Specific Objective 1.4 is set out. “To promote measures and support programmes for Persons with disabilities in a situation of e dependency and their carers, which give effect to their recognition in the Statute of the Informal Carer” (ENIPD 2021–2025, 2021, p. 56).

Under this Specific Objective, four measures/actions were envisaged, including 1.4.1. “Implement support measures for informal carers as provided for in the relevant statute” and 1.4.4. “Create a definitive model for the informal carer support allowance”, both of which require legislative implementation (ENIPD 2021–2025, 2021, pp. 56–57). According to the Report on Activities Carried Out under ENIPD 2021–2025 up to 31 December 2024, these measures were formally considered implemented following the adoption of Regulatory Decree No. 1/2022 of 10 January (Regulatory Decree No. 1/2022, of 10 January 2022, Article 47.o ; INR, I.P., 2025a, pp. 228, 233).

The other two measures envisaged under this Specific Objective were: 1.4.2. “To define a training framework for informal carers providing care to Persons with disabilities in situations of dependency”, the indicators for which consisted of a training plan developed (1) and the number of training and capacity-building activities (5 in 2023 and 15 in 2024); and 1.4.3., which involved “creating and defining mechanisms and indicators for monitoring and evaluating pilot projects, enabling the production of statistical information, in particular regarding the characterisation of the needs and measures applied to informal carers of Persons with disabilities in situations of dependency”. (ENIPD 2021–2025, 2021, pp. 56–57).

By the end of 2024, the measure 1.4.3 had not been fully implemented, with targets postponed to 2025. In 2024, according to the implementation report, measure 1.4.2. was consolidated into a single activity, with a new indicator proposed consisting of the “delivery of training content in the specific field of disability” and the target transferred to 2025 (INR, I.P., 2025a, pp. 229, 231). Regarding the number of training courses delivered, the report indicated various activities carried out by the District Centres of the Social Security Institute, I.P., stating that: “although these courses are not included in the framework set out in this measure, because, as mentioned in the previous section (relating to , the training plan indicator has since been amended), this is still under development; however, given the scope, relevance and number of courses delivered, the indicator is considered to have been met.” (INR, I.P., 2025a, p. 231).

The publication of the recent Ministerial Order No. 21/2026/1 of 21 January introduces the first amendment to Ministerial Order No. 335-A/2023 of 3 November, “which defines and establishes the terms and conditions for informal carers’ respite, and creates the Caregiver Exchange pilot project, which aims to ensure the continuity of care for the care recipient in situations of temporary absence of the informal carer.” (Article 1) The decree introduces three main pillars: 1. Strengthening the carer’s right to respite; 2. Creation of the Caregiver Exchange pilot project; and 3. Strengthening monitoring and evaluation (Ordinance No. 21/2026/1, of 21 January 2026).

Action by the Me-CDPD

As previously noted, **since 2019 the Informal Carer Statute and its associated regulations have undergone several successive amendments.** In late 2025 and early 2026, two legislative instruments were adopted amending both the framework and the regulations underpinning it: Decree-Law No. 138/2025 of 29 December and Ordinance No. 21/2026 of 21 January. However, **of the various legislative acts adopted, the Me-CDPD has issued a position on only three of them, two of which were analysed on its own initiative through a recommendation.** Accordingly, in this field, the Me-CDPD issued:

- Opinion No. 1/Me-CDPD/2024, on Draft Law No. 816/XV/1, to amend the Statute of the Informal Carer, which ultimately gave rise to Law No. 20/2024 (which introduced the second amendment to the Statute of the Informal Carer);
- Recommendation No. 1/Me-CDPD/2024, on Decree-Law No. 86/2024 of 6 November, amending the Informal Carer Statute; and Regulatory Decree No. 5/2024 of 6 November, which sets out the terms and conditions for the recognition of informal carer status, as well as support measures for informal carers and care recipients.

As noted above, **following the issuance of these opinions, the Informal Carer Statute has undergone further amendments that warrant detailed analysis by the Me-CDPD.** In particular, and in view of the multiple amendments, a comparative analysis is required between the recommendations issued by the Me-CDPD in 2024 and the new legislative instruments approved in the meantime. From a cross-cutting analytical perspective, and in light of Ordinance No. 21/2026 of 21 January, the importance of support for informal carers is recognised; however, its full compliance with the CRPD depends on a number of structural factors, namely: (i) ensuring equitable territorial coverage and the absence of regional disparities; (ii) tailoring responses to the individual needs of the person with a disability (not merely to the carer's respite); (iii) the qualifications, training and supervision of substitute carers; (iv) monitoring and evaluation based on human rights indicators; and (v) assessment of the impact on preventing institutionalisation and promoting independent living and inclusion in the community. The pilot nature of the Caregiver Exchange therefore requires a robust evaluation grounded in human rights outcomes, including autonomy, participation, continuity of care and quality of life for persons with disabilities.

However, as it is not possible in this context to carry out the detailed analysis required,the Me-CDPD reiterates the need to comply with the provisions of Article 3(2)(a) of Law No. 71/2019 of 2 September, which provides for consultation with the Me-CDPD on all draft legislation affecting the Rights of Persons with Disabilities.

Given its significance for persons with disabilities, the Informal Carer Statute must be thoroughly analysed in the light of the Convention.

The repeated failure to ensure formal and prior consultation, in addition to violating the provisions of the legal framework and undermining the requirements of dialogue and institutional cooperation under the CRPD, hinders the proper integration of the observations arising from this mechanism, resulting in reactive positions and belated corrections to legislative choices.

It is therefore **recommended that "measures be adopted to institutionalise and implement an appropriate procedure that ensures full compliance with current legislation, thereby preventing this practice from continuing. This procedure should prioritise formal and prior consultation with the Me-CDPD, strengthening the alignment of national legislative policies with the principles and provisions of the CRPD."** (Me-CDPD, 2024b, p. 2).

Overall, **the Me-CDPD recognises that the adoption of Ordinance No. 21/2026 of 21 January represents a significant development within the framework of the Informal Carer Statute, as it seeks to address a persistent gap regarding carer respite, while ensuring continuity of care for the care recipien.** This measure constitutes a positive step towards consolidating support measures, with the potential to improve the quality of life of persons with disabilities and their carers. However, its full effectiveness will depend on how it is implemented and monitored, particularly as regards territorial coverage, accessibility, responsiveness to individual needs, and contribution to the promotion of independent living and inclusion in the community, in accordance with Article 19 of the CRPD. It is essential to ensure that measures providing respite for carers and continuity of care do not divert focus from the rights holder — the person with a disability — nor substitute the State's obligation to ensure person-centred, individualised support, grounded in self-determination, free choice and the prevention of institutionalisation.

The evaluation of the Caregivers' Grant should therefore include a human rights impact assessment, covering indicators relating to autonomy, community participation, continuity of support and quality of life for the person with disabilities, as well as the effective prevention of institutionalisation. Only through robust mechanisms for monitoring, transparency and the participation of Persons with disabilities and their representative organisations will it be possible to ensure that this response reinforces, rather than limits, the substantive realisation of the right to independent living.

In this context, **we reaffirm the importance of ensuring that the development and implementation of the Informal Carer Statute remain fully aligned with the provisions of the CRPD, ensuring rights-based, person-centred responses underpinned by human rights assessment and monitoring mechanisms.**

Analytical Summary

Article 19 of the CRPD enshrines the right of persons with disabilities to choose where, with whom and how to live, on an equal basis with others, preventing segregation and institutionalisation. At the national level, relevant progress has been made, notably with the consolidation of MAVI/SAVI and the reconfiguration of social services such as the CACI, aiming to orient interventions towards empowerment, autonomy and community participation. However, the Me-CDPD considers that structural discrepancies persist between the regulatory and strategic framework and effective realisation of this right, particularly where collective responses persist that do not ensure genuine choice, equitable territorial coverage and person-centred, individualised support.

In this context, the Me-CDPD emphasises that the full implementation of Article 19 requires an integrated, measurable and time-bound policy of deinstitutionalisation and community inclusion, with adequate and predictable funding, personalised support (including personal assistance tailored to individual needs, avoiding standardised caps that limit autonomy or exception-based mechanisms which, in practice, restrict access to the levels of support necessary for the full realisation of their life choices), specific monitoring mechanisms guided by outcome and impact indicators (*e.g.* autonomy, participation, quality of life and transition to community-based solutions), and the effective participation of Persons with disabilities and their representative organisations (Article 4(3)). In particular, the Me-CDPD reaffirms that personal assistance is a form of support that enables the exercise of rights and not a welfare benefit; therefore, the introduction of means-testing for access to SAVI, without safeguards and a human rights impact assessment, carries a risk of regression and indirect discrimination, and may also lead to a reduction in the disposable income of Persons with disabilities or the transfer of costs associated with the exercise of a fundamental right, undermining the prevention of institutionalisation and the essential content of Article 19.

This reasoning also applies to support measures for carers, including schemes such as the Carers' Allowance, which can make a significant contribution to the continuity of care. However, their compliance with the CRPD must be assessed from the perspective of the rights holder (the person with a disability), ensuring that the focus is not shifted away from the State's duty to provide individualised support centred on self-determination and independent living, nor that institutionalising solutions are reinforced.

The Me-CDPD considers that compliance with Article 19 depends on ensuring genuine choice, continuous training of professionals on the rights-based model, personalised support within the community and accountability for outcomes, progressively replacing collective models with flexible, person-centred responses under the person's effective control, provided within the community, with public transparency, independent evaluation and coherent cross-sectoral governance.

Finally, the Me-CDPD emphasises that independent living can take various forms within the framework of existing responses and support, provided that individualised support in the community, accessibility and participation are ensured, and that such forms do not reproduce institutionalising or segregating approaches. It is crucial to respect each person's wishes and preferences, ensuring they have access to accessible information and effective alternatives that allow for a free and informed choice regarding their life choices, with community inclusion as a cross-cutting principle of action, in accordance with Article 19 and the Committee's interpretation in General Comment No. 5.

Summary Table

Independent Living and Inclusion in the Community

Right to live independently and be included in the community (Article 19 of the CRPD)

A Universal Right

Article 19 of the CRPD recognises the right of persons with disabilities to choose where, with whom and how to live, on an equal basis with others, to access appropriate support and to participate fully in the community.

According to General Comment No. 5, this right applies to all persons with disabilities, irrespective of the type of impairment or level of support needs.

The right to independent living and community inclusion must be grounded in the will and preferences of the person, in close connection with Article 12 of the CRPD.

Current Situation

Portugal has developed a range of legislative and policy measures in this area, including:

- The Independent Living Support Model (MAVI/SAVI).
- Activity and Inclusion Support Centres (CACI).
- Strategic instruments, including the ENIPD.

Overall, progress has been made towards transitioning to community-based and person-centred models. However, collective and institutional models continue to persist, thereby limiting the full and effective participation of persons with disabilities in all aspects of life.

Identified Issues

- Gap between the legal framework and practice: Continued reliance on collective and institutional models of support.
- Limited territorial coverage and capacity: Resulting in unequal access to support services.
- Insufficient personalised support: Services do not consistently respond to individual needs and preferences.
- Limitations in personal assistance schemes: Standardised caps on support hours, with narrowly applied exceptional mechanisms.
- Risk of regression in the enjoyment of rights: The introduction of means-testing criteria for access to SAVI, which may negatively affect disposable income and autonomy and raise concerns regarding compliance with Article 19 of the CRPD.

Recommendations of the Me-CDPD

- **Full implementation of the right to independent living and community inclusion requires a coherent and comprehensive public policy that:**
- Ensures access to independent living for all persons with disabilities, regardless of support needs.
- Provides adequate personal assistance, tailored to individual needs and ensuring the person's control over support arrangements.
- Eliminates restrictive eligibility criteria, including those based on means-testing.
- Develops and implements a structured and time-bound national deinstitutionalisation strategy.
- Ensures adequate, predictable and sustainable funding.
- Implements a monitoring system based on human rights outcome indicators (*e.g.* autonomy, participation and quality of life.
- Guarantees the effective participation of persons with disabilities and their representative organisations.

Activities of the Me-CDPD

The Me-CDPD has, within its mandate, conducted a systematic and evidence-based analysis of the MAVI/SAVI model, issued opinions on legislative and budgetary proposals and consistently advocated for a human rights-based approach.

Ensuring compliance with the CRPD requires accessible information on available support and alternatives to institutional living arrangements, comprehensive training for professionals on the human rights model of disability, and governance frameworks that guarantee personalised, community-based support.

Personal assistance is a key enabling measure for the exercise of the Rights of Persons with Disabilities.

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

States Parties shall take all appropriate measures to ensure that persons with disabilities can exercise the right to freedom of expression and opinion, including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice, as defined in article 2 of the present Convention, including by:

a) Providing information intended for the general public to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities in a timely manner and without additional cost;

b) Accepting and facilitating the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication of their choice by persons with disabilities in official interactions;

c) Urging private entities that provide services to the general public, including through the Internet, to provide information and services in accessible and usable formats for persons with disabilities;

d) Encouraging the mass media, including providers of information through the Internet, to make their services accessible to persons with disabilities;

e) Recognising and promoting the use of sign language.

Article 21
Freedom of expression and opinion, and acess to information

General Framework

Article 21 encompasses two interdependent dimensions: the right to freedom of expression and access to information, and the obligation of States Parties to ensure that information and communication are accessible. Article 9(2)(e) of the CRPD requires States Parties to take appropriate measures to provide forms of assistance and intermediaries, including professional sign language interpreters and readers, in order to facilitate accessibility to buildings and other facilities open to the public. Article 21 therefore complements Article 9 by focusing specifically on accessibility of information and communication as an integral component of the right to freedom of expression and access to information (Flynn, 2015, p. 38).

Article 21 also imposes obligations on both public authorities and private entities providing services to the public, requiring the provision of information and services available in accessible formats, in accordance with subparagraph (c)

Freedom of expression and information is enshrined in the Constitution of the Portuguese Republic, which provides that “everyone has the right to freely express and disseminate their thoughts through speech, images or any other means, as well as the right to inform, to be informed and to receive information, without hindrance or discrimination” (Article 37(1)).

At the international level, Article 19 of the UDHR guarantees the right to freedom of opinion and expression, while Article 19 of the ICCPR defines this right as including “the freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of one’s choice. (...)”.

Freedom of expression is also protected under Article 10 of the European Convention on Human Rights. Similarly, Article 11 of the Charter of Fundamental Rights of the European Union guarantees the right to freedom of expression, including “the freedom of opinion and the freedom to receive or impart information or ideas without interference by any public authority and regardless of frontiers.”

Observations, recommendations and developments

In its 2016 Concluding Observations on Portugal, the Committee expressed concern regarding restricted access to information and communication for persons with disabilities, due to the lack of accessible formats and technologies suitable for different types of disability. In paragraph 41, the Committee recommended that the State adopt the necessary measures to ensure the effective implementation of legislation in this area, guaranteeing access to accessible formats and appropriate technologies for all persons with disabilities, regardless of their support needs. Including sign language, professional sign language interpreters, Braille, augmentative and alternative communication, and other accessible means, modes and formats of communication of their choice, including easy-to-read formats. The Committee also recommended the formal recognition of Portuguese Sign Language and Braille.

The failure to provide information available in accessible formats may constitute discrimination on the basis of disability under Article 5 of the CRPD, where it prevents or limits the exercise of rights on an equal basis with others.

With regard to legislative developments, Decree-Law No. 126/2017 of 4 October, which formally recognises the Braille system in Portugal, is particularly noteworthy. The Braille system is defined as a universal tactile reading and writing code based on a six-dot matrix, applicable across multiple fields, including language, mathematics, music and information technologies (Article 2(1)–(2)).

In terms of public policy, the ENIPD 2021–2025 includes a range of measures aimed at ensuring the right to freedom of expression and access to information.

Measures aimed at promoting accessibility to information and communication are included both under the specific objective dedicated to this area (SO2–1.3) and across other strategic objectives. Notable examples include:

- Promotion of awareness-raising initiatives among political parties to ensure accessible political communication (SSO1–1.2.6.) – 77% implemented as of 31 December 2024;

- Ensuring that election campaigns and public service broadcasts are accessible (EE1–1.2.7.) – 100% implemented;

- Adaptation of information on access to social services and benefits into accessible formats (EE6–1.1.6.) – 60% implemented (INR, I.P., 2025a, pp. 25–26; 27; 209–210).

In 2019, within the SIMPLEX+ programme, the Portuguese Government published a Practical Guide aimed at supporting the autonomy, citizenship and inclusion of persons with disabilities (INR, I.P. & Portuguese Republic, 2019b, p. 6). The Guide provides clear and accessible information on rights, benefits and support services across multiple areas, including education, employment, social protection, transport and accessibility. (INR, I.P. & the Portuguese Republic, 2019b).

The publication of this Guide was included as an indicator under Measure 1.2.1 of Axis 5 of the ENIPD 2021–2025, which aimed to ensure the availability of information relevant to independent living through inclusion support networks. (ENIPD 2021–2025, 2021, p. 48; INR, I.P., 2025a, p. 177).

In Strategic Objective 2 of the ENIPD 2021–2025 (promotion of an inclusive environment), under Specific Objective 1.3. "Promoting accessibility to information and communication", eight measures were planned (1.3.1. to 1.3.8.). Of these measures, only three were considered fully implemented by 31 December 2024, IDiPD, I.P. (at the time designated as INR, I.P.) considered only 3 to be 100% implemented: 1.3.6. "Promote the recognition of websites with the Accessibility and Usability Seal through training and support"; 1.3.7. "Make the usability and accessibility rankings of Public Administration websites and portals available online"; and 1.3.8. "Create an accessible information aggregation platform dedicated to issues relating to Persons with disabilities" (INR, I.P., 2025a, pp. 74–89).

The partial implementation of these measures reflects some progress, but also highlights persistent gaps in implementation, monitoring and impact assessment, raising concerns as to whether strategic commitments are effectively translating into tangible outcomes for persons with disabilities.

Portuguese Sign Language (Língua Gestual Portuguesa – LGP)

The protection and promotion of LGP constitutes a State obligation under Article 74(2)(h) of the Constitution of the Portuguese Republic.This constitutional provision ensures the promotion of the full inclusion of deaf persons in society, recognising LGP as a vehicle of cultural and linguistic expression (Me-CDPD, 2022c, p. 2). LGP is constitutionally recognised as a form of cultural expression and as an instrument for access to education and equal opportunities. As such, it benefits from a specific level of legal protection. Accordingly, the refusal to allow or facilitate the use of sign language constitutes discrimination on the basis of disability (Law No. 46/2006, Article 4(d)).

Law No. 89/99 of 5 July establishes the legal framework governing access to and the practice of the profession of sign language interpreter.

This petition led to Draft Law No. 402/XIV, submitted by the Left Bloc, which was ultimately rejected. In 2021, the Assembly of the Republic recommended that the Government initiate a revision of the legal framework, in consultation with organisations representing interpreters and the deaf community. However, the law remains unchanged since its adoption in 1999.

The need to revise this legal framework is further reinforced by international developments, including the European Parliament Resolution of 23 November 2016, the United Nations General Assembly Resolution of 19 December 2017, and the Parliamentary Assembly of the Council of Europe Resolution on the protection and promotion of sign languages.

In 2013, Order No. 15586/2013 established a Working Group on LGP, composed of experts and representatives, tasked with monitoring developments and addressing issues related to Portuguese Sign Language, in particular ensuring high standards in its development, use and teaching, and promoting its dissemination (Order No. 15586/2013, paragraphs 2(a) and (b)). In 2017, the Assembly of the Republic adopted Resolution No. 214/2017, recommending that the Government promote, develop and support the teaching of LGP.

Within the ENIPD 2021–2025, Measure 1.2.3., under the specific objective of strengthening the conditions for the exercise of rights, provides for the assessment and submission of a draft law recognising the linguistic rights of the deaf community (ENIPD 2021–2025, 2021, p. 21). As of 31 December 2024, the measure was reported as 25% implemented; however, the basis for this assessment remains unclear, as the only information available refers to the establishment of a Working Group, which completed a survey on the recognition and status of sign languages across EU Member States, and the preparation of the draft law was not completed, reportedly due to the reallocation of resources to other priority projects.

Implementation has been deferred to 2025, with the LGP Unit responsible for reviewing the targets (INR, I.P., 2025a).

In this context, Specific Objective 2.1.4 of the ENIPD 2021–2025 aims to expand accessibility of communication in public services, which is realised through implemented through two measures: (i) the development of a sign language interpretation service for use across central public administration services; and (ii) the consolidation of a sign language interpretation service within the National Health Service (SNS 24) (ENIPD 2021–2025, 2021, p. 33). In 2024, the launch of a call centre providing real-time sign language interpretation was postponed to the second half of 2025, with implementation reported at 75% (INR, I.P., 2025a, p. 90). The second measure led to the launch, in 2021, of an accessible video call service through the SNS 24 portal and mobile application (INR, I.P., 2025a, p. 91).

On 13 February 2026, the Assembly of the Republic adopted Resolution No. 41/2026. Although this resolution does not directly address Portuguese Sign Language (LGP), it is relevant in the broader context of legislative developments concerning persons with hearing impairments.

The Resolution recommends that the Government improve the living conditions of persons with hearing impairments, including by: (i) publishing data on the number of persons with hearing impairments in Portugal; (ii) promoting public awareness campaigns; (iii) strengthening early hearing screening within the National Health Service; and (iv) progressively increasing public funding for hearing aids, with a view to full reimbursement, particularly for persons with limited financial resources (Assembly of the Republic Resolution No. 41/2026, 2026).

Action by the Me-CDPD

To date, the Me-CDPD has issued four recommendations concerning the recognition and protection of Portuguese Sign Language (LGP):

- **Recommendation No. 1/Me-CDPD/R/2017**, calling for the adoption of legislation recognising the linguistic rights of deaf persons and establishing Portuguese Sign Language (LGP) as a language in its own right (Me-CDPD, 2017g);
- **Recommendation No. 2/Me-CDPD/2021,** reiterating the need for a legislative initiative formally recognising LGP as a language in its own right (Me-CDPD, 2021b);
- **Recommendation No. 2/Me-CDPD/2022,**recommending the inclusion of LGP in the European Charter for Regional or Minority Languages (*e.g.* Mirandês and Barranquenho) (Me-CDPD, 2022c);
- **Recommendation No. 1/Me-CDPD/2023,** proposing constitutional amendments to strengthen the protection of the Rights of Persons with Disabilities, including LGP (Me-CDPD, 2023b).

Across all recommendations, **the Me-CDPD has consistently emphasised the obligation to ensure the participation of the deaf community and its representative organisations**, in accordance with Article 4(3) of the CRPD.

Recently, Law No. 45-A/2024 of 31 December, which approved the 2025 State Budget, provided, in Article 313, for the recognition of LGP in 2025 as an official means of communication and expression of the Portuguese State. However, to date, no legislative measure recognising LGP has been approved. The absence of legislative implementation to date undermines the consistency between budgetary commitments and effective regulatory action.

In line with its previous recommendations, **the Me-CDPD reiterates the need to adopt legislation recognising LGP as a language in its own right**, to update Law No. 89/99 of 5 July, and to strengthen the constitutional protection and promotion of LGP.



Analytical Summary

The implementation of Article 21 of the CRPD in Portugal is intrinsically linked to Articles 9 and 29, forming a coherent normative framework: universal accessibility (Article 9) constitutes the structural condition for the effective exercise of freedom of expression and access to information and communication (Article 21), and a prerequisite for full and informed participation in political and public life (Article 29).

Despite significant normative policy developments, structural gaps persist, particularly in the systematic provision of information in accessible formats, in the recognition and implementation of the linguistic rights of the deaf community, and in the consistent availability of communication accessibility solutions. These shortcomings continue to limit civic and democratic participation on an equal basis. In this regard, it is essential to consolidate a coherent legislative framework, supported by adequate funding, measurable targets, and robust monitoring and accountability mechanisms, while ensuring the active participation of persons with disabilities and their representative organisations.

The effectiveness of these rights requires not only legal recognition, but also effective implementation, adequate budgetary allocation, and periodic evaluation based on objective indicators. Only through such an integrated approach can formal obligations be translated into tangible results, ensuring that no person with a disability is excluded from access to information, communication and democratic participation.

Summary Table

Freedom of expression and opinion, and access to information

Right to accessible information and communication on an equal basis with others (Article 21 of the CRPD)

Accessible information is a precondition for the effective exercise of citizenship

Article 21 of the CRPD guarantees persons with disabilities the right to access information in accessible formats, to freedom of expression and opinion, and to communicate through all forms of communication of their choice (including sign languages, easy-to-read formats, Braille and assistive technologies).

The Me-CDPD considers that Articles 9, 21 and 29 are structurally interconnected:

- Article 9 (Accessibility): The physical, digital and communication conditions required to access information.
- Article 21 (Information and communication): The right to seek, receive and impart information in accessible formats.
- Article 29 (Participation in political and public life): The ability to vote, stand for election and participate in public life on an informed and equal basis.

Current Situation

Portugal has established a legal and policy framework in this area, including:

- The digital accessibility regime, notably Decree-Law No. 83/2018.
- The constitutional recognition of Portuguese Sign Language (LGP).
- Accessibility measures in public services and institutional communication.

Identified Issues

- Lack of systematic accessibility of information: Public information is not consistently available in accessible formats.
- Uneven implementation of legal standards, including non-compliance with existing obligations.
- Gaps in institutional communication: Limited use of accessible and multi-format communication.
- Shortcomings in the full operationalisation of Portuguese Sign Language and in support for the deaf community.

Identified Issues

- Inequalities in access to digital information: Non-compliant platforms and content.
- Direct impact on autonomy: Limiting access to services, informed decision-making and participation in democratic and civic life.

Recommendations of the Me-CDPD

Ensuring access to information, communication as well as full participation of persons with disabilities, requires:

- A strengthened legal and enforcement framework for universal accessibility, applicable across both public and private sectors.
- The availability of all public information in accessible formats as a standard requirement.
- Capacity-building of public authorities on accessible and inclusive communication.
- Active participation of persons with disabilities and their representative organisations in the design and development of communication solutions.

Activities of the Me-CDPD

In this field, the Me-CDPD has promoted the accessibility of institutional information, developed accessible content, including easy-to-read formats, and contributed to initiatives related to civic and electoral participation, including through its participation in a working group with the National Electoral Commission.

Access to information is a fundamental right and a prerequisite for the effective exercise of citizenship.

Article 24
Education

1. States Parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an inclusive education system at all levels and life long learning directed to:

The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;

The development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their fullest potential;

Enabling persons with disabilities to participate effectively in a free society.

2. In realizing this right, States Parties shall ensure that:

Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;

Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;

Reasonable accommodation of the individual's requirements is provided;

Persons with disabilities receive the support required, within the general education system, to facilitate their effective education;

Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.

3. States Parties shall enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community. To this end, States Parties shall take appropriate measures, including:

Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring;

Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;

Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.

4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.

5. States Parties shall ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others. To this end, States Parties shall ensure that reasonable accommodation is provided to persons with disabilities.

Article 24
Education

General Framework

Education is a key factor in enabling the acquisition of knowledge and skills necessary for the development of personal autonomy, economic independence and full participation in society, as well as for fostering social relationships and support networks (Kayess & Green, 2017).

Article 24 establishes the right to education for persons with disabilities without discrimination and on the basis of equal opportunity, grounded in the principle of inclusive education and requiring the provision of reasonable accommodation in accordance with individual needs (Kayess & Green, 2017, pp. 60–61).

As emphasised by the Committee in General Comment No. 4, despite progress, millions of persons with disabilities continue to be deprived of the right to education. For many others, education remains available only in segregated settings, often of inferior quality (General Comment No. 4 (2016) on the right to inclusive education, para. 3).

This article requires States Parties to adopt effective measures to support persons with disabilities within the "general education system, at all levels", and stipulates that all support measures must be provided in environments that maximise the academic and social development of Persons with disabilities. The emphasis is thus on the creation of an inclusive education system that effectively supports the full participation of persons with disabilities." (Kayess & Green, 2017, p. 61).

Thus, in contrast to the special education model, the Convention, in its Article 24, based on the human rights model of disability, adopts the inclusive education model as its reference (Me-CDPD, 2017a).

In General Comment No. 4, the Committee highlights the importance of distinguishing between exclusion, segregation, integration and inclusion, pointing out that "simply placing students with disabilities in mainstream classes, without accompanying structural changes such as in organisation, curriculum, and teaching and learning strategies, does not constitute inclusion." In other words, integration does not, in itself, guarantee the transition from a paradigm of segregation to a model of inclusion for students with disabilities; rather, what is required is "a process of systemic reform that incorporates changes and adaptations in content, teaching methods, approaches, structures and educational strategies, with the aim of overcoming barriers,

guided by a vision that seeks to provide all students in the relevant age group with an equitable and participatory learning experience, as well as an environment that best meets their needs and preferences." (General Comment No. 4 (2016) on the right to inclusive education, 2016, para. 11).

In addition to Article 24, the realisation of the right to inclusive education must be read in conjunction with cross-cutting provisions of the CRPD, in particular: Article 5 (Equality and non-discrimination), Article 2 (Definitions), Article 7 (Children with disabilities), Article 9 (Accessibility), Article 8 (Awareness-raising), Article 4(3) (Participation of Persons with disabilities and their representative organisations in the development and implementation of policies) and Article 31 (Statistics and data collection). This framework highlights that inclusive education is not limited to the existence of shared settings, but requires adequate material conditions, accessibility, individualised support measures, systemic transformation and robust monitoring mechanisms to ensure substantive equality and effective participation in the education system.

At the European level, the Charter of Fundamental Rights of the European Union reinforces this framework by enshrining the right to education (Article 14), non-discrimination (Article 21) and the inclusion of Persons with disabilities (Article 26).

According to the Committee's established understanding, the right to inclusive education also reflects the general principle set out in Article 3(h) of the CRPD, which stipulates 'respect for the developmental capacities of children with disabilities and the right of children with disabilities to preserve their identities' (General Comment No. 4 (2016) on the right to inclusive education, 2016, para. 5).

Ensuring inclusive, equitable and quality education, and promoting lifelong learning opportunities for all is SDG 4 in the 2030 Agenda. In particular, target 4.5 should be highlighted: "By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the most vulnerable, including Persons with disabilities, indigenous peoples and children in vulnerable situations"; and target 4.a. "Build and improve physical education facilities that are child-friendly, disability-sensitive and gender-sensitive, and that provide safe, non-violent, inclusive and effective learning environments for all" (United Nations, 2015c).

Other provisions of international instruments are worth mentioning in the context of this article, notably Article 15 of the European Social Charter, which stipulates that the Parties undertake to "take the necessary measures to make guidance, education and vocational training available to Persons with disabilities within the framework of the general education system wherever possible, or, where necessary, through specialised public or private institutions" (Article 15(1)).

The right to education is enshrined in Article 26 of the UDHR and Article 13 of the

ICESCR. Equality of access to education is also provided for in Article 5(e)(v) of the International Convention on the Elimination of All Forms of Racial Discrimination; in Article 10 of CEDAW; and specifically regarding children's right to education, the provisions of Articles 28 and 29 of the CRC should be highlighted.

Mention should also be made of the Convention against Discrimination in Education of the United Nations Educational, Scientific and Cultural Organisation ("UNESCO"), which in its first three articles establishes the obligation of States Parties to eliminate and prevent any discrimination in the field of education.

At the constitutional level, it is important to note Article 73(1), which stipulates that "everyone has the right to education and culture" and, in particular, the provisions of Article 74(2)(g), which stipulates that, in implementing education policy, it is the State's responsibility to "promote and support access for citizens with disabilities to special education, where necessary". Notwithstanding the constitutional enshrinement of the right to education and culture (Article 73) and the State's responsibilities in educational matters (Article 74), the reference to "special education, where necessary" must be interpreted and applied in conformity with Article 24 of the CRPD, which mandates an inclusive education system and prohibits exclusion from mainstream education on the grounds of disability.

The Framework Law on the Education System, in its consolidated version, provides that one of the objectives of pre-school education is "to screen for maladjustments, disabilities or precociousness and to promote the best guidance and referral for the child"; and one of the objectives of basic education is "to ensure that children with special educational needs, due in particular to physical and mental disabilities, are provided with conditions appropriate to their development and the full use of their abilities" (Law No. 46/86 of 14 October, consolidated version, 2023, Article 5.(1), subpara. (h); (7), subpara. (j)).

The same legislation also sets out the scope, objectives and organisation of special education in Articles 20 and 21. According to the Framework Law on the Education System, special education aims at "the socio-educational rehabilitation and integration of individuals with specific educational needs due to physical and mental disabilities." (Article 20(1)). With regard to the organisation of special education, the Framework Law stipulates that it shall be organised "preferably according to diverse models of integration within mainstream educational establishments, taking into account specific support needs, and with the support of specialist teachers" (Article 20(1)).

However, on examining the remaining para.s of Article 21, which elaborate on and expand upon the provisions of para. 1, it is evident that the wording remains somewhat at odds with the Convention: "2 – Special education shall also be provided in specific institutions where the type and degree of the learner's disability demonstrably require it. 3 - Forms of special education aimed at the professional integration of persons with disabilities shall also be organised. 4 - Basic schooling for children and young Persons with disabilities must have curricula and programmes duly adapted to the

characteristics of each type and degree of disability, as well as forms of assessment appropriate to the specific difficulties. 5 - It is the responsibility of the State to promote and support special education for Persons with disabilities." (Law No. 46/86 of 14 October, consolidated version, 2023, Article 21, para.s 2–5).

The Framework Law on the Education System also provides in Article 42(4) that "in the design of buildings and the choice of equipment, the special needs" of persons with disabilities "must be taken into account".

These provisions may be read in conjunction with the provisions of subpara.s (h) and (i) of Article 4 of Law No. 46/2006 of 28 August, which prohibits and punishes discrimination on grounds of disability and aggravated health risk, and which stipulate that the following are considered discriminatory practices "the refusal or restriction of access to educational establishments, whether public or private, as well as to any means of compensation or support appropriate to the specific needs of students with disabilities;" and the "formation of classes or the adoption of other internal organisational measures in public or private educational establishments, based on criteria of discrimination on grounds of disability", unless such criteria are justified by measures of positive discrimination.

Law No. 38/2004 of 18 August, which sets out the general framework for the legal regime governing the prevention, habilitation, rehabilitation and participation of Persons with disabilities, states as one of its objectives the implementation of a comprehensive, integrated and cross-cutting policy on the prevention, habilitation, rehabilitation and participation of Persons with disabilities through, in particular, the "promotion of lifelong opportunities for education, training and work;" (Article 3(b)). This intention is further elaborated in Article 34, which stipulates that it is the responsibility of the State to adopt the "specific measures necessary to ensure access for Persons with disabilities to education and inclusive schooling, in particular through the allocation of resources and tools appropriate for accessible learning and communication."

Observations, recommendations and developments

In its Concluding Observations on Portugal (2016), the Committee addressed this issue in paragraphs 44 to 48, and addressed it extensively. In summary, the Committee expressed the following concerns (Committee on the Rights of Persons with Disabilities, 2016, para. 44):

> i) Although the majority of students with disabilities were enrolled in mainstream schools, the Committee expressed concern that austerity measures had led to insufficient human and material resources, thereby jeopardising access to quality inclusive education (para. 44).

The Committee further noted the existence of "model schools" for certain groups of

students with disabilities, including those who are deaf, blind, deafblind, visually impaired or autistic, considering that such arrangements constitute segregation incompatible with Article 24(2)(b) of the Convention (para. 45).

In addition, the Committee observed that, although a quota system existed for access to higher education, the State had not regulated the support that higher education institutions must provide to students with disabilities (para. 47). It also expressed concern regarding the restricted access to certain fields of study and professional qualifications for students with certain disabilities. (para. 47)

> ii) It restricted access to certain fields of study and professional qualifications for students with disabilities (para. 47).

In response, the Committee recommended that the State party:

> i) In close consultation with organizations of persons with disabilities, review education legislation in order to bring it into line with the Convention;
>
> ii) Adopt measures to provide additional resources and materials to ensure access to quality inclusive education for all students with disabilities, equipping public schools with the necessary resources to ensure the inclusion of all students with disabilities in mainstream classrooms (para. 46);
>
> iii) Taking into account the link between Article 24 of the Convention and SDG targets 4.5 and 4.a, ensure equitable access to all levels of education and vocational training, as well as the construction and modernisation of educational infrastructure, making it disability-sensitive and safe (para. 47);
>
> iv) Incorporate into legislation provisions regarding access for students with disabilities to higher education and vocational training, on an equal footing with other students, including through the provision of reasonable accommodation and necessary support services (para 48).

The Committee's recommendations highlight that the full implementation of Article 24 requires not only formal enrolment in mainstream education, but also the effective provision of adequate human, material and organisational resources to ensure high-quality inclusive education. In particular, the Committee emphasised that the maintenance of segregated structures or mechanisms that restrict access to certain fields of study constitutes a breach of the obligation of non-exclusion from the general education system on the basis of disability.

Ten years on from the issuance of the Concluding Observations, it is important to assess the extent to which these recommendations have been effectively incorporated into legislation, funding and administrative practices at national level.

In the ENIPD 2021–2025, education emerges as one of the fundamental dimensions of an inclusive society:

> "Citizenship is exercised on the basis of equality, equity and with a guarantee of non-discrimination, enabling full participation in all areas of life. The capacity to access the exercise of rights and duties and to achieve full inclusion depends on education tailored to the characteristics and specificities of each person, at every level of education, whilst also calling for work in conditions of equality and dignity, freely chosen, access to vocational training and qualifications, the development of potential, and the guarantee of vocational and professional rehabilitation." (ENIPD 2021–2025, 2021, p. 10)

In this regard, one of the ENIPD 2021-2025 key objectives (EO) concerns education and qualifications (EO3), which emphasises the need to ensure an inclusive school for all pupils and sets out the following objectives:

"**General Objective 1: to strengthen mechanisms supporting learning and the consolidation of the current inclusive education system.** Specific objectives:

> 1.1 — Reformulate early childhood intervention into an approach aimed at full inclusion;
>
> 1.2 — Deepen the inclusive education model in terms of access to quality educational and training opportunities and the transition to post-school life.

General Objective 2: to promote higher education qualifications for persons with disabilities. Specific objectives:

> 2.1 — Improve access to and attendance at higher education for persons with disabilities; 2.2 — Improve accessibility conditions.

From these General and Specific Objectives, 18 measures/actions were designed, each with one or more indicators. According to IDiPD, I.P. (at the time known as INR, I.P.), , as of 31 December 2024, the implementation rate of these measures relating to axis 3 – "education and qualifications" – stood at 22% (INR, I.P., 2025b, p. 11). In fact, of all the measures/actions, the only one considered to be 100% implemented as of 31 December 2024 was "EE3 – 1.2.4 Assess the review of the operating and funding models of the Inclusion Resource Centres", with the "production of the report 'Evaluation of the operation and funding of the Inclusion Resource Centres'" (INR, I.P., 2025a, p. 108).

The 22% implementation rate of the measures set out in Axis 3 of the ENIPD reveals a level of implementation that remains limited in light of the recommendations issued by the Committee in 2016. Furthermore, the only measure considered to have been fully implemented was the production of an evaluation report, which did not directly translate into structural reinforcement of human resources, curricular adaptation or

material improvement of conditions for inclusion in schools. This circumstance raises concerns regarding the progressive and effective fulfilment of the obligations arising from Article 24 of the CRPD.

Still within the context of public policy, the National Action Plan for the Rights of Children, 2022–2030, viewing children with disabilities as one of the most disadvantaged and vulnerable groups in our society, proposes the implementation of "early and systemic action, with measures to be promoted and implemented that empower the environment and life contexts (family, school, work, social, etc.), in order to guarantee their rights and inclusion." (National Action Plan for the Guarantee for Children, 2022–2030, 2023, p. 27). This vision is reflected in measures such as No. 29 of Strategic Objective 6 ("to ensure access to a quality educational response and activities in a school setting"), which aims to strengthen the response capacity of multidisciplinary teams supporting inclusive education (National Action Plan for the Guarantee for Children, 2022–2030, 2023, p. 42).

The emphasis on early intervention and capacity-building in living environments is directly grounded in Article 7 of the CRPD (Children with disabilities) and Article 24(2), which requires the provision of individualised and effective support from the earliest stages of the educational journey. However, the effectiveness of these measures will depend on their translation into the actual strengthening of multidisciplinary teams and the allocation of stable and adequate resources.

National Strategy for Citizenship Education

The National Strategy for Citizenship Education ("ENEC") was approved by Council of Ministers Resolution No. 127/2025 of 29 August.

This strategy was presented as a guiding framework for the Citizenship and Development component of the school curriculum, based on an "integrated and coherent approach, centred on the interdependence of Human Rights, Democracy and Political Institutions, Sustainable Development, Financial Literacy and Entrepreneurship, Health, Road Safety and Risk, Media, and Pluralism and Cultural Diversity" (National Strategy for Citizenship Education (ENEC), 2025, p. 1). However, **ENEC 2025 contains no explicit reference to the international and national legal frameworks on the Rights of Persons with Disabilities, including the Convention on the Rights of Persons with Disabilities.**

Action by the Me-CDPD

In 2025, the Me-CDPD issued, on its own initiative, Recommendation No. 4/ Me-CDPD/2025 within the public consultation process on the ENEC.

In this Recommendation, **the Me-CDPD emphasised that "ENEC 2025 must unequivocally incorporate the human rights model enshrined in the CRPD, ensuring its mainstreaming across the curriculum, capacity-building of the educational community, the active participation of children and young Persons with disabilities, and the systematic evaluation of the impact of the measures adopted. This is an essential step towards reinforcing the decisive role of schools and the school community in the current and future commitment to an inclusive, diverse, pluralistic, participatory society that is accessible to all."** (Me-CDPD, 2025l, p. 6). Specifically, the Me-CDPD recommended that the ENEC incorporate the following measures:

a. Explicit recognition of the CRPD

- Explicit inclusion of the Rights of Persons with Disabilities as a cross-cutting dimension of citizenship education, particularly in the areas of human rights, pluralism and cultural diversity, and health and well-being.
- Inclusion, within the Essential Learning Outcomes of the Citizenship and Development subject, of educational content on the human rights model advocated by the CRPD, with a focus on the principles of inclusion and universal accessibility.

b. Capacity Building and Participation:

- Provision for compulsory continuing professional development for the educational community (*e.g.* teachers, support staff, parents and carers) on inclusive education, functional diversity, universal design for learning and the rights of persons with disabilities, in accordance with Articles 8 and 24 of the CRPD.
- Promotion of the active participation of children and young persons with disabilities in defining and evaluating citizenship practices in schools, as provided for in Article 7 of the CRPD and in General Comment No. 7 (2018) on participation through their representative organizations.

c. Evaluation and Monitoring:

- Establishment of mechanisms for monitoring and evaluating the ENEC, with a view to assessing the Strategy's impact on the learning and civic participation of children and young people with regard to the inclusion of Persons with disabilities.
- The Portuguese population's perception of the Rights of Persons with Disabilities should be subject to evaluation and monitoring, and the proper implementation of the ENEC should contribute to full inclusion. (Me-CDPD, 2025l, pp. 4–5).

None of these measures were incorporated into the version approved by Council of Ministers Resolution No. 127/2025 of 29 August.

The absence of an explicit reference to the CRPD in a key instrument for citizenship and human rights education constitutes a significant gap in the framework of Portugal's obligations. Education for citizenship constitutes a key mechanism for implementing Article 8 of the CRPD (Awareness-raising), and is crucial for transforming social attitudes, preventing discrimination and promoting a culture of respect for the Rights of Persons with Disabilities. **The omission of the Convention undermines the integration of the human rights model within the education system and compromises the coherence between education policy and international commitments.**

Furthermore, the failure to incorporate the recommendations of the CRPD hinders the consolidation of a cross-cutting approach to disability as a structural dimension of human rights, limiting the link between Articles 7, 8 and 24 of the CRPD. **The absence of specific monitoring mechanisms regarding the inclusion of Persons with disabilities in the implementation of the ENEC also constitutes a gap in impact assessment, making it difficult to gauge the Strategy's contribution to the cultural shift necessary for the full realisation of inclusive education.**

Finally, in a context where the Committee on the Rights of Persons with Disabilities has consistently emphasised the need for systemic reforms in inclusive education, the explicit integration of the CRPD into the ENEC would constitute a structural measure to ensure coherence with international obligations and the sustainability of public policies in this area.

Inclusive education (Primary and Secondary Education)

At the time the Committee's Concluding Observations on Portugal (2016) were adopted Decree-Law No. 3/2008 of 7 January was in force, establishing the specialised support to be provided in pre-school, primary and secondary education in the public, private and cooperative sectors, in its consolidated version.

This Decree-Law was subsequently repealed in 2018 by Decree-Law No. 54/2018 of 6 July, which established the legal framework for inclusive education as a process aimed at addressing the diversity of needs and potential of all pupils, through increased participation in learning processes and in the life of the educational community.

To date, this Decree-Law has been amended on two occasions: first by Law No. 116/2019 of 13 September, which significantly altered the framework, justifying its consolidated republication (annexed to Law No. 116/2019 of 13 September); and secondly, by

Decree-Law No. 62/2023 of 25 July, extended provisions relating to assessment adjustments, amending only Article 28.

Decree-Law No. 54/2018 of 6 July, in its consolidated version, supplemented by two relevant regulatory instruments: Order No. 9726/2018 of 17 October, which establishes the national coordination team tasked with overseeing, monitoring and evaluating the implementation of Decree-Law No. 54/2018 of 6 July (implementing the provisions of Article 33(1) of that Decree-Law); and Ministerial Order No. 181/2019 of 11 June, in its consolidated version[22] which sets out the terms and conditions under which schools, within the scope of curricular autonomy and flexibility, may implement a management system covering more than 25% of the core curriculum frameworks for educational and training provision in primary and secondary education.

This Decree-Law establishes the principles and rules that guarantee inclusion, “as a process aimed at addressing the diverse needs and potential of each and every pupil, by increasing their participation in learning processes and in the life of the educational community”. It applies to schools, ranging from school clusters and non-clustered schools to vocational schools and pre-school, primary and secondary education establishments within the private, cooperative and solidarity-based networks (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023, Article 1, paras. 1 and 3).

Among the various guiding principles of inclusive education, particular mention should be made of the principle of "universal capacity for learning", which assumes that all learners have the capacity for learning and educational development; the principle of “equity”, which ensures that all children and pupils have access to the necessary support to realise their potential for learning and development, and the principle of “inclusion”, defined as the right of all children and pupils to access and participate, fully and effectively, in the same educational contexts (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023, Article 3, subparagraphs (a), (b) and (c)). The framework also sets out as guiding principles ‘personalisation’ (student-centred educational planning), ‘flexibility’ (flexible management of the curriculum, space and time), ‘self-determination’ (respect for personal autonomy); ‘parental involvement’ and ‘minimal interference’ (technical and educational intervention to the extent necessary) (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023, Article 3 (d) to (h)).

In accordance with the Inclusive Education Act, schools are required to include in their guiding documents the guidelines for creating a school culture where “everyone finds opportunities to learn and the conditions to fulfil their potential, responding to the needs of each pupil, valuing diversity and promoting equity and non-discrimination in access to the curriculum and progression throughout compulsory schooling.” These guidelines for inclusion must incorporate “a continuum of universal, selective and additional measures” (set out in indicators designed to assess their effectiveness) that respond to the diversity of pupils’ needs (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023, Article 5, paras. 1 and 3).

[22] Ordinance No. 181/2019 of 11 June was amended by Ordinance No. 306/2021 of 17 December.

"Universal measures" correspond to "the educational responses that the school makes available to all pupils with the aim of promoting participation and improving learning", such as pedagogical differentiation, curricular adaptations, curricular enrichment or the promotion of pro-social behaviour. (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023, Article 8 (1) and (2)).

"Selective measures" aim to "address learning support needs not met by the application of universal measures", such as tutorial support, the anticipation and reinforcement of learning, psycho-pedagogical support, non-significant curricular adaptations, or differentiated curricular pathways (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023, Article 9 (1), (2)).

"Additional measures" aim to "address significant and persistent difficulties in communication, interaction, cognition or learning that require specialised resources to support learning and inclusion" and take the form of measures such as repeating a school year by subject, significant curricular adaptations, the development of structured teaching methodologies and strategies, or the individual transition plan (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023, Article 10(1), (4)). The latter, drawn up three years before the age limit for compulsory schooling, is tailored to each young person with significant adaptations in line with their interests, skills and expectations, with a view to facilitating their transition to life after school (Article 2(i)).

The framework also identifies the human resources (including teachers specialised in inclusive education), organisational resources and specific community resources to be mobilised to support learning and inclusion. Organisational resources include, in particular, multidisciplinary teams supporting inclusive education (Article 12), learning support centres (Article 13) and reference schools (in the field of vision, for bilingual education and for early childhood intervention) (Decree-Law No. 54/2018 of 6 July, consolidated version, 2023).

In December 2025, a report was published on the "Evaluation of Inclusive Education" in Portugal, carried out by the Institute for Public and Social Policies of the Higher Institute of Labour and Business Sciences ("IPPS-ISCTE") (2025). Among its key findings, the study highlighted how Decree-Law No. 54/2018 "consolidated the value of inclusive education in Portugal, representing a step forward in equity and the personalisation of educational responses." That said, **according to the aforementioned report: "The relevance and social impact of the legislation are undeniable, but its full coherence, effectiveness and efficiency depend on a sustained consolidation of the conditions for its implementation. To ensure lasting impact and sustainability, it is necessary to strengthen practical training, optimise resource management and consolidate a culture of collaboration and continuous monitoring."** (IPPS-ISCTE, 2025, p. 105). In short, the report concluded that no major revision of Decree-Law No. 54/2018 appears to be required. The recommendations instead involve a clarification and refinement of certain concepts and a 'renewing' intervention in inclusive education, through the revision of guidelines, the strengthening of

resources, the consolidation of practices and quality monitoring (IPPS-ISCTE, 2025, pp. 104, 105).

In this sense, it can be inferred that **Decree-Law No. 54/2018 represents a significant step forward in bringing the Portuguese legal framework into line with the model of inclusive education** enshrined in Article 24 of the CRPD, by adopting a model based on gradual educational responses and the valuing of diversity. **However, the maintenance of structures such as reference schools requires continuous and independent monitoring and evaluation to ensure that they do not, in practice, result in indirect forms of segregation, in tension with the principle of non-exclusion from the general education system on the grounds of disability.**

As highlighted in the IPPS-ISCTE report (2025), **the full effectiveness of the system depends on the consolidation of implementation conditions, particularly with regard to the practical training of teachers (and the wider educational community), the appropriate management of specialised human resources, and the systematic monitoring of the quality of educational provision.** The existence of a regulatory framework aligned with the CRPD does not preclude the stable and sufficient allocation of resources, otherwise inclusion will remain predominantly in the formal sphere.

In this context, it is important to recall that Article 24 of the CRPD requires not only enrolment in mainstream schools, but also the provision of effective individualised support in settings that maximise academic and social development. Monitoring of the implementation of Decree-Law No. 54/2018 should therefore prioritise the assessment of the actual impact of universal, selective and additional measures on the full participation of students with disabilities and on reducing educational inequalities.

Action by the Me-CDPD

Within its mandate, the Me-CDPD has addressed this matter on two occasions:

- First, in the context of drafting the proposed amendment to Decree-Law No. 3/2008 of 7 January, which led to Decree-Law No. 54/2018 of 6 July, issuing Opinion No. 3/Me-CDPD/2017 (Me-CDPD, 2017a);
- The second time, on its own initiative, following the adoption of Decree-Law No. 54/2018 of 6 July, where the Me-CDPD analysed and compared which of the recommendations issued in the context of the first opinion had been incorporated or not into the final adopted version, resulting in Follow-up No. 3/Me-CDPD/2018 (Me-CDPD, 2018c).

In Opinion No. 3/Me-CDPD/2017, the Me-CDPD considered that, whilst it considered several aspects of the draft law to be positive in principle, the main area of concern related to the operational implementation of the law. In particular, the Me-CDPD

expressed concern regarding constraints arising from a lack of material and human resources, notably in terms of teacher training at all levels of education and the professional recognition and status of Portuguese Sign Language (LGP) teachers (Me-CDPD, 2017a, p. 51).

Furthermore, the Me-CDPD also drew attention to the maintenance of reference schools and the creation of reference schools for early intervention, which were highlighted by the Committee in its recommendations to Portugal (para. 44), noting that the new legislation should contribute effectively to greater equity among all pupils (Me-CDPD, 2017a, p. 52).

Thus, in Opinion No. 3/Me-CDPD/2017, the Me-CDPD made several recommendations, including suggesting specific drafting amendments to various articles of the draft law. However, as noted in Follow-up No. 3/Me-CDPD/2017, the Me-CDPD found that the recommendations were, to a large extent, not reflected in the final version of the legislation.

As has been seen, this legislation, since the issuance of the Follow-up in 2018, has already been amended twice, in 2019 and 2023, and the Me-CDPD was not consulted in any of these legislative processes. The Me-CDPD reiterates that the persistent failure to ensure formal and prior consultation constitutes a violation of the provisions of Article 3(2)(a) of Law No. 71/2019 of 2 September. Furthermore, this also contravenes the provisions of Article 4(3) of the CRPD, which requires States Parties to closely consult and actively involve Persons with disabilities and their representative organisations in the drafting and implementation of legislation and public policies that concern them. Effective consultation constitutes a structural guarantee of regulatory quality and compliance with the human rights model.

In Portugal, data from the ODDH (2025) indicate that early school leaving affects students with disabilities more significantly than those without disabilities (2025b, p. 14).

That said, **ten years after the Committee issued its observations to Portugal (2016), the Me-CDPD notes that most of the concerns identified remain substantially unaddressed.**

In particular, **the continuing shortage of special education teachers and human resources in Learning Support Centres constitutes a significant shortcoming** (FENPROF, 2025; Observatory on Disability and Human Rights (ODDH), 2025b, p. 16).

The persistence of differing rates of early school leaving and the shortage of specialised human resources highlight a persistent gap between the inclusive regulatory framework and its effective implementation in practice. The progressive

realisation of the right to inclusive education, in accordance with Article 24 of the CRPD, requires not only the maintenance but the continuous and progressive strengthening of the structural conditions for implementation, in order to prevent the perpetuation of educational inequalities.

Between 2010 and 2018, the number of children and young Persons with disabilities in mainstream state education increased by approximately 67%, whereas the number of specialist staff at schools' Inclusion Resource Centres increased by only around 8% (National Action Plan for the Guarantee of Children's Rights, 2022–2030, 2023, p. 28). More recently, in 2025, following a survey of school cluster management teams and non-clustered schools, FENPROF revealed that 23% of schools do not comply with inclusive education requirements due to insufficient human and material resources (FENPROF, 2025; Pinheiro & Barreto, 2025).

Similarly, on 9 January 2026, the Government announced its intention to increase funding per pupil for special education schools by 10% (XXV Government, 2026). Thus, **although the Ministry of Education and the CDPD recognise the urgent need for investment in inclusive education, it is essential to ensure that increased funding does not reinforce parallel or segregated approaches to the detriment of strengthening the mainstream education system.** In accordance with Article 24 of the CRPD, **the allocation of resources must prioritise full inclusion in the mainstream education system, ensuring effective individualised support in environments that maximise academic and social development.** The Committee, in its Concluding Observations (para. 44), had already warned of the risks associated with maintaining segregated structures, recommending the priority allocation of resources to mainstream schools.

In view of the above, **the Me-CDPD reiterates the need to ensure the effective realisation of inclusive education by strengthening material and human resources, in particular by encouraging the recruitment of teachers and specialist staff with expertise and knowledge in the field of disability. Promoting the recruitment of teachers and specialists in the field of disability is also a measure consistent** with Articles 8 (Awareness-raising) and 24 (Education) of the CRPD, **contributing to positive role models and the cultural transformation of the education system.**

Finally, although this matter extends beyond the strictly school context, **the Me-CDPD considers it important to highlight the intention to include in the EDPD 2026–2030 measures relating to inclusive Leisure Activity Centres**[23] (CATL). The promotion of inclusive CATL constitutes a key component of the coordinated implementation of Articles 7, 19, 24 and 30 of the CRPD, **ensuring that inclusion is not limited to the classroom but extends to community, recreational and social contexts.**

[23] Through collaboration between local councils, organisations representing persons with disabilities, and with project funding from the INR, I.P., pilot schemes for Inclusive CATL have emerged. These present themselves as an inclusive solution, complementing school terms and promoting a work-life balance for households with children and young people with different support needs (*e.g.* the Inclusive CATL of ARCIL – Association for the Rehabilitation of Maladjusted Citizens of Lousã (ARCIL CATL & INR, I.P., 2025).

The implementation of this measure should entail ensuring physical and communicational accessibility, providing for reasonable accommodation, adequate training for professionals, as well as the provision of specialised support whenever necessary, thereby preventing segregated solutions. By strengthening the participation of children with disabilities in leisure activities on an equal footing, inclusive CATL contribute to the development of autonomy, socialisation and community participation, constituting a structural measure to support families, promote social cohesion and ensure the effective exercise of rights.

Access to higher education

According to data from the European Disability Expertise Network, as reported by the ODDH, over the last five years (from the 2020/2021 to the 2024/2025 academic year), the number of students with disabilities in higher education in Portugal increased by 105.3% compared to 2020/2021 (2025b, p. 17). On the other hand, data from the same source indicate "significant disparities in higher education completion rates between people with and without disabilities in Portugal", highlighting the need to strengthen educational inclusion policies, as well as support mechanisms to ensure the retention and academic success of persons with disabilities (ODDH, 2025b, p. 17).

The significant growth in the number of students with disabilities in higher education is a positive sign regarding access to this level of education. However, the persistence of significant disparities in completion rates shows that increased enrolment does not in itself ensure substantive equality of opportunity. Article 24(5) of the CRPD requires States Parties to ensure not only access to higher education, but also participation and completion on an equal basis with others, through the provision of reasonable accommodation and appropriate support.

Article 20 of the Legal Framework for Higher Education Institutions stipulates that it is the responsability of the State "to ensure the existence of a system of educational support that promotes access to higher education and successful completion of studies", in particular through "the provision of support for students with special needs, namely those with disabilities" (Law No. 62/2007 of 10 September, consolidated version 2023, Article 20(6)(b)). Similarly, the Higher Education Funding Act stipulates that "specific support to be provided to students with disabilities" must be considered (Law No. 37/2003 of 22 August, consolidated version 2019, Article 20(4)).

In the area of access, it is also important to highlight the special quota scheme for candidates with disabilities within the National Competition for Access to Higher Education, provided for in the general regime for access to and entry into higher education (Decree-Law No. 296-A/98 of 25 September, consolidated version, 2026) and

implemented annually in the Ministerial Order approving the respective regulations[24]. This mechanism constitutes a positive action measure aimed at mitigating structural inequalities in access, consistent with Article 5(4) of the CRPD, as an instrument for promoting substantive equality. However, the existence of a special quota does not absolve the State from ensuring full compliance with Article 24(5), particularly with regard to ensuring reasonable accommodation, accessibility and appropriate support throughout the higher education cycle. The absence or insufficiency of reasonable accommodation may amount to discrimination on the grounds of disability, in accordance with Articles 5 and 24 of the CRPD.

Although the national legal system provides for specific support for students with disabilities, it is important to ensure that such mechanisms translate into concrete and effective measures, particularly in the areas of curricular adjustments, accessible assessment methods, digital accessibility, psycho-pedagogical support and individualised support. The absence or insufficiency of reasonable accommodation may constitute discrimination, in accordance with Articles 5 and 24 of the CRPD.

Monitoring of compliance with Article 24(5) in higher education should be based on indicators relating not only to enrolment students, but also to retention, progression, completion and dropout rates,, access to grants and satisfaction with the support provided, in line with Article 31 of the CRPD on data collection and monitoring.

Action by the Me-CDPD

To date, the Me-CDPD has issued three opinions in this area.

The first, Opinion No. 2/Me-CDPD/2018 of 17 May 2018, was issued in the context of the legislative process concerning the draft ministerial orders regulating the national access and admission competitions for public and private higher education for the 2018–2019 academic year.

In 2026, the Me-CDPD issued two further opinions in relation to the following draft laws:

- Draft Law 31/XVII/1 (CH) – On promoting the inclusion of young people with special educational needs in higher education;
- Draft Law 312/XVII/1 (PS) – Establishing the Legal Framework for Students with Special Educational Needs in higher education.

These led to the following opinions, issued at the request of the Parliamentary Committee on Education and Science:

- Opinion No. 5/Me-CDPD/2026, of 19 February 2026, concerning Bill No. 312/XVII

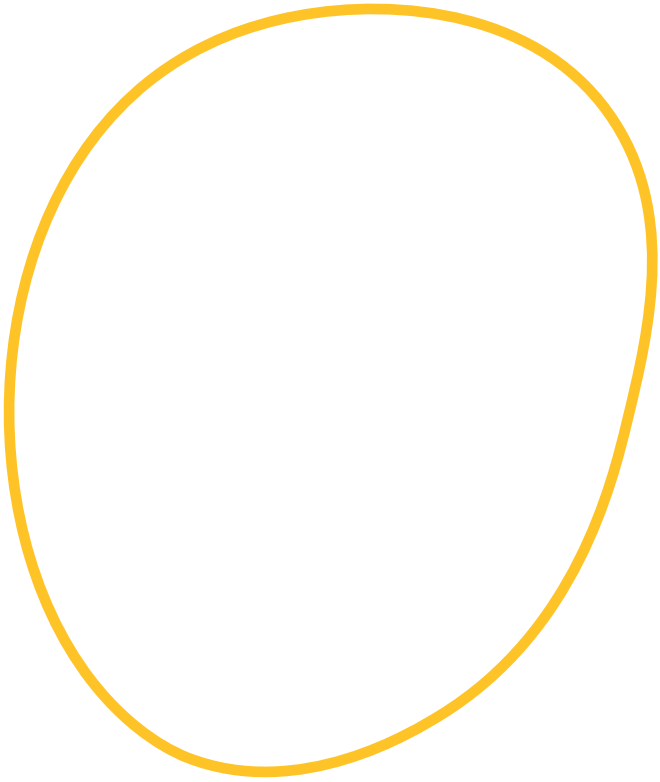
[24] For the 2025–2026 academic year, Order No. 207/2025/1 of 2 May was approved, which adopts the Regulations for the National Competition for Access and Entry into Public Higher Education for Enrolment and Registration in the 2025–2026 Academic Year.

(PS), which establishes the Legal Framework for Students with Special Educational Needs in Higher Education;

- Opinion No. 6/Me-CDPD/2026, of 19 February 2026, on Draft Law No. 31/XVII/1st (CH) on the Promotion of the Inclusion of Young People with Special Educational Needs in Higher Education.

The Me-CDPD sustained involvement in this area highlights the need to shift from a model predominantly focused on access to a more structured and coherent legal framework that ensures substantive equality throughout the higher education cycle. Whilst the 2018 opinion focused primarily on access and admission conditions, the opinions issued in 2026 focused on the need to establish a comprehensive legal framework that clearly defines and strengthens obligations regarding reasonable accommodation, support services, accessibility and monitoring mechanisms. **This evolution reflects the recognition that compliance with Article 24(5) of the CRPD is not limited to the existence of access measures such as special quotas, but requires explicit and enforceable regulatory guarantees regarding the retention and academic success of students with disabilities.**

The request for opinions by the relevant parliamentary committee constitutes an important element of compliance with Article 4(3) of the CRPD, reinforcing the obligation to ensure the effective participation of persons with disabilities and their representative organisations in the legislative process.



Analytical Summary

Article 24 of the CRPD enshrines a fundamental right: inclusive education at all levels, as a precondition for equal opportunities, autonomy and full participation in society. Its realisation requires a shift from the model of formal integration to a model of systemic inclusion, based on universal design for learning, reasonable accommodation (the denial of which constitutes discrimination), effective individualised support and educational environments that maximise academic and social development, in accordance with General Comment No. 4 (2016). In this regard, Article 24 must be read in conjunction with Articles 2, 4(3), 5, 7, 8, 9 and 31 of the CRPD: inclusive education entails obligations of non-exclusion, accessibility, and cultural and organisational transformation of the education system.

National level, there has been a significant regulatory development with Decree-Law No. 54/2018 and the consolidation of principles compatible with the CRPD. However, a persistent gap remains between the regulatory framework and its effective implementation, evidenced by shortages of adequate human and material resources, gaps in the practical training and capacity-building of the educational community, territorial disparities, and risks of maintaining segregated solutions (notably via 'reference schools' and increased funding for special education facilities), which are inconsistent with Article 24(2)(b) (no exclusion from the general system on the basis of disability). Furthermore, the limited implementation of EE. 3 of the ENIPD 2021–2025 and the omission of the CRPD from the ENEC 2025 undermine cross-sectoral coherence and the sustainability of public inclusion policies, undermining the cultural transformation essential to the implementation of Article 24.

In this context, it is essential to consolidate an approach ensuring verifiable compliance with Article 24, centred on three interrelated pillars: (i) structural conditions (*e.g.* stable and adequate funding, strengthening of specialised human resources, including special education teachers and multidisciplinary teams, physical and digital accessibility, and the availability of appropriate support resources and assistive technologies); (ii) procedural conditions (*e.g.* individualised assessment of support needs, consistent application of universal, selective and additional measures, accompanied by systematic monitoring of outcomes, accessible complaints and redress mechanisms, and the effective participation of families and pupils); and (iii) accountability conditions (*e.g.* outcome and impact indicators, including participation, progression, completion and dropout rates, as well as well-being and sense of belonging within the school environment, supported by disaggregated data and public reporting, in accordance with Article 31 of the CRPD).

Formal and prior consultation with the Me-CDPD and with organisations of persons with disabilities must be systematically ensured, in accordance with Article 4(3) of the CRPD and Law No. 71/2019; otherwise, the quality of legislation and its alignment with the human rights model risk being undermined.

In higher education, the increase in the number of students with disabilities constitutes a positive development; however, it does not in itself ensure equality of opportunity. States must guarantee retention, progression and completion on an equal basis with others, in accordance with Article 24(5), through the provision of reasonable accommodation, accessibility and structured support services, subject to continuous monitoring.

An integrated approach to implementation, spanning from early childhood education to lifelong learning, including non-formal contexts such as inclusive CAT, is essential to transform the right to inclusive education from a formal commitment into tangible outcomes, ensuring that no persons with disabilities are excluded, directly or indirectly, from the general education system.

Summary Table

Education

Right to inclusive education at all levels (Article 24 of the CRPD)

A New Paradigm: Systemic Inclusion

Article 24 of the CRPD recognises the right of Persons with disabilities to inclusive, quality education on an equal basis with others, throughout life.

General Comment No. 4 (2016) clarifies that inclusive education constitutes a structural principle requiring the transformation of the entire education system, grounded in the concept of Universal Design for Learning.

In this context, the right to education is a fundamental precondition for full participation in society, and the denial of reasonable accommodation constitutes a form of discrimination on the grounds of disability.

Current Situation

Portugal has established a regulatory and policy framework broadly aligned with the inclusive education paradigm, including:

- Decree-Law No. 54/2018, which establishes the legal framework for inclusive education.
- Public policies aimed at promoting inclusive education.
- The expansion of support measures to enhance learning and participation.
- The formal recognition of inclusive education as a guiding principle of the education system.

Identified Issues

- **Despite progress under Decree-Law No. 54/2018, key challenges persist:**
- Gap between law and practice: continued segregated or merely integrative responses.
- Insufficient human and technical resources: Shortage of specialised teachers, support staff, assistive technologies and adequate training.

Identified Issues

- Regional and institutional disparities: Uneven implementation and significant variability between schools.
- Barriers in higher education: Lack of structured support systems.
- Risk of segregation: reliance on “reference schools” and separate structures, focusing on adapting the student rather than the system.
- Impact on trajectories: increased risk of exclusion, dropout and lower attainment.
- Policy incoherence: absence of CRPD in national strategies (*e.g.* ENEC 2025) undermines systemic transformation.

Recommendations of the Me-CDPD

The Me-CDPD considers that full implementation of Article 24 requires:

- Ensure the effective implementation of inclusive education policies.
- Ensure stable funding and strengthen multidisciplinary teams.
- Ensure continuous training for professionals and the education community.
- Ensure individualised support, including needs assessments and participation of families and students.
- Guarantee the right to education from early childhood to lifelong learning, including inclusive extracurricular and leisure activities.
- Develop monitoring mechanisms with outcome indicators (*e.g.* progression, well-being, belonging) and transparent data.
- Ensure universal accessibility across all levels of education, including higher education.
- Promote effective transition pathways into the labour market.

Activities of the Me-CDPD

The Me-CDPD has issued opinions and recommendations on inclusive and higher education, promoting alignment of legislation and public policies with the CRPD.

Article 25
Health

States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular, States Parties shall:

a) Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health and population-based public health programmes;

b) Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;

c) Provide these health services as close as possible to people's own communities, including in rural areas;

d) Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;

e) Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;

f) Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

Article 25
Health

General Framework

According to the latest World Health Organisation (hereinafter "WHO") global report on health equity for persons with disabilities (2022a), data continue to show that persons with disabilities experience poorer health outcomes than persons without disabilities, including due to barriers in access to inclusive public health interventions (Degener, 2017).

This article recognises the right of persons with disabilities to the enjoyment of the highest attainable standard of health, grounded in a human rights-based approach. It requires States Parties to ensure equal access to general and specialised health services, and further stipulates that these services must respect the dignity, autonomy and persons with disabilities (Degener, 2017, p. 47).

This article requires States Parties to address health inequalities by respecting, protecting and fulfilling the right to health, and in particular, by ensuring that persons with disabilities enjoy the “highest attainable standard of health”, without discrimination (World Health Organization, 2022a, pp. 19–20).

Article 25 is closely linked to other provisions of the CRPD, notably the definition of “discrimination on the basis of disability” (set out in Article 2), the principles of non-discrimination and full and effective participation and inclusion in society (Article 3(b) and (c)), as well as the provision in Article 4(1)(b), which reiterates the duty of States to take all appropriate measures to prevent discrimination against persons with disabilities, and, of course, Article 5, which sets out the general obligation of States to adopt legislation ensuring equal and effective legal protection against discrimination (World Health Organization, 2022a, p. 20).

In this regard, States have a dual obligation: on the one hand, they must ensure that Persons with disabilities have access to the “same range, quality and standard of free or affordable health services and programmes as are provided to other persons, including sexual and reproductive health services, population health programmes and other health services” and, on the other hand, to prohibit “discrimination against persons with disabilities in the provision of health and life insurance, in cases where such insurance is permitted by national legislation” (World Health Organization, 2022a, p. 20).

The right to health is enshrined in various international human rights instruments: Article 12 of the ICESCR establishes the right of all persons to enjoy the highest attainable

standard of physical and mental health; Article 25(1) of the UDHR establishes that everyone has the right to a standard of living adequate for the health and well-being of themselves and their family; Article 24 of the CRC provides for the right of children to the highest attainable standard of health, including access to medical and rehabilitation services; and in CEDAW, Article 12 provides that States Parties shall take appropriate measures to eliminate discrimination against women in the field of health care.

In 2019, the United Nations General Assembly adopted the Political Declaration on Universal Health Coverage, in which States commit to ensuring that all people have access to the essential health services they need (Political Declaration of the High-Level Meeting on Universal Health Coverage, 2019). This commitment aligns with SDG 3, "Ensure access to quality health care and promote well-being for all at all ages" (United Nations, 2015d).

Specifically regarding the right to health of Persons with disabilities, the World Health Assembly adopted, 2021, a resolution entitled "The highest attainable standard of health for persons with disabilities" (2021). In this document, States were called upon to incorporate a "disability- and gender-sensitive approach", which would include the "close consultation and active involvement of persons with disabilities and their representative organisations in decision-making and programme planning,ensuring that they have access to: effective health services as part of universal health coverage; equal protection during complex humanitarian situations and in the event of natural disasters and their consequences; and equal access to intersectoral public health interventions, such as the provision of safe drinking water, sanitation and hygiene services, in order to achieve the highest attainable standard of health " (The highest attainable standard of health for persons with disabilities, 2021, pp. 3–4).

The Constitution of the Portuguese Republic provides in Article 64(1) that"Everyone has the right to health protection and the duty to defend and promote it." The right to health protection is realised through the National Health Service (SNS), which is characterised as a universal, general service and, taking into account the economic and social conditions of citizens, and shall tend to be free of charge (Constitution of the Portuguese Republic, 2005, Article 641 and (2)(a)).

At the statutory level, the realisation of the right to health protection and the duty of non-discrimination must be read in conjunction with the framework governing users' rights and duties and with the Charter of Rights of Access to Healthcare (SNS24, 2025), which reinforce guarantees of access, information, participation and the provision of care within a clinically acceptable timeframe, binding the system to standards of universality and equity. These instruments emphasise that equality of access to healthcare is not limited to the formal existence of the National Health Service (SNS), but also requires effective conditions for its enjoyment, including accessible

and comprehensible information, informed decision-making and the absence of barriers which, in practice, restrict access for Persons with disabilities (Law No. 15/2014, of 21 March, in the consolidated version, 2025).

The Basic Health Law, adopted by Law No. 95/2019 of 4 September, which gives effect to the right to health protection (Article 1), stipulates that all persons have the right, in particular, "to health protection in accordance with the principles of equality, non-discrimination, confidentiality and privacy" (Law No. 95/2019 of 4 September approving the Basic Health Law, 2019, Basic Principle 2, no. 1, subpara. a)).

According to Law No. 38/2004 of 18 August, which sets out the general framework for the legal regime governing the prevention, habilitation, rehabilitation and participation of Persons with disabilities, "it is the responsibility of the State to adopt the specific measures necessary to ensure health promotion and surveillance, screening and diagnosis, early intervention, treatment, and the medical and functional habilitation and rehabilitation of Persons with disabilities, as well as the provision, adaptation, maintenance or renewal of appropriate assistive devices and compensatory measures." (Law No. 38/2004 of 18 August 2004, Article 31).

Law No. 46/2006 of 28 August, which prohibits and punishes discrimination on grounds of disability and increased health risk, also stipulates that the following are considered discriminatory practices against Persons with disabilities: "the refusal or restriction of access to healthcare provided in public or private healthcare establishments" (Law No. 46/2006 of 28 August, consolidated version, 2021, Article 4o, subpara. g)).

Furthermore, the obligation of universal accessibility in healthcare is not limited to the policy level; it entails compliance with technical accessibility standards in the built environment and in facilities open to the public, including healthcare facilities, otherwise, physical and functional inaccessibility may constitute an indirect restriction of the right to health. Compliance with Article 25 must therefore be assessed in conjunction with the national accessibility framework, as a structural condition for effective and non-discriminatory access to healthcare, in accordance with Article 9 of the CRPD (Decree-Law No. 163/2006 of 8 August, as consolidated in 2024).

Observations, recommendations and developments

In the recommendations sent to Portugal (2016), the Committee expressed concern regarding three aspects: i) Portugal devotes "little attention" to the Rights of persons with Disabilities in legislation and public policies relating to healthcare, sexual and reproductive health, HIV/AIDS and sexually transmitted infections; ii) health services,

in particular obstetric services, “are not always accessible”; and iii) the fact that primary prevention of disability is presented/understood by the State as a measure for implementing the Convention, which reflects an approach inconsistent with the human rights model of the CRPD, which is centred on equality, non-discrimination and the removal of barriers, rather than on the “prevention” of disability itself." (Committee on the Rights of Persons with Disabilities, 2016, para. 49). The Committee therefore recommended the adoption of “all necessary measures” to ensure that Persons with disabilities face no restrictions on access to healthcare, including sexual and reproductive healthcare, by ensuring the accessibility of programmes and services, in both urban and rural areas. Furthermore, it recommended adequate training for healthcare professionals and that the primary prevention of disability be excluded from health programmes (Committee on the Rights of Persons with Disabilities, 2016, para. 50).

In light of these Concluding Observations, it is important to emphasise that discrimination in access to healthcare can take direct forms (*e.g.* explicit refusal of care, procedures or accessible informed consent processes) and indirect forms (*e.g.* “neutral rules, practices and clinical pathway which, due to a lack of adaptations and accessibility, place persons with disabilities at a particular disadvantage). Thus, the **implementation of Article 25 requires not only awareness-raising measures, but also verifiable safeguards, including accessible complaints procedures, monitoring of compliance with non-discrimination standards, and the collection of evidence on barriers and outcomes.** This interpretation is consistent with the national framework prohibiting discriminatory practices and with the need for regulatory action to ensure equal access to healthcare.

In the drafting of the ENIPD 2021–2025, these recommendations appear to have been taken into account, since one of the European guidelines highlighted by the Strategy itself concerns “guarantee of accessible and non-discriminatory health services and facilities, promoting vocational training programmes for healthcare professionals, appropriate rehabilitation services and the development of early intervention and needs assessment services;” (ENIPD 2021–2025, 2021, p. 10).

Among the measures/actions included in the ENIPD, measures 1.2.10 and 1.2.11 are particularly noteworthy, both of which are included in the Specific Objective of “strengthening the conditions for the exercise of rights by Persons with disabilities, eliminating factors of discrimination and promoting affirmative action measures" (ENIPD 2021–2025, 2021, p. 22). Measure EE1 – 1.2.10 provided for “eliminating any factors of discrimination against Persons with disabilities associated with access to health services by raising awareness among relevant stakeholders”, and measure EE1 – 1.2.11 “Eliminate factors of discrimination associated with the contracting of life and health insurance for Persons with disabilities or impairments by raising awareness among relevant stakeholders”, both of which were considered implemented through

awareness-raising activities (ENIPD 2021– 2025, 2021, p. 22). The first (EE1-1.2.10), until 31 December 2024, was considered to be 8% implemented by IDiPD, I.P. (at the time designated INR, I.P.); this Institute also considered that "the measure should be reviewed and incorporated into the new Strategy, currently under development, and that, to this end, the relevant competent authorities should be involved." (INR, I.P., 2025a, pp. 30–31). The second (EE1- 1.2.11) states, according to IDiPD, I.P. (at the time designated as INR, I.P.), that "within the scope of the 2023 implementation report, it was decided that the implementation of this measure would be concluded in 2024, and it is therefore considered to have been completed"; in previous years, the planned awareness-raising activities were not carried out (INR, I.P., 2025a, pp. 32–33).

Two other measures set out in the ENIPD 2021–2025 are also noteworthy, as they align with the Committee's recommendations to Portugal (2016): measure EE6 – 1.3.2. "Review the national health plan to ensure it addresses the specific needs of persons with disabilities in terms of health, sexual and reproductive health, HIV/AIDS and sexually transmitted infections", considered 50% implemented by 31 December 2024; and measure EE6-1.3.3. "Train and raise awareness among health professionals regarding the Rights of Persons with Disabilities and intervention in the area of disability", according to IDiPD, I. P. (at the time designated as INR, I.P.) implemented by 31 December 2024, at 5% (INR, I.P., 2025a, pp. 222–225). IDiPD, I.P. (at the time designated as INR, I.P.) considered that both measures should be reviewed and integrated into the new Strategy (EDPD 2026–2030) (INR, I.P., 2025a, pp. 222–225).

Recently, Ministerial Order No. 324/2025/1 of 3 October established the SAD+Health pilot project, an enhanced home support service that integrates social care with home healthcare for people in situations of dependency.

This Ordinance aims to "adapt the social response of the home care service to the current demands of life in society, as well as to the dynamism and heterogeneity of the profile of the elderly population, and those with disabilities or impairments"; thus, with a view to promoting independence and self-determination, the creation and implementation of five home care service pilot projects (SAD+Health) aims to ensure the conditions "essential for these persons to remain within the socio-family context in which they live" (Ordinance No. 324/2025/1, of 3 October 2025, Preamble, para. 4).

SAD+Health is characterised as a "distinctive, local and community-based social response, consisting of the coordinated provision of a range of individualised and personalised social support services and care, complemented, where necessary, by healthcare, provided at home to persons who, due to their situation of dependency, disability or incapacity, are unable, on their own, to meet, temporarily or permanently, their basic, instrumental and advanced daily living needs, or carry out the

necessary health-seeking behaviours, thereby promoting their autonomy, independence, well-being and quality of life." (Ordinance No. 324/2025/1, of 3 October 2025, Article 2.o). The services provided include: personal hygiene and comfort care; the provision of meals or their preparation at home; support with taking medication, laundry and house cleaning; telecare services; assistance with minor home modifications to facilitate movement within the home; access to personal and grooming care; accompaniment to healthcare services, shopping or other daily activities; psychosocial support and recreational activities (XXV Government of Portugal, 2025, para. 7).

SAD+Health must provide at least six of these services and care, operating extended hours, including Saturdays, Sundays and public holidays, whenever necessary, and with 24-hour assistance (Ordinance No. 324/2025/1, of 3 October 2025, Article 7.o, nos. 3 and 4).

The SAD+Health pilot projects are being implemented in five regions of Portugal, subject to a 12-month trial period, extendable by a further 6 months. This service may be combined with other social services (provided they are not residential in nature) and will be monitored by a Monitoring and Evaluation Committee.

One year after the publication of the Ordinance, it was reported in the media that 56 applications submitted by organisations in the social and solidarity sector for the pilot projects are currently being assessed (Lusa, 2026).

Whilst this measure has the potential to support people in remaining in their own homes and prevent unwanted institutionalisation, its full compliance with Articles 5, 19 and 25 of the CRPD, will depend on the estab**lishment and implementation of clear structural safeguards.** Firstly, eligibility and prioritisation criteria must be transparent, centred on the person's needs, wishes and preferences, avoiding welfare-based approaches or models based exclusively on clinical dependency criteria. Secondly, effective coordination between healthcare and social services must be ensured, with clearly defined responsibilities, avoiding the implicit transfer of financial or organisational burdens to families.

Thirdly, the territorial coverage of SAD+Health must comply with the principle of equity, guaranteeing effective access in rural and sparsely populated areas, as well as ensuring physical, communicational and digital accessibility, including information in accessible formats and mechanisms for accessing and monitoring the service that are compatible with different support needs. Fourthly, monitoring must not be limited to quantitative implementation indicators (number of applications or services provided), but must incorporate outcome indicators aligned with human rights, namely: enabling the person to remain within their community, strengthening autonomy and self-determination, beneficiary satisfaction, reducing avoidable hospitalisations and preventing involuntary institutionalisation.

In this regard, the establishment of the Monitoring and Evaluation Committee should

provide for the active participation of Persons with disabilities and their representative organisations, in accordance with Article 4(3) of the CRPD, ensuring that the evaluation of the pilot project incorporates a rights-based perspective. **Only through this integrated approach, which combines appropriate regulatory design, implementation with safeguards, and evaluation focused on substantive outcomes, will it be possible to assert that the measure effectively contributes to the realisation of the right to the highest attainable standard of health, without discrimination,** in accordance with Article 25 of the CRPD.

Finally, **the failure to consult the Me-CDPD in advance during the drafting of the Ministerial Order constitutes a breach of the legal duty to consult provided for in Article 3(2)(a) of Law No. 71/2019 of 2 September, undermining procedural compliance with the model of participatory governance required by the Convention.** Structured and timely consultation is not simply a procedural formality, but a substantive guarantee of regulatory alignment with international human rights standards.

Mental Health Act

According to data from the latest WHO global report on mental health (2022), almost one billion people worldwide live with a mental health condition. However, the majority of persons with mental health problems do not have access to effective care, either because stigma prevents them from seeking help, or because services and support are unavailable, insufficient, inaccessible or unaffordable (World Health Organization, 2022b, p. 5).

In this context, it is important that States ensure quality, accessible mental health services that respect the rights, dignity and autonomy of persons with disabilities. According to the WHO, this implies not only that these services are available and financially accessible, that they are person-centred or recovery-oriented and based on scientific evidence, but also that they respect the autonomy, will and preferences of persons concerned (World Health Organization, 2022b, pp. 192–193).

Mental health care should adopt a human rights-based approach, respecting people's autonomy and ensuring their full participation in decisions relating to their care and treatment (World Health Organization, 2022b, p. 193).

In 1998, Law No. 36/98 of 24 July was passed in Portugal, establishing the general principles of mental health policy and regulating involuntary admission and treatment. Despite the amendments this Law has undergone over the years, "in light of societal developments", it was noted that "various developments have arisen both in terms of care provision, on the one hand, and evolving legal standards concerning the protection of fundamental rights" (Order No. 6324/2020, of 15 June 2020, preamble, para. 5).

That said, in 2020, a Working Group was set up with the aim of presenting a proposal to revise the Mental Health Act, "adapting it to developments in scientific knowledge and new models of healthcare provision, in compliance with the international obligations to which the Portuguese State is bound", namely the CRPD; and, as part of its work, "to promote a broad debate on the matter with institutional stakeholders and civil society" (Order No. 6324/2020, of 15 June 2020, para.s 1, 2, 3). The mandate of this Working Group was extended until 31 December 2021 (Order No. 6039/2021, of 21 June 2021).

On 22 July 2022, Bill No. 24/XV/1 was tabled, approving the Mental Health Act and amending related legislation. This proposal, which resulted from the work of the Working Group, was eventually approved, giving rise to Law No. 35/2023, which repealed Law No. 36/98 of 24 July, approved the Mental Health Act and amended related legislation. According to Article 1(1), this law "provides for the definition, foundations and objectives of mental health policy, enshrines the rights and duties of persons in need of mental health care, and regulates safeguards concerning restrictions on rights and the protection of liberty and autonomy." (Law No. 35/2023 of 21 July 2023, Article 1(1)). This Law reorganised, in particular, mental health services in accordance with the principles and rules set out in Decree-Law No. 113/2021 of 14 December (Law No. 35/2023 of 21 July 2023, Article 2, subpara. g)).

As previously noted in the discussion on the Legal Framework for Adults under Accompaniment, and in the analysis of Article 12 of the CRPD, the Public Prosecutor's Office, within the scope of its powers and responsibilities, approved the National Strategy for Adults with Vulnerabilities (2025). In view of the various challenges that remain regarding the implementation of that regime, the Public Prosecutor's Office has put forward proposals to defend the interests and promote the rights of persons with vulnerabilities, including the need to assess possible legislative amendments to the Mental Health Act (Public Prosecutor's Office, 2025, p. 7). As the Public Prosecutor's Office states: "closely linked to the regime for adults subject to accompaniment measures is the Mental Health Act, which was also recently amended by Law No. 35/2023. However, the new Mental Health Act did not resolve all existing problems in this area, nor did it grant the Public Prosecutor's Office the authority to order referral to a psychiatric emergency service for assessment". (Public Prosecutor's Office, 2025, p. 3). On the other hand, the Public Prosecutor's Office emphasised the need to reflect on best practices in this field, proposing specific measures in the areas of organisation, training and institutional cooperation, in the areas of organisation, training and institutional cooperation (Public Prosecutor's Office, 2025).

Action by the Me-CDPD

The Me-CDPD has issued three recommendations on this matter:

- Recommendation No. 3/Me-CDPD/2021, of 18 November, on the Revision of Law No. 36/98, of 24 July (Mental Health Act), that is, whilst the Working Group's work was still ongoing;

The first recommendation, although brief, emphasised the importance of the new legislation complying with the provisions of the CRPD, in particular those set out in Article 12 (the exercise of legal capacity), Article 14 (liberty and security), Article 17 (protection of the integrity of the person), and Article 19 (the right to live independently and be included in the community). Furthermore, the Me-CDPD, at the time, expressed concern that the Working Group did not include persons with lived experience of mental health conditions, nor organisations representing them, nor mechanisms for their active involvement, a situation which posed "a significant risk of perpetuating and reinforcing the medical model of disability" (Me-CDPD, 2021c, p. 3). The Me-CDPD concluded this recommendation by emphasising the need to ensure broad prior consultation with the organisations of persons with disabilities and the Me-CDPD in the review of the Mental Health Act.

- **Recommendation No. 3/Me-CDPD/2022, of 22 November,** on the Government's draft Law No. 24/XV/1st, that is, within the context of the legislative debate (Me-CDPD, 2022d).
- **Recommendation No. 2/Me-CDPD/2023, of 13 April,** on the Government's draft Law No. 24/XV/1a, i.e. in the context of the legislative process (Me-CDPD, 2023c).

This recommendation, having already been issued in connection with the draft law that ultimately led to the Mental Health Act, Law No. 35/2023 of 21 June, enabled the Me-CDPD to, on the one hand, verify whether the recommendations issued previously had in fact been implemented; and, on the other hand, to analyse those aspects of the present proposal that were or were not in accordance with the provisions of the CRPD.

In summary, and without prejudice to a careful reading of recommendations No. 3/Me-CDPD/2022 and No. 2/Me-CDPD/2023, **the Me-CDPD expressed the following concerns:**

i) The participation, close consultation and active involvement of persons with disabilities and/or through their representative organisations was not ensured in a sufficiently broad and meaningful manner (Me-CDPD, 2022c, p.2);

ii) The proposed Mental Health Act should "clearly set out guidelines for the maximum autonomy and well-being persons with mental health conditions living in the community" (Me-CDPD, 2022d, p. 3);

iii) Investment in improving the quality of inpatient and treatment services has absorbed the financial resources allocated to a reform that should instead be directed towards community-based support systems, offering responses aimed at psychosocial support and the creation of inclusive and integrated housing, for example (Me-CDPD; 2022c, p. 4);

Thus, this recommendation is divided into general considerations on how the Mental Health Act can comply with the provisions of the Convention, and specific considerations regarding the draft law.

With regard to the specific recommendations put forward by the Me-CDPD, it is concluded that the recommendations made were not substantially incorporated into the final draft that gave rise to Law No. 35/2023 of 21 July. A comparative analysis between the text of the draft bill and the approved version reveals the retention of regulatory provisions previously identified as non-compliant with the CRPD.

Furthermore, the absence of mandatory, prior and formal consultation with the Me-CDPD during the drafting and legislative debate constitutes a breach of the provisions of Article 3(2)(a) of Law No. 71/2019 of 2 September, thereby undermining the duty of institutionalised participation of the independent mechanism provided for in Article 33(2) of the CRPD.

Accordingly, **the Me-CDPD considers that the Mental Health Act, in its current form, does not ensure full compliance with the international obligations arising from the Convention, retaining structural elements that do not fully reflect the paradigm shift towards a model based on human rights, autonomy, and the person's will and preferences.**

To this end, **the Me-CDPD reiterates that the Mental Health Act must take the following issues into account (Me-CDPD, 2022d):**

- **Equal recognition before the law (Article 12)**

In the view of the Me-CDPD and in accordance with the Committee's General Comment No. 1, "the perception of deficits in intellectual capacity cannot be a justification for

denying legal capacity and the independent exercise of rights" (General Comment No. 1 (2014), Equal recognition before the law, 2014).

- **Liberty and security of the person (Article 14)**

In accordance with the Committee's recommendations regarding the implementation of Article 14, Me-CDPD reiterates that mental health laws permitting the "involuntary deprivation of liberty of Persons with disabilities based on assumptions of risk", on the "alleged danger they pose to themselves or to others" or on "danger associated with labels of disability" (Statement on Article 14 of the Convention on the Rights of Persons with Disabilities, 2014, Number 2).

- **Freedom from torture or cruel, inhuman or degrading treatment or punishment (Article 15)**

The Me-CDPD considers that "the use of seclusion and restraint practices in psychiatric facilities, including physical, chemical and mechanical restraints, when based on the existence or perceived existence of a disability, constitute situations of discrimination and violation" of this article (Me-CDPD, 2022d, p. 6).

- **Protecting the integrity of the person (Article 17)**

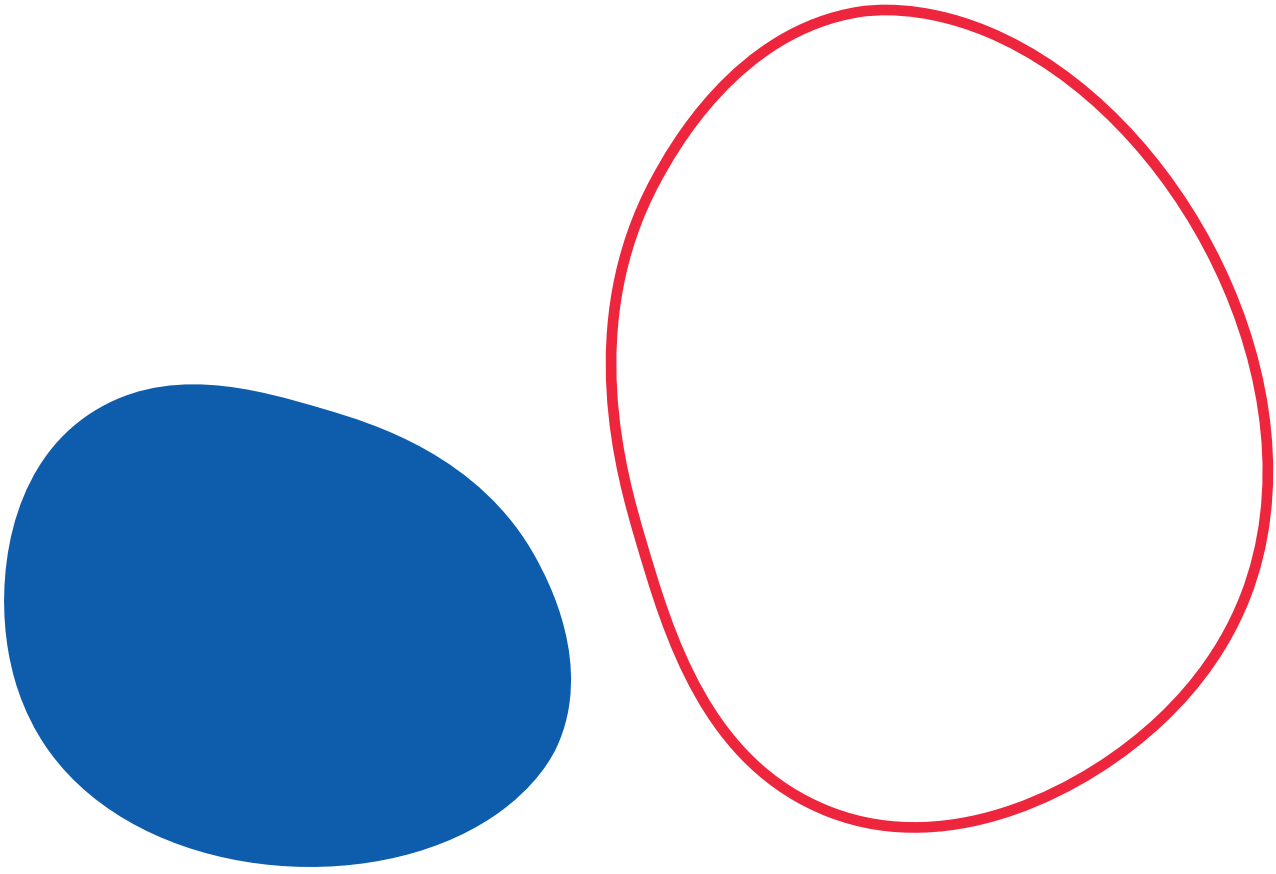
The Me-CDPD reiterates that regardless of the level of support a person may require, respect for their physical and mental integrity must be guaranteed (Me-CDPD, 2022d, p. 5).

- **Living independently and being included in the community (Article 19)**

In order to comply with the provisions of Article 19 of the CRPD, the Mental Health Act must clearly set out the means or mechanisms that enable the full right to live independently and be included in the community; for example, it is not enough to merely set out a proposal for deinstitutionalisation and the integration of rehabilitation services, but rather to effectively specify the rationale and the concrete form that such implementation and coordination will take, what the priorities should be, and which model to follow or which interventions to prioritise (Me-CDPD, 2022d, p. 6).

In conclusion, **mental health reform in Portugal remains at a critical stage in the transition towards a human rights-based approach.** Full compliance with the CRPD requires that legislation definitively abandon approaches based on risk, dangerousness and the overriding of the individual's will, consolidating a model based on autonomy, legal capacity, personal integrity and independent living in the community. This

implies not only specific regulatory revisions, but a structural reconfiguration of public responses, with a progressive reallocation of resources from institutional settings to community-based support, the strengthening of procedural safeguards, and the institutionalisation of mechanisms for the effective consultation of Persons with disabilities and their representative organisations, in accordance with Article 4(3) of the CRPD. **The Me-CDPD thus reiterates the need to review Law No. 35/2023, ensuring its full harmonisation with the international obligations assumed by the Portuguese State and promoting a mental health policy fully grounded in the human rights model of disability enshrined in the CRPD.**



Analytical Summary

Article 25 of the CRPD imposes on the State the duty to ensure that persons with disabilities enjoy the highest attainable standard of health, without discrimination, whilst guaranteeing: (i) the same range, quality and standard of free or affordable health care and programmes (including sexual and reproductive health and public health) and (ii) the prohibition of discrimination in access to health and life insurance, where such insurance is permitted by national law, in line with international human rights and health equity standards. The effectiveness of this right depends on structural conditions of universal accessibility (including in the built environment and in services), equitable territorial access, including in rural areas and clinical practices based on free and informed consent, supported by training and ethical standards grounded in human rights, dignity and autonomy.

The Committee's Concluding Observations (2016) remain relevant today by highlighting deficits in access to care (e.g. obstetrics), as well as by warning that approaches centred on the "primary prevention of disability" are inconsistent with the human rights model of disability, reaffirming that the implementation of the CRPD must be based on the removal of barriers and on equality.

In terms of public policy, although the ENIPD 2021–2025 reflects this approach, the reported implementation data reveal a gap between commitment and delivery, with low levels of implementation in measures aimed at combating discrimination and strengthening professional training; a review and integration into the subsequent strategy is recommended. Recent measures such as SAD+Health may constitute a positive development if they incorporate verifiable safeguards, such as: transparent criteria centred on the will and preferences of the person, effective coordination between the health and social sectors, territorial equity, communication and digital accessibility, and evaluation using outcome indicators (*e.g.* autonomy, satisfaction, prevention of institutionalisation), with the active participation of persons with disabilities and their representative organisations (Article 4(3)).

In the field of mental health, compliance with the CRPD requires consolidating the transition to a model based on autonomy, integrity and community living, moving away from approaches based on risk, dangerousness and substitute decision-making and practices that override the person's will and preferences, and strengthening procedural safeguards (Articles 12, 14, 15, 17 and 19). In all matters, prior, formal and structured consultation with the Me-CDPD and organisations of persons with disabilities constitutes a substantive guarantee of regulatory quality and compliance with the CRPD and the human rights model of disability.

Summary Table

Right to Health

Equality, dignity and autonomy (Article 25 of the CRPD)

Right to Health on an Equal Basis and without Discrimination

Article 25 of the CRPD recognises that Persons with disabilities have the right to:

- Quality health care, including general health services and sexual and reproductive health.
- Access to health care and insurance on an equal basis with others.
- Services provided on the basis of free and informed consent, respecting the person's will, preferences and autonomy.

Current Situation

Portugal has established a universal health system and a relevant legal framework, including:

- The National Health Service (Serviço Nacional de Saúde).
- Legislation on health users' rights.
- Disability-related public policies.
- Formal recognition of the right to health.

Identified Issues

- Barriers to access to health care: Including physical, communication and organisational barriers.
- Lack of accessibility in health services: Health facilities that are not fully accessible and information not provided in accessible formats.
- Insufficient training of healthcare professionals: Limited awareness of specific support needs and continued reliance on predominantly medical approaches.
- Risk of practices incompatible with the human rights model of disability: Interventions carried out without free and informed consent and restrictions on personal autonomy.
- Inequalities in access to specialised care: Including access to psychological support, rehabilitation and mental health services.

Recommendations of the Me-CDPD

- Ensure full accessibility of health services, including the availability of clinical information in multiple accessible formats.
- Adopt a person-centred approach, based on the will and preferences of the person and grounded in free and informed consent.
- Strengthen training for healthcare professionals on the human rights model of disability.
- Eliminate discriminatory practices and approaches based exclusively on the medical model of disability.
- Ensure access to specialised and appropriate health care.
- Guarantee universal, community-based health services.
- Strengthen coordination between health and social services.
- Establish monitoring mechanisms based on human rights indicators, including for pilot initiatives such as “SAD+Health”.
- Mainstream the human rights model of disability across healthcare provision.

Activities of the Me-CDPD

The Me-CDPD has monitored legislative and policy developments in the field of health and analysed key areas, including:

- Mental health.
- Sexual and reproductive rights.
- Free and informed consent.

It emphasises that access to healthcare must be grounded in respect for autonomy, dignity and the will of the person. Ensuring this requires the meaningful participation of persons with disabilities and their representative organisations.

Article 27
Work and employment

1. States Parties recognize the right of persons with disabilities to work, on an equal basis with others; this includes the right to the opportunity to gain a living by work freely chosen or accepted in a labour market and work environment that is open, inclusive and accessible to persons with disabilities. States Parties shall safeguard and promote the realization of the right to work, including for those who acquire a disability during the course of employment, by taking appropriate steps, including through legislation, to, inter alia:

a) Prohibit discrimination on the basis of disability with regard to all matters concerning all forms of employment, including conditions of recruitment, hiring and employment, continuance of employment, career advancement and safe and healthy working conditions;

b) Protect the Rights of Persons with Disabilities, on an equal basis with others, to just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions, including protection from harassment, and the redress of grievances;

c) Ensure that persons with disabilities are able to exercise their labour and trade union rights on an equal basis with others;

d) Enable persons with disabilities to have effective access to general technical and vocational guidance programmes, placement services and vocational and continuing training;

e) Promote employment opportunities and career advancement for persons with disabilities in the labour market, as well as assistance in finding, obtaining, maintaining and returning to employment;

f) Promote opportunities for self-employment, entrepreneurship, the development of cooperatives and starting one's own business;

g) Employ persons with disabilities in the public sector;

h) Promote the employment of persons with disabilities in the private sector through appropriate policies and measures, which may include affirmative action programmes, incentives and other measures;

i) Ensure that reasonable accommodation is provided to persons with disabilities in the workplace;

j) Promote the acquisition by persons with disabilities of work experience in the open labour market;

k) Promote vocational and professional rehabilitation, job retention and return-to-work programmes for persons with disabilities.

2. States Parties shall ensure that persons with disabilities are not held in slavery or in servitude, and are protected, on an equal basis with others, from forced or compulsory labour.

Article 27
Work and employment

General Framework

Work and employment are essential for person's economic security, their physical and mental health, their personal well-being and even their sense of identity. However, as the Committee itself points out, there is a system of values known as "ableism" that negatively affects the opportunities of many persons with disabilities to access work and employment on an equal basis with others (General Comment No. 8 (2022) on the right of persons with disabilities to work and employment, 2022, para. 3).

According to indicators in the area of work and employment presented in the ODDH report (2025b), in 2023 the employment rate of Persons with disabilities (percentage of employed persons within the working-age population) in Portugal stood at 64.4% (+0.6 p.p. compared to 2022) – 9.8 p.p. higher than the EU average (54.6%) (Observatory on Disability and Human Rights (ODDH), 2025b, p. 28). However, as Paula Campos Pinto, Coordinator of the ODDH, warns, these figures, although positive, should be interpreted "with caution", as rather than the percentages, it is important to analyse the "quality of employment", which in Portugal tends to be "often short-term, frequently reliant on traineeship programmes that do not always guarantee sustained participation in the labour market" (Pinto, 2026, para. 15).

This warning is particularly relevant when interpreting Article 27 of the CRPD, since fulfilment of the right to work is not measured solely by the existence of formal access to employment, but also by the guarantee of decent, stable and non-discriminatory conditions of work, including career progression, adequate remuneration and protection against precariousness, in accordance with General Comment No. 8 (2022).

Conversely, data on the 'disability employment gap[25] show that, in Portugal in 2024, the difference in the employment rate between people with and without disabilities stood at 21.3 percentage points, slightly below the EU average (24 percentage points) (Observatory on Disability and Human Rights (ODDH), 2025b, p. 31). As highlighted in the ODDH report (2025), these figures "suggest that persons with disabilities continue to be less likely to be in employment" than people without disabilities (p. 32).

[25] The 'disability employment gap' corresponds to the difference between the employment rates of people without limitations in their daily activities and those with moderate or severe limitations, aged between 20 and 64. The employment rate is calculated by dividing the number of people aged 20 to 64 in employment by the total population in the same age group. The indicator is based on the Survey on Living Conditions and Income." (Observatory on Disability and Human Rights (ODDH), 2025b, p. 31).

This disparity constitutes a relevant indicator of structural inequality for monitoring compliance with Article 27, in conjunction with Article 5 of the CRPD, reflecting that the labour market remains less accessible and less inclusive for persons with disabilities, despite progress in aggregate indicators.

Thus, although in the EU and in Portugal the trend in the unemployment rate over recent years (2015–2023) has been one of decline, in 2023 there was a slight increase in unemployment among persons with disabilities in Portugal (Observatory on Disability and Human Rights (ODDH), 2025b, p. 34). According to the ODDH's analysis (2025) regarding long-term unemployment, the data reinforce that persons with disabilities not only "face higher unemployment rates, but are also more exposed to long-term unemployment" (p. 35).

In this regard, and **as previously noted by the Me-CDPD, these figures "highlight the urgent need for structured and effective legislative measures capable of ensuring not only equal opportunities; but also the effective transition from employment and training programmes to the full and effective inclusion of persons with disabilities in the labour market, in line with the principles of the CRPD"** (Recommendation No. 5/Me-CDPD/2025, Me-CDPD Recommendation on the inclusion of the labour Rights of Persons with Disabilities within the framework of the Labour Law Reform (draft bill – July 2025), 2025, p. 3).

Indeed, **as the Me-CDPD has previously emphasised elsewhere, significant barriers to the labour market persist for Persons with disabilities, whether due to "lack of accessibility, absence of reasonable accommodation and attitudinal barriers, including stigma and prejudice"** (Recommendation No. 5/Me-CDPD/2025, Recommendation of the Me-CDPD on the inclusion of the labour Rights of Persons with Disabilities within the framework of the Labour Law Reform (draft bill – July 2025), 2025, p. 3).

This aspect must also be read in conjunction with Article 9 of the CRPD, insofar as the lack of physical, communicational, cognitive and digital accessibility in the workplace and in recruitment processes may, from the outset, prevent the effective exercise of the right to work on an equal basis with others.

In order to frame the obligations arising from the correct application of Article 27 of the CRPD, it is important to recall the principle of equality and non-discrimination (Article 5 CRPD), as well as the definition set out in Article 2 of the CRPD regarding 'reasonable accommodation':

> "means necessary and appropriate modifications and adjustments that do not impose a disproportionate or undue burden, where required in a particular case, to ensure that Persons with disabilities enjoy or exercise, on an equal basis with others, all human rights and fundamental freedoms;".

Under Articles 2 and 5 of the CRPD, the refusal to provide reasonable accommodation constitutes discrimination on the grounds of disability, which gives rise to a positive obligation to ensure that such accommodation is provided whenever necessary to guarantee equal opportunities in accessing and retaining employment.

With regard to implementation obligations, Article 27 requires States Parties to adopt legislative, administrative, budgetary and public policy measures capable of removing structural barriers and producing measurable results in terms of inclusion in an open, inclusive and accessible labour market.

In General Comment No. 8 (2022), the Committee clarifies that such obligations include, in particular: i) "promoting the employment of Persons with disabilities on an equal basis with others"; ii) "eliminating structural and institutional barriers in the labour market"; iii) "implementing concrete accessibility measures and reasonable accommodation"; iv) "ensuring decent work and effective freedom of choice" (General Comment No. 8 (2022) on the right of persons with disabilities to work and employment, 2022; Recommendation No. 5/Me-CDPD/2025, Recommendation of the Me-CDPD on the inclusion of the labour Rights of Persons with Disabilities within the framework of the Labour Law Reform (draft bill – July 2025), 2025, pp. 1–2).

The right to work is an essential component of human dignity and is enshrined in various instruments of international human rights law: Article 23 of the UDHR; Articles 6, 7 and 8 of the ICESCR; Article 8 of the ICCPR; Article 5 of the CEDR; Article 11 of CEDAW; as well as Articles 25, 26, 40, 52 and 54 of the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families.

At European level, this right is enshrined and elaborated upon, in particular, in Articles 1 to 10 of the Revised European Social Charter, an instrument to which the Portuguese State is also bound.

This article sets out the foundations and principles for States Parties to fulfil SDG target 8.5, which is to "achieve full and productive employment and decent work for all women and men, including young people and Persons with disabilities, by 2030, and equal pay for work of equal value" (General Comment no. 8 (2022) on the right of Persons with disabilities to work and employment, 2022, para. 1; United Nations, 2015e).

At the constitutional level, the Portuguese State is obliged to ensure the effective realisation of the right to work under conditions of equality, fair remuneration, safety and hygiene, and to promote the professional integration of Persons with disabilities: Article 13 (Principle of Equality), Article 59 (Rights of Workers), Article 63 (Social Security and Solidarity) and Article 71 (Citizens with Disabilities).

Law No. 38/2004, which sets out the general framework for the legal regime governing the prevention, habilitation, rehabilitation and participation of Persons with disabilities, stipulates in Article 26 that "it is the responsibility of the State to adopt the specific measures necessary to ensure the right of Persons with disabilities to access employment, work, vocational guidance, training, habilitation and rehabilitation, and to ensure that working conditions are adapted to their needs".

Observations, recommendations and developments

In 2016, in the Concluding Observations sent by the Committee to the Portuguese State, the right to work and employment was addressed in para.s 51 and 52. In these, the Committee essentially highlighted four concerns:

i) Discrimination and inequality faced by Persons with disabilities in access to employment and working conditions, in particular women with disabilities; (para. 51)

ii) The fact that the Labour Code does not require companies to ensure 'reasonable accommodation'; (para. 51)

iii) The working conditions of Persons with disabilities in (at the time) collective labour agreements (CLAs), including their average wage; (para. 51)

iv) The fact that when Persons with disabilities exercise their right to work and employment, "the most common outcome" is employment under the (then current) CACI. (para. 51)

These concerns highlight that, at the time of the Concluding Observations, the Portuguese labour market remained characterised by dynamics of structural segregation and by an insufficient incorporation of the duty of reasonable accommodation as a legally enforceable obligation rather than a mere option for the employer. The Committee's focus was thus not limited to the employment rate, but centred on the quality, nature and regulatory framework of the employment opportunities available to Persons with disabilities.

In light of these concerns, the Committee issued the following recommendations (2016):

i) That, in close consultation with organisations representing persons with disabilities, a "review of labour legislation in the public and private sectors be undertaken, with a view to bringing it into line with the Convention" and that the necessary measures be adopted to ensure the enforcement of the law and the imposition of sanctions in the event of non-compliance; (para. 52)

ii) Elimination of segregated work environments, in particular, the revision of legislation governing CAOs from a human rights perspective, with a view to compliance with the Convention; (para. 52)

iii) Stepping up efforts to "promote access for persons with intellectual disabilities and autism to the mainstream labour market"; (para. 52)

iv) Promotion of "corporate social responsibility with regard to the employment of persons with disabilities"; (point 52)

v) Consider SDG target 8.5, "with a view to achieving full and productive employment and decent work for all women and men, including persons with disabilities, as well as equal pay for work of equal value" (para. 52).

A combined reading of these recommendations shows that the Committee called for a structural and cross-cutting reform of labour policies, based on three fundamental pillars: (i) legislative harmonisation with the CRPD, including the explicit incorporation of the duty of reasonable accommodation; (ii) the progressive dismantling of segregated responses; and (iii) the creation of effective mechanisms for monitoring, supervision and accountability. These were not, therefore, programmatic recommendations, but recommendations directly linked to the fulfilment of the international obligations assumed by Portugal.

One of the EE of the ENIPD 2021–2025 was 'No. 4 – Work, employment and vocational training' (ENIPD 2021–2025, 2021, p. 4). Furthermore, and similarly to the area of education, the Strategy considers that the effective exercise of rights and duties and to achieve full inclusion depends on ensuring work on an equal basis and under conditions of dignity,freely chosen, as well as on guaranteeing "access to vocational and professional training and qualification, the development of potential, and the guarantee of vocational and professional rehabilitation" (ENIPD 2021–2025, 2021, p. 10).

In particular, the ENIPD, in this EE No. 4, has defined the following general and specific objectives:

"**General Objective 1: to revitalise the support system for the professional integration of Persons with disabilities.** Specific objectives:

1.1 — Understand the dynamics and strengthen the role of employment services in the process of mediation and transition to employment or return to employment for Persons with disabilities;

1.2 — Create conditions to ensure accessibility for persons with disabilities to the training provision offered by the Network of Vocational Training Centres of the Institute for Employment and Vocational Training, I.P. ("IEFP, I.P.");

1.3 — Reorganise the network of Resource Centres supporting professional inclusion, promoting its transition to a support network for participation coordinated with the intervention of the public employment service.

General Objective 2: to create contextual conditions that promote the employability of Persons with disabilities. Specific objectives:

2.1 — Promote programmes, measures and support to facilitate employment;

2.2 — Promote the creation of an inclusive environment that facilitates the employment of Persons with disabilities.

General Objective 3: To develop entrepreneurship and self-employment among Persons with disabilities. Specific objectives:

3.1 — Boost entrepreneurship and self-employment.

Based on these General and Specific Objectives, 25 measures were planned (ENIPD 2021–2025, 2021, pp. 40–46). According to the report on activities carried out under ENIPD 2021–2025, published by the IDiPD Institute (, I.P.) (formerly known as INR, I.P.), by 31 December 2024, axis 4 – "Work, Employment and Vocational Training" had achieved 57% implementation (INR, I.P., 2025b, p. 11).

It should be noted that the overall implementation rate presented does not, in itself, allow for an assessment of the degree of substantive compliance with Article 27 of the CRPD. The assessment of the implementation must take into account not only the formal implementation of the planned measures, but also their actual results in terms of reducing the employment gap, increasing employment in the open labour market improving the quality and stability of employment and reducing dependence on sheltered or protected employment schemes. The absence of impact indicators aligned with human rights undermines the interpretation of implementation as evidence of substantial compliance with the Convention.

At the level of civil society and academia, the Me-CDPD highlights the emergence of initiatives that aim not only to raise awareness of the inclusion of persons with disabilities in the labour market, but also to actively promote this very inclusion. Consider, for example, the publication of the handbook "Overcoming the challenges of the professional integration of young persons with disabilities – good practices in the field", a guide that brings together implemented strategies and practical recommendations aimed at supporting public and private employers in creating inclusive job opportunities (Observatory on Disability and Human Rights (ODDH), 2025c); and the "Todos Incluídos" portal, promoted by Nova SBE's Inclusive Community Forum, which "connects persons with disabilities seeking opportunities with companies committed to inclusive recruitment practices" (Nova SCE Inclusive Community Forum, 2026).

These initiatives demonstrate the dynamism of civil society and academia in promoting inclusive employability. However, under Article 4 of the CRPD, the primary responsibility for realising the right to decent work lies with the State, through public policies, adequate funding, effective regulation and monitoring mechanisms. Civil society initiatives should complement, and not substitute, the State's obligation to ensure structural conditions for labour inclusion.

Action by the Me-CDPD

Recently, **the Me-CDPD,** as an independent and autonomous body responsible for monitoring the implementation of the CRPD in Portugal, **contributed by issuing a contribution regarding** the project developed by Rede Capital Social, the ODDH

and other partners: **“Strategy for the Promotion of Employability of persons with disabilities in Portugal and Action Plan”** (Me-CDPD, 2025a).

This strategy encompasses both legislative measures — namely the “Revision of the Framework Law on Accessibility” (P1 IE1), the “Revision of the Quota Law” (P1 IE2), the "Revision of social security contribution schemes and corporate tax incentives for companies" (P1 IE3) and the “Revision of the +Emprego measure” (P1 IE4) — as well as operational measures to promote employability, including the “Creation of a Task Force within the ODDH specialising in the employability of persons with disabilities” (P2 IE1), the creation of a “Centralised Database to support understanding of disability, Persons with disabilities and employers” (P2 IE2) and the development of an “Inclusive Employability Platform” (P2 IE4), as well as awareness-raising initiatives aimed at the educational community, the media and other relevant stakeholders.

Without prejudice to the detailed analysis contained in the project documentation and Contribution No. 2/Me-CDPD/2025, **the Me-CDPD emphasises that the implementation of a National Strategy for the Employability of Persons with Disabilities “requires the combination of two essential elements: 1) the State’s primary responsibility to ensure**, through public policies, budgets and regulatory mechanisms, the rights enshrined in the CRPD; and **2) the active, adequately funded and meaningful participation of civil society** (*e.g.* organisations of persons with disabilities, trade unions, social enterprises, academia and service providers), which complements public action through practical expertise, independent monitoring and the lived experience of persons with disabilities.” (Me-CDPD, 2025a, p. 15).

Quota Laws: public and private sectors

Decree-Law No. 29/2001 of 3 February establishes an employment quota scheme for persons with disabilities, with a degree of disability of 60% or more, in accordance with the national disability assessment framework, in all services and bodies of the central, autonomous regional and local administrations (Decree-Law No. 29/2001, of 3 February 2001, Article 1o).

The scheme provided for in Decree-Law No. 29/2001 constitutes a positive action measure compatible with Article 5(4) of the CRPD, as an instrument designed to accelerate de facto equality in access to public employment. This mechanism must be interpreted in conjunction with Article 27 of the CRPD, which imposes on States Parties the obligation to actively promote the employment of Persons with disabilities in the public sector, as a model employer.

Under the provisions of Article 3(1): “in all external recruitment competitions for entry into the civil service where the number of posts available is 10 or more, a quota of 5%

of the total number of posts, rounded up to the nearest whole number, must be set aside for persons with disabilities."; Para. 2 provides that "in competitions where the number of posts to be filled is fewer than 10 but three or more, one post shall be reserved for candidates with disabilities." And para. 3 states that "in competitions where the number of posts to be filled is one or two, candidates with disabilities shall be given preference in the event of equal ranking, which shall take precedence over any other legal preference".

Notwithstanding its binding nature, it is important to ensure that this regime does not end at the formal recruitment stage, but also requires accessibility in competition procedures, the provision of reasonable accommodation and mechanisms to support professional integration, otherwise, it risks becoming a merely statistical mechanism rather than an effective instrument of inclusion.

Similarly, Law No. 4/2019 also constitutes a positive action measure under Article 5(4) of the CRPD. However, its limitation to medium and large enterprises raises concerns regarding the effective coverage of the Portuguese business sector, which is predominantly composed of micro and small enterprises, and may thus create disparities in the realisation of the right to work enshrined in Article 27 of the CRPD.

Law No. 4/2019 of 10 January establishes the employment quota system forpersons with disabilities, with a degree of disability of 60% or more, with a view to their recruitment by private-sector employers and public sector entities not covered by the scope of application of Decree-Law No. 29/2001 of 3 February (Law No. 4/2019 of 10 January 2019, Article1). This scheme applies to all employment contracts governed by the Labour Code, and exclusively to medium-sized enterprises (with 75 or more employees) and large enterprises (Article 2(3)).

This law stipulates that medium-sized enterprises, with 75 or more employees, must employ "workers with disabilities, in a number not less than 1% of their workforce" (Article 5(1)) and large enterprises must employ "workers with disabilities, in a number not less than 2% of their workforce" (Article 5(2)). Breach of these provisions constitutes a serious administrative offence (Article 9(1)).

It is also important to emphasise that the effectiveness of this scheme depends on the existence of effective monitoring mechanisms, in particular through the Authority for Working Conditions (ACT) and coordination with the IEFP, I.P., as well as the regular publication of data on quota compliance, in line with the data collection obligation set out in Article 31 of the CRPD.

Furthermore, both schemes make access to the quota system conditional upon verification of a degree of disability equal to or greater than 60%, in accordance with the national assessment scheme. Although this criterion is in line with the current administrative model, it is important to assess its substantive compatibility with the human rights model enshrined in the CRPD, which does not condition the exercise of rights on percentages of disability, but rather on the existence of barriers that limit full

and effective participation in society. Maintaining this threshold may, in certain contexts, lead to situations of indirect exclusion of Persons with disabilities who, whilst not meeting that formal threshold, continue to face significant barriers to accessing the open labour market.

Action by the Me-CDPD

The Me-CDPD has addressed this issue on several occasions. Indeed, in contribution No. 2/Me-CDPD/2025, referred to above, **it highlighted the need to strengthen the legal frameworks of the quota system with "effective monitoring, incentives and progressive targets" and to consider a possible amendment to the percentages set out in these laws in order to avoid situations of indirect discrimination** (Me-CDPD, 2025a, p. 4). This understanding is in line with the Committee's General Comment No. 8 on Article 27 of the CRPD, which clarifies that quota systems must be integrated into a structural policy of labour inclusion and , accompanied by effective monitoring mechanisms, proportionate sanctions and appropriate incentives, otherwise they risk becoming merely formal instruments, with no real impact on transforming the labour market into an open, inclusive and accessible labour market. However, specifically regarding these two issues, the following should be noted:

- Opinion No. 3/Me-CDPD/2018, of 17 September 2018, on Draft Law No. 861/XII/3rd of the Ministry of Labour and Social Solidarity - Establishes the obligation to employ 2% of workers with disabilities. This opinion resulted from the analysis of a draft law that ultimately became one of the bills leading to Law No. 4/2019 of 10 January. This opinion thus constituted an important step in the initial shaping of the quota system in the private sector, highlighting from the outset the need to ground any affirmative action measure in a human rights model of disability, consistent with the principles of substantive equality and non-discrimination enshrined in Articles 5 and 27 of the CRPD.

- Opinion No. 4/Me-CDPD/2018, of 17 September 2018, concerning Draft Law No. 860/XII/3rd of the CDS-PP – Extraordinary Programme for the Recruitment of Persons with disabilities into the Civil Service. This opinion was issued in relation to a draft law aimed at strengthening the recruitment of persons with disabilities in the public administration, but it eventually lapsed and will therefore not be analysed in depth.

At the time of issuing Opinion No. 3/Me-CDPD/2018, the Me-CDPD considered that, although this was a necessary and urgent legislative measure given the situation in the private sector, it was equally essential that it should not be an isolated measure: "it is important that these measures be accompanied by awareness-raising and information campaigns aimed at businesses, conveying the new conceptualisation of disability, as well as aligning current vocational training measures with the needs of the business sector, and strengthening and publicising the incentives available to businesses for hiring persons with disabilities, amongst other things." (Me-CDPD, 2018f, p. 23). Furthermore, and specifically regarding draft law No. 861/XIII/3rd, the Me-CDPD recommended several measures. The table below

summarises these recommendations and the extent to which they were incorporated into the version that was ultimately approved and gave rise to Law No. 4/2019 of 10 January:

Recommendations of the Me-CDPD in Opinion No. 3/Me-CDPD/2018	Law No. 4/2019 of 10 January
The draft law should adopt a human rights approach, including every person with a disability, regardless of the type or degree of disability (Me-CDPD, 2018f, p. 23)	Not accepted.
The draft law should incorporate the concept of 'reasonable accommodation' as defined in Article 2 of the CRPD (Me-CDPD, 2018f, p. 23)	Not accepted.
The draft law should include, in the article on "Employer's Obligations", the "legal enshrinement of the obligation to provide reasonable accommodation, whenever necessary, at the request of Persons with disabilities themselves, at two levels: 1) in the recruitment and selection procedures for candidates (*e.g.* adapted assessment tests for candidates); and also 2) in the adaptation of work environments to the specific needs of workers with disabilities (*e.g* removal of architectural barriers, adaptation of the workstation and other necessary adaptations)". (Me-CDPD, 2018f, p. 23)	Reception (Article 7)
The Me-CDPD disagrees with the creation of the "Directorate of Employment and Vocational Training Services for Persons with Functional Diversity" (Article 5 of the draft law). These responsibilities should be integrated into the IEFP, I.P. (Me-CDPD, 2018f, p. 23)	Accepted

A comparative analysis between the recommendations issued by the Me-CDPD and the final approved text shows that the structural concerns identified were only partially addressed. In particular, the failure to expressly incorporate the concept and legal duty of reasonable accommodation, as defined in Article 2 of the CRPD and the retention of a restrictive eligibility criterion based on percentage-based disability assessment demonstrate the persistence of a legal-administrative approach that does not fully reflect the human rights model enshrined in the Convention.

This regulatory limitation is particularly significant in light of Article 27 of the CRPD, which requires States Parties not only to adopt formal measures facilitating access to employment, but also to create the material conditions necessary to ensure substantive equality of opportunity, retention and career progression within an open, inclusive and accessible labour market. In this regard, it is clear that the consolidation of a genuinely inclusive employment regime requires a structural review of labour legislation, an issue addressed further below.

Revision of the Labour Code

Law No. 7/2009 of 12 February approved the new Labour Code. Article 85 of this Code stipulates that workers with disabilities “shall enjoy the same rights and be subject to the same duties as other workers in terms of access to employment, training, promotion and career progression, or professional career progression, and working conditions, without prejudice to the specificities inherent to their situation” (para. 1). The same article establishes in para. 2 that it is the State’s obligation to encourage and support “the employer’s efforts in hiring workers with disabilities, chronic illnesses or cancer, and vocational rehabilitation" (para. 2).

Although the wording of Article 85 formally enshrines the principle of equality in access to employment and working conditions, the provision remains rooted in a predominantly programmatic and incentive-based approach, referring to the State’s role in providing incentives, without explicitly setting out the clear and enforceable legal obligations imposed on employers regarding accessibility and reasonable accommodation, as required by Articles 5 and 27 of the CRPD.

In this regard, Article 86 of the Labour Code stipulates that, in order to comply with the general principle established in Article 85(1), the employer must adopt ‘appropriate measures’. The use of the expression "appropriate measures", however, lacks normative clarification. In the light of the CRPD, such measures must necessarily include the obligation to ensure reasonable accommodation whenever required in a particular case; this obligation cannot be understood as merely optional or dependent on supplementary regulations. The absence of an express reference to reasonable accommodation as a binding legal duty undermines the Labour Code’s compliance with Article 2 of the Convention. Article 86(2) provides that “the State shall encourage and support, by appropriate means, the employer’s action in achieving” those objectives. Furthermore, the current regime places the main burden on the State as the promoting and incentivising entity, failing to establish with sufficient clarity the direct responsibility of the private employer as the actor responsible for removing barriers and provide conditions of physical, digital and organisational accessibility, as required by Article 27(1)(i) of the CRPD.

A review of the Labour Code is therefore required not only to reinforce the principle of formal equality, but also to ensure the explicit incorporation of the duty of reasonable accommodation, accessibility of workplaces and working environments, and effective monitoring and sanctioning mechanisms in the event of non-compliance. Without such regulatory consolidation, the labour regime risks remaining insufficient to guarantee the full realisation of the right to decent work, freely chosen or accepted within an open, inclusive and accessible labour market and work environment, as enshrined in Article 27 of the CRPD.

Action by the Me-CDPD

In 2025, the 25th Government presented a draft bill on the reform of labour legislation (Draft Bill on the Reform of Labour Legislation, 2025). **The Me-CDPD considered that this initiative represented an opportunity to strengthen equality and labour Rights of Persons with Disabilities in the labour market and, on its own initiative, issued Recommendation No. 5/Me-CDPD/2025.**

The Me-CDPD considered that the legislative review process constituted a structural opportunity to bring the Labour Code into line with the international obligations assumed by Portugal under the CRPD, particularly with regard to the adoption of legislative and administrative measures aimed at producing measurable results in terms of inclusion in an open, inclusive and accessible labour market.

The proposals put forward were structured in light of the implementation obligations arising from the CRPD, which require not only the formal elimination of discrimination, but the adoption of positive, sustained and positive, sustained and adequately funded measures that remove structural barriers and promote substantive equality.

Specifically, **the Me-CDPD highlighted the need for a review of labour law to ensure greater compliance with Article 27 of the CRPD,** particularly in relation to the following areas:

1. Active promotion of decent employment, in particular:

1.1. Comprehensive human rights and impact assessments, including the identification of risks of indirect discrimination to ensure that the measures to be implemented are effective, sustainable and aligned with the principles of inclusion and equality;

1.2. Provision of tax and financial incentives for employers, such as tax deductions, subsidies or socio-economic benefits, in order to mitigate potential additional costs associated with workplace inclusion and foster a more inclusive organisational culture;

1.3 Implementation of mandatory inclusion plans within organisations, in accordance with Law No. 4/2019, specifically with annual targets for the recruitment, retention and career progression of persons with disabilities;

1.4 Establishment of Professional Integration Support Units, with the aim of providing specialist support to both workers with disabilities and employers, facilitating workplace inclusion and adaptation, continuous training and the mediation of workplace conflicts.

2. The right to accessibility and reasonable accommodation, incorporated into the Labour Code:

2.1 Explicit incorporation of accessibility and reasonable accommodation into the Labour Code;

2.2 Ensure physical and digital accessibility;

The Me-CDPD emphasised that the absence of an explicit provision on reasonable accommodation as a direct legal obligation of the employer constitutes a material non-compliance with Articles 2 and 27 of the CRPD, and that its unequivocal incorporation into the Labour Code is necessary.

3. Recognition of teleworking as a form of reasonable accommodation;

4. Protection against discriminatory dismissal and equality in working hours, holidays and parental leave;

5. Integration of the supported employment scheme and promotion of inclusive vocational training;

6. Recognition of informal carers within the employment framework;

7. Review of the legal framework governing socially useful activities;

8. Monitoring and data collection to assess the impact of reforms, in particular:

8.1 Mandatory preparation and publication of annual reports on employment, quotas and inclusion measures;

8.2 Regular collection and publication of the number and percentage of persons with disabilities enrolled in training programmes and employment services;

8.3 Creation of indicators and the obligation to publish, on a regular basis, the number and percentage of Persons with disabilities benefiting from measures such as training, work placements and/or other programmes and measures within the public and private sectors. (Me-CDPD, 2025a, p. 4; Recommendation No. 5/Me-CDPD/2025, on the inclusion of the labour Rights of Persons with Disabilities within the framework of the Labour Law Reform (draft bill – July 2025), 2025, pp. 14–21).

These measures also give effect to the duty to collect data and monitor progress set out in Article 31 of the CRPD, an essential condition for assessing the effectiveness of public policies, preventing indirect discrimination and ensuring accountability in the implementation of legislative reforms.

Considering that decent, accessible and inclusive work is a human right enshrined in the Convention and in various binding international human rights instruments, **the Me-CDPD concludes by calling upon the Portuguese State, the Assembly of the Republic, the Government and all social partners to adopt concrete and measurable legislative measures aimed at ensuring effective inclusion, substantive equality and full accessibility within an open, inclusive and accessible labour market for all persons, including persons with disabilities.**

Analytical Summary

Article 27 of the CRPD enshrines the right of Persons with disabilities to work on an equal basis with others, inclusive and accessible labour market. Furthermore, it imposes positive obligations on the State to prevent, prohibit and sanction discrimination at all stages of the employment relationship (*e.g.* recruitment, hiring, retention, progression), to ensure fair and favourable conditions, trade union rights, access to guidance and training, and to guarantee reasonable accommodation in the workplace, the refusal of which constitutes discrimination (Articles 2 and 5). The realisation of this right must be interpreted in the light of General Comment No. 8 (2022), which identifies ableism as a structural barrier and emphasises that compliance with Article 27 is not measured solely by aggregate employment rates, but by the quality of employment (*e.g.* employment security, career progression, equal remuneration, protection against precariousness and harassment), as well as by the reduction of the disability employment gap for Persons with disabilities and long-term unemployment.

In the Portuguese context, despite positive developments in employment indicators, structural inequalities and recurring obstacles persist (*e.g.* physical, communication, digital and attitudinal barriers, and the absence or refusal of reasonable accommodation), requiring an integrated approach with Article 9 (accessibility) and with legislative, administrative and budgetary implementation obligations geared towards measurable results. The Committee's Concluding Observations (2016) remain particularly relevant as they highlight: discrimination in access and working conditions (with a disproportionate impact on women with disabilities), the insufficient enforceability of reasonable accommodation in labour legislation and the persistence of segregated responses (then centred on occupational models), recommending a cross-cutting reform involving monitoring, accountability and a transition to open-market employment, including for persons with disabilities with diverse support requirements.

In terms of public policy, the ENIPD 2021–2025 included a dedicated axis on work, employment and training. However, the implementation of this pillar requires rigorous scrutiny, given that the overall implementation rate does not replace an assessment of the actual impact on inclusion in the open labour market, on quality of employment conditions and on the reduction of inequalities, requiring outcome indicators

and the systematic collection of data (Article 31). Positive action measures, such as quota schemes in the public and private sectors, are compatible with Article 5(4), but depend on effective monitoring, transparency and effective conditions of accessibility and reasonable accommodation, failing which they risk producing formal compliance without substantive inclusion; furthermore, restrictive criteria based on disability thresholds may lead to indirect exclusion.

Finally, the current labour framework highlights the need for more robust and enforceable legislation. Although it enshrines the principle of equality, the Labour Code remains overly generaland fails to directly impose on employers the duty to ensure reasonable accommodation, justifying the revision advocated by the Me-CDPD in Recommendation No. 5/Me-CDPD/2025, with concrete measures (*e.g.* the explicit incorporation of accessibility and reasonable accommodation, teleworking as a form of reasonable accommodation,protection against discriminatory dismissal, inclusion plans with retention/progression targets, support units, and annual public monitoring). Thus, the Me-CDPD considers the need for an approach that combines legislative reform, incentives and sanctions, accessibility, support services and data-driven accountability, aimed at transforming the right to decent work from a formal guarantee into a tangible reality, reducing segregation, precariousness and the structural barriers that still limit equality in the labour market for persons with disabilities.

Summary Table

Work and Employment

Right to decent and inclusive work (Article 27 of the CRPD)

Right to Work and Employment on an Equal Basis with Others and without Discrimination:

Article 27 of the CRPD recognises the right of Persons with disabilities to:

- Work on an equal basis with others.
- Access an open, inclusive and accessible labour market and work environment.
- Enjoy just and favourable conditions of work.
- Benefit from reasonable accommodation, the denial of which constitutes discrimination on the basis of disability.

According to the Committee's interpretation, the effective realisation of this right is reflected in:

- Quality of employment conditions: Including employment security, fair remuneration and career progression.
- Combating ableism: Eliminating stereotypes and discriminatory assumptions that perceive Persons with disabilities as less productive or capable.

Current Situation

Portugal has established relevant legal instruments and public policies in this area, including:

- Employment quota schemes in the public and private sectors.
- Anti-discrimination labour legislation.
- Measures supporting employability and labour inclusion.
- Formal recognition of the right to work and employment.

Identified Issues

Despite some positive developments, the Me-CDPD continues to identify persistent barriers:

- Low labour market participation: Persons with disabilities remain underrepresented.
- Challenges in the implementation and enforcement of quota schemes: Uneven compliance across public and private sectors and limited enforcement.
- Insufficient provision and enforcement of reasonable accommodation: Creating barriers to access to, retention in and progression within employment.

Identified Issues

- Persistence of stereotypes, prejudice and ableist attitudes: Including paternalistic perceptions and the undervaluation of the skills and competencies of persons with disabilities.
- Gap between policy and practice: Existing measures do not consistently ensure substantive inclusion.
- Direct economic impact: Increased risk of poverty, social exclusion, dependency, social isolation and institutionalisation affecting persons with disabilities and their families.

Recommendations of the Me-CDPD

- Strengthen the implementation and enforcement of quota schemes.
- Ensure effective provision of reasonable accommodation, including awareness-raising on its application and recognition of teleworking as a form of accommodation where appropriate.
- Reinforce safeguards against discriminatory dismissal.
- Promote inclusive work environments, including training across sectors on the human rights model of disability.
- Ensure coherence between employment, education and training policies.
- Develop inclusion plans within organisations, including targets for retention and career progression, and not solely recruitment.
- Ensure compatibility between employment and social protection schemes.
- Strengthen monitoring and accountability mechanisms, including annual reporting based on disaggregated data and impact indicators.

Activities of the Me-CDPD

The Me-CDPD has monitored public policies in the field of work and employment and has addressed this area through opinions and recommendations, promoting a human rights-based approach.

It emphasises the need to ensure equal opportunities in access to and retention in employment for persons with disabilities with diverse support requirements, emphasising the central role of reasonable accommodation in the realisation of this right.

It also underscores the importance of promoting, wherever possible, the transition from segregated or sheltered occupational models to full inclusion within the open labour market, while ensuring continuity of appropriate support, including job coaching, communication support and assistive technologies.

Article 28
Adequate standard of living and social protection

States Parties recognize the right of persons with disabilities to an adequate standard of living for themselves and their families, including adequate food, clothing and housing, and to the continuous improvement of living conditions, and shall take appropriate steps to safeguard and promote the realization of this right without discrimination on the basis of disability.

States Parties recognize the right of persons with disabilities to social protection and to the enjoyment of that right without discrimination on the basis of disability, and shall take appropriate steps to safeguard and promote the realization of this right, including measures:

To ensure equal access by persons with disabilities to clean water services, and to ensure access to appropriate and affordable services, devices and other assistance for disability-related needs;

To ensure access by persons with disabilities, in particular women and girls with disabilities and older persons with disabilities, to social protection programmes and poverty reduction programmes;

To ensure access by persons with disabilities and their families living in situations of poverty to assistance from the State with disability-related expenses, including adequate training, counselling, financial assistance and respite care;

To ensure access by persons with disabilities to public housing programmes;

To ensure equal access by persons with disabilities to retirement benefits and programmes.

Article 28
Adequate standard of living and social protection

General Framework

This article recognises the right of all Persons with disabilities to an adequate standard of living and social protection, without limiting this right on the basis of the type or level of support requirements, and on an equal basis with all others (Me-CDPD, 2020). For this reason, it is important to highlight, from the outset, the relationship between Article 28 and Article 5 of the CRPD, which establishes the principle of equality and non-discrimination.

In addition to the principle of equality and non-discrimination, Article 28 must be interpreted in the light of Article 19 of the CRPD, insofar as the guarantee of an adequate standard of living constitutes a material condition for the exercise of the right to live independently and be included in the community and to be included in the community. Insufficient or inadequate social benefits may, in practice, result in an indirect limitation of autonomy and social participation.

The right to an adequate standard of living and social protection is enshrined as a fundamental human right further reinforced by other international human rights instruments. Firstly, in the UDHR, and in particular in Article 22, which stipulates that everyone has the right to social security and is entitled to the realisation of the economic, social and cultural rights indispensable for dignity and the free development of personality; and in Article 25, which establishes the right to an adequate standard of living. These same rights are also enshrined in Articles 9 and 11 of the ICESCR, respectively.

It is also important to emphasise that, under the ICESCR, the right to social security and to an adequate standard of living entails a dimension of "adequacy" and "sufficiency", requiring that benefits effectively guarantee decent living conditions. This requirement of adequacy is equally applicable to Article 28 of the CRPD, as the mere formal existence of benefits is not sufficient.

It is also worth noting Target 10.2 of the SDGs, which is in line with the provisions of this article and which states that “by 2030, empower and promote the social, economic and political inclusion of all, regardless of age, gender, disability, ethnicity, origin, religion, economic status or other factors” (Target 10.2) (United Nations, 2015f).

At European level, the Revised European Social Charter sets out a set of rights that relate to the provisions of Article 28 of the CRPD, namely the right to social security (Article 12);

the right to social and medical assistance (Article 13); and the right to social services (Article 14). In this regional context of the Council of Europe, it is also important to consider the European Social Security Code and its Additional Protocol.

At EU level, Article 34 of the Charter of Fundamental Rights of the European Union (CFR) states that “the Union recognises and respects the right of access to social security benefits and social services providing protection in cases such as maternity, illness, industrial accidents, dependency or old age, as well as in the event of loss of employment”.

Chapter III of the European Pillar of Social Rights is dedicated to social protection and inclusion. This document sets out the “principles and fundamental rights to ensure the fairness and proper functioning of labour markets and the social protection system in 21st-century Europe” (European Pillar of Social Rights, 2017, para. 14). Twenty principles have been defined, of which Principle 17 stands out, stating that “persons with disabilities have the right to income support that guarantees them a dignified life, to services that enable them to participate in the labour market and in society, and to a working environment adapted to their needs” (European Pillar of Social Rights, 2017, p. 21). Principle 17 of the Pillar reinforces an integrated approach to income support and inclusion in the labour market, moving away from purely compensatory or segregating models. This perspective aligns with Article 28 of the CRPD, which is not limited to passive social protection but requires measures that promote economic and social participation on an equal basis with others.

Article 63(1) of the CRP establishes that "everyone has the right to social security". This social security system protects “citizens in the event of sickness, old age, disability, widowhood and orphanhood, as well as in the event of unemployment and in all other situations of lack or reduction of means of subsistence or capacity for work” (Article 63(3) of the CRP).

In order to understand how these two rights are guaranteed and implemented within the Portuguese legal system, it is important to briefly understand the organisation of the social security system. Law No. 4/2007 of 16 January establishes the general foundations of the social security system. Social security is structured into different systems, each comprising several subsystems:

- **Citizenship social protection system** – aims to guarantee citizens’ basic rights and equal opportunities, as well as to promote social well-being and cohesion (Chapter II);
- **Social action subsystem** – aims to prevent and remedy situations of deprivation and socio-economic inequality, dependency, dysfunction, social exclusion or vulnerability (Section II). This subsystem also ensures “special protection for the most vulnerable groups, namely children, young people, persons with disabilities and the elderly” (Article 29);

- **Solidarity subsystem** – designed to ensure essential rights on the basis of solidarity in order to prevent and eradicate situations of poverty and exclusion (Section III);

Family protection subsystem – aims to ensure compensation for increased family expenses (Section IV). This subsystem also covers expenses "in the area of disability" and "in the area of dependency" (Article 46(b) and (c)).

- **Contributory social security system** – aims to guarantee, on the basis of the principle of solidarity based on employment, cash benefits to replace income from work lost as a result of legally defined contingencies (Chapter III).

In accordance with Article 67 of the Basic Social Security Law, unless otherwise provided, benefits arising from the same event and relating to the same protected interest may not be combined. The structure of the social security system must be analysed in light of the obligation to ensure that benefits for Persons with disabilities take into account the additional costs associated with disability, particularly in relation to assistive products and technologies, personal assistance, transport, healthcare and housing adaptations. Failure to take these costs into account may compromise the material adequacy of benefits and result in substantive inequality, in breach of Article 5 of the CRPD.

The amounts of social support are set on the basis of the IAS, which is updated annually (Law No. 4/2007 of 16 January, consolidated version, 2013). In 2025, the IAS was set at €522.50; in 2026, the value was updated to €537.13 (Ministerial Order No. 6-B/2025/1 of 6 January 2025, Article 2; Ordinance No. 480-A/2025/1 of 30 December 2025, Article 2).

Indexing benefits to the IAS does not relieve the State of its obligation to periodically assess the actual adequacy of the amounts in relation to the cost of living and the specific needs of Persons with disabilities. The nominal updating of amounts does not, in itself, guarantee an adequate standard of living; evidence-based monitoring is required, in accordance with Article 31 of the CRPD.

In terms of implementation obligations, Article 28 imposes legislative, administrative and budgetary duties on States Parties to ensure that social protection systems are accessible, adequate and non-discriminatory. This entails the periodic review of benefits, the removal of disproportionate restrictive criteria, the guarantee of accessible procedures and the existence of accessible and effective complaint mechanisms.

Observations, recommendations and developments

In the concluding observations sent by the Committee to the Portuguese State (2016), he implementation of Article 28 was addressed in paragraphs 53 and 54.

In this regard, the Committee began by commending the State party for the efforts made to mitigate the impact of austerity measures on Persons with disabilities, which, at the time, remained a significant concern. However, it expressed concern that "there are no adequate support services of any kind for persons with disabilities who, as a result of the implementation of these austerity measures" and in the absence of family support or care networks, were forced to live in poverty or extreme poverty (Committee on the Rights of Persons with Disabilities, 2016, para. 53).

That said, the Committee recommended that the Portuguese State, in cooperation with organisations representing persons with disabilities, adopt the following measures:

> "(a) Urgently review the austerity measures in order to prevent further negative and regressive effects on the standard of living and social protection of persons with disabilities, adopting measures that enable their inclusion in the community;
>
> (b) Provide support services for independent living and housing that respect the Rights of Persons with Disabilities, as well as their wishes and preferences, and grant cash benefits enabling unemployed persons with disabilities without family support to achieve a decent standard of living;
>
> (c) Step up efforts, in line with the Convention's human rights approach, to strengthen the right to a decent standard of living and to social protection for Persons with disabilities living in poverty and extreme poverty, allocating sufficient financial resources for this purpose;
>
> (d) Consider the interrelationships between Article 28 of the Convention and SDG Target 10.2, with the aim of empowering and promoting the social, economic and political inclusion of all persons, regardless of their disability." (simple translation) (Committee on the Rights of Persons with Disabilities, 2016, para. 54)

The recommendations set out in para. 54 must be interpreted in the light of the prohibition on regressive measures in relation to economic, social and cultural rights, as elaborated by the Committee on Economic, Social and Cultural Rights under the ICESCR. Thus, any fiscal or financial consolidation policy that has a disproportionate impact on persons with disabilities may amount to a violation of Article 28 of the CRPD, particularly where adequate compensatory measures or human rights impact assessments are not ensured.

According to the ODDH report (2025), based on 2024 data, in Portugal, "more than two-thirds (66.4%) of Persons with disabilities aged over 16 were at risk of poverty before social transfers, twice the rate for persons without disabilities"

(Observatory on Disability and Human Rights (ODDH), 2025b, p. 45). These figures demonstrate that social protection plays a structural role in mitigating the risk of poverty among Persons with disabilities, necessitating a qualitative assessment of the material adequacy of the social benefits provided. The analysis of compliance with Article 28 cannot be limited to the formal existence of benefits; rather, it must assess whether the amounts allocated effectively ensure a decent standard of living, taking into account the additional costs arising from disability.

Between 2015 and 2023, in Portugal, the risk of poverty or social exclusion remained consistently higher in households with persons with disabilities than in households without disabled members (Observatory on Disability and Human Rights (ODDH), 2025a, p. 67). In 2024, the risk among persons with disabilities increased by 1.4 percenta ge points compared to the same period the previous year, in contrast to the stagnation of this indicator among the non-disabled population (Observatory on Disability and Human Rights (ODDH), 2025b, p. 48).

With regard to data from 2023, the ODDH report highlighted how this risk is particularly acute in the case of women with disabilities, as, despite overall improvements for all groups, they continued to maintain "consistently higher rates of risk of poverty or social exclusion compared to men with disabilities and other groups" although the difference remained relatively limited (+2.0 percentage points) (Observatory on Disability and Human Rights (ODDH), 2025a). This trend appears to have been interrupted in 2024, when, for the first time since 2015, a higher risk of poverty and social exclusion was recorded among men with disabilities than among women; national figures that do not align with the EU average, which continues to show a higher risk of poverty or social exclusion among women with disabilities (Observatory on Disability and Human Rights (ODDH), 2025b, p. 52). The persistence of disparities between men and women with disabilities confirms the need for an intersectional interpretation of Article 28, read in conjunction with Article 6 of the CRPD, requiring targeted measures to address the cumulative effects of structural inequalities.

The ENIPD 2021–2025 includes Priority Axis 6 on 'social measures, services and support'. This axis is geared towards achieving the following general and specific objectives:

"**General Objective 1: to promote, expand and enhance an innovative network of services, facilities and social support, tailored to the characteristics of the regions and the profile of the needs of Persons with disabilities and their families.** Specific objectives:

1.1 — Ensure the quality, sustainability and accessibility of social responses aimed at Persons with disabilities and their families;

1.2 — Foster modernisation and social innovation in the creation of inclusive and locally-based measures, social responses and support services;

1.3 — To promote improved access to, and the creation of, support services and facilities that enable a balance between family and professional life and contribute to the quality of life of Persons with disabilities and their families;

1.4 — Promote measures and support programmes for Persons with disabilities in situations of dependency and their carers that give effect to their recognition in the Informal Carer Statute;

1.5 — Promote improvements in the effectiveness and efficiency of the Support Products Allocation System.

General Objective 2: innovation in community-based participation activities. Specific objectives:

2.1 — To promote socially useful activities and community work;

2.2 — Promote inclusive volunteering.

General Objective 3: to strengthen, modernise and simplify social support benefits for Persons with disabilities. Specific objectives:

3.1 — Expand and strengthen social protection for Persons with disabilities;

3.2 — Reformulate and simplify dependency-based social benefits;

3.3 — To promote the fight against poverty among Persons with disabilities." (ENIPD 2021–2025, 2021, p. 16).

Based on these objectives, around 30 measures/actions were planned, each with one or more performance indicators (ENIPD 2021–2025, 2021, pp. 52–61). According to the report on activities carried out under ENIPD 2021–2025 published by IDiPD, I. P. (formerly known as INR, I.P.), as of 31 December 2024, EE 6 – "Social measures, services and support" had an implementation rate of 37% (INR, I.P., 2025b, p. 11).

An implementation rate of 37% in the priority axis dedicated to social measures, services and support raises concerns regarding the progressive realisation of the right enshrined in Article 28. Under the CRPD, progressive realisation does not exempt the State from the obligation to demonstrate that it is mobilising the maximum available resources and adopting deliberate, concrete measures geared towards measurable results.

In addition to the measures that have been outlined in relation to other articles and which concern Axis 6, such as those concerning the informal carer scheme or the SAPA programme, it should be noted that the measures "EE6-3.1.1. – Simplify the procedures for accessing the Social Inclusion Benefit", whose indicator consisted of "reviewing rules and procedures"; and the measure "EE6-3.2.1. – Evaluate the Third-Party Care Allowance", whose indicator consisted of an evaluation report with proposals for improving and amending the system.

In Portugal, social protection is provided through i) cash benefits (such as the Social Inclusion Benefit); ii) social support services that "consist of facilities and services" and iii) social action responses that consist of "financial support" (INR, I.P. & Portuguese Republic, 2019a, p. 47).

With regard to pensions and social benefits, the following are particularly noteworthy:

- Disability pension;
- Family Allowance Supplement for Children and Young Persons with disabilities;
- Special Education Allowance;
- Third-party assistance allowances;
- Social Inclusion Benefit.

It is also important to critically analyse the non-cumulation rules and means-testing criteria applicable to social benefits, insofar as they may indirectly exclude or penalise persons with disabilities who have multiple support needs. Bringing these schemes into line with Article 28 of the CRPD requires that eligibility criteria and income thresholds do not result in a disproportionate reduction in social protection.

In summary, the available empirical data reveal that Persons with disabilities remain structurally more exposed to the risk of poverty and social exclusion, which necessitates a continuous assessment of the material adequacy, accessibility and coordination of existing social benefits. **The full implementation of Article 28 of the CRPD requires the maintenance of social protection measures, their adaptation to real needs, the removal of administrative barriers and the guarantee of sufficient funding, failing which the right to an adequate standard of living will remain merely formal.**

Social Inclusion Benefit (hereinafter "PSI")

The PSI consists of a "cash social benefit paid monthly to Persons with disabilities, with a degree of disability of 60% or more, and aged 18 or over at the date of application, with a aimed at promoting autonomy and social inclusion." (INR, I.P. & Portuguese Republic, 2019a, p. 47).

As a key instrument of public policy for the social protection of Persons with disabilities, the PSI must be analysed in the light of Article 28 of the CRPD not only in terms of its formal existence, but also in terms of its substantive adequacy to ensure a decent standard of living and promote autonomy and inclusion in the community. The treaty requirement is not satisfied by the mere creation of a cash benefit; rather, it requires that its design, amounts and eligibility criteria be compatible with the effective guarantee of substantive equality.

The PSI plays a central role in the social protection system for persons with disabilities in Portugal (Observatory on Disability and Human Rights (ODDH), 2025b, p. 57). According to data released by the ODDH, in 2024, the PSI covered 169,935 persons with disabilities, representing an increase of 9.3% compared to 2023 and 699.5% compared to 2017 (2025b, p. 57).

The significant increase in the number of beneficiaries can be interpreted as a sign of broader coverage and increased access, but also as an indicator of the persistence of structural vulnerability. The quantitative centrality of the PSI within the social protection system therefore necessitates a qualitative assessment of its economic adequacy, particularly in light of the additional costs associated with disability, which are internationally recognised as a major driver of poverty risk of poverty.

In the same year, Decree-Law No. 126-A/2017 of 6 October was approved, establishing the PSI, extending the solidarity supplement for the elderly to recipients of disability pensions and promoting the necessary adjustments to other social benefits. This legislation has been amended several times, with eight amendments since 2017. The high number of legislative amendments to the PSI scheme since 2017 highlights the evolving nature of the instrument, but also raises questions regarding the regulatory stability and predictability of the system. In light of Article 28 of the CRPD, social protection must be based on transparent, stable and accessible criteria, avoiding excessive complexity that could constitute an administrative barrier to the exercise of rights.

In accordance with Article 5 of Decree-Law No. 126-A/2017 of 6 October, the PSI comprises three components: the basic component, the supplement and the top-up. In 2026, the basic component increased by 2.8%, in line with the rise in the IAS, whilst the supplement rose by €105 (Contas Poupança, 2026; Ordinance No. 58-A/2026/1 of 3 February updates the annual reference value of the basic component, the annual reference value of the supplement to the social inclusion benefit and the annual maximum limit for the accumulation of the basic component with earned income, 2026). The three-part structure of the PSI seeks to address the diversity of economic and social situations, but compliance with Article 28 of the CRPD requires that the amounts allocated be assessed in light of the poverty line and the real cost of living for persons with disabilities. The indexation to the IAS, whilst relevant, may prove insufficient if it does not keep pace with the rising and differentiated costs associated with disability, namely expenditure on personal support, healthcare, transport or assistive technologies.

This benefit also has the particular feature of being able to be combined with other benefits such as survivor's pensions, supplements for dependants or a dependent spouse, and Social Integration Income, amongst others (INR, I.P. & Portuguese Republic, 2019a, p. 49). Thus, for the calculation of the basic component of the PSI, different categories of income are taken into account, such as income from employment, capital, property, pensions and social benefits (Instituto da Segurança Social, I.P., 2026, pp. 8–9).

The consideration of multiple categories of income for the purposes of calculating the basic component also raises the need for scrutiny regarding the adequacy of the means-testing criteria. Whilst, on the one hand, coordination with other benefits prevents undue overlaps, on the other, it is important to ensure that such mechanisms do not result in the indirect penalisation of Persons with disabilities who seek to engage in employment or accumulate necessary support, lest this compromise the economic autonomy and social inclusion that the benefit itself aims to promote.

In summary, the PSI plays a structural role in the social protection system for persons with disabilities in Portugal, constituting a key instrument for realising the right to an adequate standard of living, in accordance with Article 28 of the CRPD. However, its effectiveness must be analysed not only in terms of the evolution of the number of beneficiaries or nominal increases in benefit amounts, but also in light of the material adequacy of the benefits, the accessibility of procedures, the consistency of eligibility criteria and its coordination with other measures for social and professional inclusion.

It is also important to ensure that the PSI scheme contributes to strengthening the autonomy and social participation of Persons with disabilities, avoiding unintended effects that may discourage labour market participation or undermine economic autonomy.In this context, the ongoing assessment of the benefit should be carried out in accordance with Article 19 of the CRPD, ensuring that social protection contributes to creating effective conditions for independent living and inclusion in the community, on an equal basis with others.

Action by the Me-CDPD

To date, **the Me-CDPD has issued three opinions and recommendations on this matter.** This intervention forms part of the Me-CDPD's mandate as an independent mechanism for monitoring the implementation of the CRPD, in accordance with Article 33(2) of the Convention and Law No. 71/2019 of 2 September, reflecting a continuous and systematic approach to a key instrument for the social protection of persons with disabilities

The first statement, through Opinion No. 1/Me-CDPD/P/2017 of 20 March 2017 (Me-CDPD, 2017b), concerned the draft law that gave rise to Decree-Law No. which established the PSI. This opinion resulted in 11 recommendations.

Subsequently, immediately following the adoption of Decree-Law No. 126-A/2017 of 6 October, which established the PSI, the Me-CDPD issued Follow-up No. 4/Me-CDPD/2018, in order to ascertain whether or not the recommendations from the previous opinion had been incorporated into the final approved text. In this context, it was concluded that the vast majority of the recommendations had not been incorporated into the final approved version, particularly with regard to the material adequacy of the benefit, the consideration of the additional costs of disability, and the explicit integration of a human rights-based approach (Me-CDPD, 2018d).

Finally, and following several legislative amendments, the Me-CDPD issued an opinion on Draft Law No. 290/XVII/1 of the PCP, which broadens the conditions of access for Persons with disabilities to the PSI and alters the point from which this benefit is due, issuing Opinion No. 6/Me-CDPD/2025, of 11 November 2025 (Me-CDPD, 2025f).

The Me-CDPD reiterates the need for the PSI scheme to evolve from a predominantly welfare-based model into an instrument for empowerment, autonomy and substantive equality, in line with the human rights paradigm enshrined in the CRPD.

Such a transition entails moving away from a predominantly compensatory approach based on medically certified degree of disability and evolving towards a model of rights protection, centred on autonomy, self-determination and substantive equality, as set out in Articles 5, 19 and 28 of the CRPD and the Committee's General Comment No. 5. **Thus, in line with some of the recommendations previously detailed in those opinions, the Me-CDPD reiterates:**

1. The need to strengthen the right to an adequate standard of living and social protection (in line with the provisions of Article 28 of the CRPD) through differentiation and adjustment mechanisms to complement the PSI, which take into account the additional costs of disability (for example, ongoing expenses for personal assistance, transport, housing adaptations, etc.);

Furthermore, the reference value of the PSI must be determined on the basis of indicators of dignity, well-being and additional disability-related costs, rather than relying solely on the multi-purpose medical certificate of disability (Me-CDPD, 2025f, p. 11);

2. The PSI scheme must be explicit regarding its emancipatory function (Article 19 of the CRPD) and must be coordinated with support for independent living, personal assistance services, accessible housing and inclusive transport (Me-CDPD, 2025f, p. 13), otherwise the provision, otherwise the benefit, in isolation, will not guarantee the actual conditions needed to prevent situations of involuntary institutionalisation or forced dependency;

3. The need to ensure universal accessibility in the implementation of the PSI at all stages (Article 9 of the CRPD). Easy Read materials in Braille, translations into plain language and accessible digital platforms must be produced, and personalised human and technical support must be offered." (Me-CDPD, 2025f, p. 11), in conjunction with Article 21 of the CRPD, which guarantees the right to accessible information on an equal basis;

4. The need for the State to establish individualised decision-making support (Article 12 of the CRPD) to request and manage PSI (always assuming free and informed consent), namely through communication assistance, social support and legal support (Me-CDPD, 2025f, p. 12), in line with the replacement of substitute decision-making regimes with supported decision-making models, as clarified in the Committee's General Comment No. 1.

5. The PSI scheme must also be fully compatible with labour market participation (Me-CDPD, 2025f, p. 13), and mechanisms for automatic reduction or disproportionate loss of benefits in the event of entering the labour market must be avoided, lest structural disincentives incompatible with Article 27 of the CRPD be created;

6. Finally, the PSI scheme should provide for mechanisms for the collection and periodic publication of data disaggregated by type of disability, gender, age, region and socioeconomic status (Article 31 of the CRPD) in order to assess the effectiveness, impact and equity of the PSI (Me-CDPD, 2025f, p. 13), thereby also enabling the assessment of differentiated impacts and the identification of any intersectional inequalities.

These recommendations for improving and amending the scheme must also be promoted in close consultation with and with the active involvement of persons with disabilities and their representative organisations, in accordance with Article 4(3) and Article 33 of the CRPD, ensuring that any legislative review respects this principle and incorporates the real-life experiences and needs of persons with disabilities as fundamental elements of public decision-making.

Pension reform for persons with disabilities

Under Article 28(2)(e) of the CRPD, States Parties must ensure equal access for persons with disabilities to retirement benefits and pension schemes, under conditions of non-discrimination and substantive equality, in conjunction with Article 5 of the Convention. This obligation implies not only the formal existence of differentiated schemes, but also the guarantee that these do not create disproportionate barriers or excessively restrictive criteria in access to social protection in old age.

Law No. 5/2022 of 7 January establishes the scheme for early retirement due to disability. This scheme applies to persons “aged 60 or over”, with "persons with a certified degree of incapacity of 80% or more" and “at least 15 years of contributory service accrued while holding a certified degree of incapacity of 80% or more". In calculating the amount of the pension awarded, “neither the sustainability factor nor the penalty for early retirement shall apply.” (Law No. 5/2022 of 7 January 2022, Article 1). This scheme constitutes a positive action measure compatible with Article 5(4) of the CRPD, designed to mitigate the structural disadvantages arising from employment histories often marked by interruptions, lower pay and additional physical, psychological and socioeconomic burdens associated with disability.

This scheme is regulated by Decree-Law No. 18/2023 of 3 March, which sets out, in particular, the procedure for “certification of disability status”. Thus, “proof of disability and of a degree of incapacity equal to or greater than 80%, as well as of its duration, is provided by means of a document issued by the competent authority for that purpose.” (Decree-Law No. 18/2023 of 3 March 2023, Article 4).

However, reliance solely on administrative certification of the degree of incapacity, through the multi-purpose medical certificate of incapacity, may, however, constitute a factor limiting the effectiveness of the scheme, particularly in contexts of delays in medical assessment, periodic review of the degree of disability or constraints on access to medical boards, circumstances which may compromise predictability and legal certainty in the exercise of the right to social protection, in the light of Article 28 of the CRPD.

On the other hand, Article 6 of this scheme prohibits the accumulation of the pension with the pursuit of "any form of paid professional activity" (Decree-Law No. 18/2023 of 3 March 2023, Article 6, n.º 1)). This absolute prohibition requires careful assessment in the light of Article 27 of the CRPD, which enshrines the right to work on an equal basis with others throughout the life course, as well as the principles of personal autonomy and social participation. A regime that prevents any form of professional activity, even if partial, adapted or residual, may create disincentives to social and economic participation and should therefore be assessed in terms of its proportionality and compatibility with an inclusive active ageing approach and with the objective of promoting independent living, as set out in Article 19 of the Convention.

In short, **the scheme allowing for an earlier retirement age for Persons with disabilities represents a significant step forward in recognising the distinct contribution histories of Persons with disabilities. However, its full compliance with Article 28 of the CRPD will depend on ensuring proportionate access criteria, accessible and timely administrative procedures, and coherent coordination with the right to work and social participation, avoiding solutions which, although intended as protective measures, may produce unjustified restrictive effects.**

Action by the Me-CDPD

The Me-CDPD has issued three opinions and recommendations on this matter:

- Opinion No. 1/Me-CDPD/P/2020, of 6 February, issued following the submission of Draft Law No. 165/XIV/1st by the Committee on Labour and Social Security (Me-CDPD, 2020);
- Recommendation No. 1/Me-CDPD/2022, of 21 February, following a request made by the BE Parliamentary Group regarding the compatibility of Law No. 5/2022, of 7 January, with the CRPD (Me-CDPD, 2022b);
- Opinion No. 7/Me-CDPD/2025, of 11 November, on Draft Law No. 291/XVII/1st (PCP), which aims to introduce the first amendment to Law No. 5/2022 of 7 January, improving the scheme for bringing forward the retirement age for disability pensions (Me-CDPD, 2025g).

These interventions fall within the mandate of the Me-CDPD as the independent mechanism responsible for promoting, protecting and monitoring the implementation of the CRPD, focusing on the compatibility of the early retirement scheme for persons with disabilities with Articles 5, 19, 27 and 28 of the Convention.

As stated in Opinion No. 1/Me-CDPD/2020, although the Me-CDPD considers the measure of positively discriminating in favour of persons with disabilities regarding the age of access to retirement without penalties to be beneficial, in accordance with the provisions of the Convention, this access should not be limited or dependent on the degree or type of disability (Me-CDPD, 2020, pp. 6–7). The setting of rigid thresholds based exclusively on the degree of disability may constitute a disproportionate and potentially arbitrary distinction and should therefore be assessed in light of the principles of proportionality, substantive equality and the prohibition of indirect discrimination under Article 5 of the CRPD.

This issue was, in fact, analysed in Opinion No. 7/Me-CDPD/2025, as it concerned a draft law proposing to reduce the minimum degree of disability from 80% to 60% and the minimum age from 60 to 55 years. As argued in that opinion, although this reduction (a criterion of 60% or higher) is more in line with the objective of ensuring equal access to retirement, and is also a common criterion in public policies, it is important to recognise that a more inclusive criterion should be established, and that disability should not be limited to clinical diagnosis (Me-CDPD, 2025g, p. 15). An approach based exclusively on medical criteria disregards the interaction between impairment-related and environmental barriers that restrict full and effective participation in society, contrary to the human rights model underpinning the Convention.

For specific recommendations regarding the early retirement scheme, the Me-CDPD recommends reading Opinion No. 7/Me-CDPD/2025. The Me-CDPD reiterates the need for a coordinated and cross-sectoral approach to social protection and inclusion policies. Fragmentation between employment schemes, social protection measures and community-based support services undermines the systemic coherence required under Article 4(1) of the CRPD, which obliges States Parties to adopt all appropriate legislative, administrative and budgetary measures to ensure the full realisation of Convention rights.

As stated by the Me-CDPD elsewhere: **"The CRPD requires a holistic approach, from employment to social protection, from working life to retirement, duly coordinated between the competent authorities (Ministry of Labour, Solidarity and Social Security; Ministry of Health; Ministry of Education, Science and Innovation, with due support in the State Budget)."** (Me-CDPD, 2025g, p. 26).

This has implications not only for schemes such as those highlighted above, but also in other contexts, such as social support services (CACI, Independent Living Homes, etc.) which aim to promote the social inclusion of Persons with disabilities through community-based services. In this regard, **the Me-CDPD emphasises the need for these responses to align with the human rights paradigm, centred on people, as**

established by this Convention. Thus, there are recommendations that appear to cut across various measures and which the Me-CDPD reiterates, namely:

- **Coordination between social responses and legal frameworks:** Regulatory clarification is required regarding the compatibility of benefits and legal regimes in the field of social protection, particularly between the PSI and the scheme for early retirement due to disability. Such a framework must ensure that access to one right does not have adverse effects on another, preventing undue reductions in income or discontinuity of support. The absence of such systemic coherence may compromise the right to an adequate standard of living and social and economic conditions (Article 28 of the CRPD) and conflict with the principle of non-regression in matters of social rights;
- **Budgetary monitoring and safeguarding of public resources:** The effectiveness of social protection measures depends on adequate, stable budgetary allocations that are proportionate to the potential pool of beneficiaries. Adequate, stable and predictable funding is an essential condition for the effectiveness of social protection measures. Insufficient or unstable budgetary allocations may amount to structural discrimination by undermining the practical enjoyment of the right to an adequate standard of living and social protection under Article 28 of the CRPD. It is therefore essential to adopt mechanisms for budgetary planning, implementation and evaluation that ensure sustainability, predictability and effective coverage of needs, without shifting the burden onto families or compromising other essential benefits.
- **Technical capacity-building and specialised training for professionals involved:** The proper implementation of social protection schemes requires continuous training for social security officers, medical experts and medical boards, in accordance with Article 4(1)(i) of the CRPD. Such training should focus not only on procedural aspects but also on the human rights paradigm of disability, preventing evaluative biases and discriminatory practices. In the context of the Disability Assessment Service (SVI), particular attention should be paid to ensuring the timely and well-founded issuance of disability certification, avoiding the under-recognition of non-visible, fluctuating or psychosocial disabilities. (Me-CDPD, 2025g, pp. 29–30);
- **Guaranteeing accessibility and comprehensible information in administrative procedures:** The implementation of social protection schemes must fully comply with Article 9 of the CRPD, ensuring physical, communicational and digital accessibility at all stages of the application and management of benefits. This entails providing information in accessible formats (*e.g.* easy-to-read, Braille, LGP, plain language), digital platforms compliant with accessibility standards, as well as adequate human support tailored to the diversity of support needs. Procedural in accessibility constitutes a barrier to the exercise of rights and undermines equal access to social benefits.

In conclusion, the scheme for early retirement due to disability is a significant instrument of social protection, but its full compliance with the CRPD depends on overcoming a predominantly medical-certification approach and integrating it into a coherent framework of human rights-oriented public policies.

Access to retirement without penalties cannot be conceived in isolation or in a fragmented manner, but must be coordinated with employment schemes, social benefits and community-based responses, so as to ensure the continuity of rights, income stability and the promotion of autonomy. Social protection must operate as an enabling mechanism for dignity, autonomy and participation in community life, rather than as a merely residual or compensatory response.

The Me-CDPD therefore **reiterates that the implementation of Article 28 of the CRPD requires an integrated, accessible, financially sustainable and person-centred approach, supported by inclusive eligibility criteria, regulatory coherence and continuous monitoring of the real impact of adopted measures. The effectiveness of the Convention cannot be assessed solely by the formal existence of differentiated legal schemes, but by their capacity to deliver substantive equality throughout the life course, from participation in employment to social protection in later life, in full respect for dignity, autonomy and inclusion in the community.**

Analytical Summary

Article 28 of the CRPD recognises the right of Persons with disabilities to an adequate standard of living and social protection, without discrimination, and imposes positive obligations on States Parties to ensure the adequacy and sufficiency of benefits and support services, including support to cover disability-related costs, poverty reduction measures, social housing and retirement benefits. This provision must be interpreted in close conjunction with Articles 5 and 19 of the Convention, given that insufficient income and support may indirectly restrict autonomy, participation and inclusion in the community, increasing the risk of forced dependency and institutionalisation.

The Committee's Concluding Observations (2016) stressed that social protection systems must shield persons with disabilities from regressive impacts, particularly those arising from austerity measures, through safeguards, support services and adequate financial assistance capable of ensuring a decent standard of living, in line with SDG target 10.2. National data continue to show that persons with disabilities remain disproportionately exposed to poverty and social exclusion, demonstrating that compliance with Article 28 cannot be assessed solely by the formal existence of benefits, but by their actual capacity to guarantee dignified living conditions, taking into account the additional costs associated with disability, including technical aids, transport, personal assistance, housing adaptations and care-related expenses.

At domestic level, although Portugal has established a structured social protection system and benefits indexed to the Social Support Index (IAS), nominal indexation alone does not relieve the State of its obligation to periodically assess the real adequacy of benefit amounts in relation to the cost of living and the specific needs of persons with disabilities, based on evidence and disaggregated data, in accordance with Article 31 of the CRPD. Likewise, the implementation of the ENIPD pillar dedicated to social measures and support should be evaluated through outcome-based indicators, including reduction of poverty risk, accessibility, procedural simplification and impact on independent living.

The Social Inclusion Benefit (PSI) plays a central role in the Portuguese social protection system for persons with disabilities. However, its effectiveness depends on qualitative factors, including economic adequacy, regulatory stability and predictability, proportionate eligibility criteria, compatibility with the exercise of the right to work under Article 27, and the avoidance of penalising effects arising from restrictive means-testing and non-cumulation rules. The implementation of Article 28 further requires universal

accessibility throughout the administrative cycle, including information in accessible formats, accessible digital platforms, qualified human support, effective complaints mechanisms and decision-making support where necessary, in accordance with Article 12 of the CRPD, preventing bureaucratic barriers from becoming forms of indirect discrimination.

Finally, positive discrimination measures in the field of pensions, such as the early retirement scheme for persons with disabilities, constitute important social protection instruments. However, their compatibility with the CRPD depends on proportionate eligibility criteria and consistency with the rights to autonomy, participation and work, avoiding absolute restrictions that may conflict with Article 27 and with an inclusive active-ageing approach. In summary, the implementation of Article 28 requires integrated, accessible, financially adequate and results-oriented public policies, developed through close consultation with and the active involvement of persons with disabilities and their representative organisations, in accordance with Articles 4(3) and 33 of the CRPD, ensuring substantive equality throughout the life course.

Summary Table

Adequate Standard of Living and Social Protection

Ensuring equality, dignity and adequate living conditions
(Article 28 of the CRPD)

Right to an Adequate Standard of Living and Social Protection

Article 28 of the CRPD recognises the right of persons with disabilities to:

- An adequate standard of living.
- Social protection without discrimination.
- Access to support to offset disability-related extra costs, including support related to income, housing, transport, personal assistance, reasonable accommodation, social benefits and protection throughout the life cycle.

Current Situation

Portugal has established a structured social protection system, including:

- Social benefits (*e.g.* the Social Inclusion Benefit - PSI).
- Benefits indexed to the Social Support Index (IAS).
- Poverty reduction programmes.
- Formal recognition of social protection mechanisms.

Identified Issues

In Portugal, Persons with disabilities remain structurally more exposed to situations of vulnerability due to:

- Higher risk of poverty and social exclusion.
- Insufficient benefit levels, which fail to adequately compensate for the additional costs associated with disability (*e.g.* nominal updates linked to the IAS often do not reflect the real cost of living).
- Barriers in access to benefits, including administrative delays and difficulties in obtaining eligibility certification (*e.g.* the Disability Medical Certificate).

Identified Issues

- Limitations of the Social Inclusion Benefit (PSI): While central to the system, its effectiveness is constrained by rigid eligibility criteria and non-cumulation rules that may disincentivise employment;
- Administrative complexity: Barriers in access to information and procedures, including inaccessible digital platforms, which may amount to indirect discrimination;
- Gap between policies and their real-life impact on the living conditions of persons with disabilities.

Recommendations of the Me-CDPD

To ensure compliance with Article 28, the Me-CDPD recommends:

- Ensuring that benefit levels adequately reflect the real cost of living, taking into account diverse support needs and disability-related extra costs.
- Reducing administrative barriers and delays in access to social protection and support measures.
- Ensuring compatibility between social protection and employment, in alignment with Article 27 of the CRPD.
- Systematically incorporating disability-related extra costs into public policies and social protection schemes.
- Strengthening universal accessibility (*e.g.* Portuguese Sign Language, Braille and easy-to-read formats) as a structural principle of public administration, particularly in administrative procedures and access to social benefits.
- Ensuring that early retirement schemes are proportionate and do not unduly restrict autonomy, work or social participation.
- Developing impact-based monitoring systems, including indicators relating to poverty reduction among persons with disabilities and their households.

Activities of the Me-CDPD

The Me-CDPD has monitored public policies on social protection, analysed the implementation of the Social Inclusion Benefit (PSI), and identified barriers in access to social benefits.

It emphasises that social protection must be assessed by its capacity to ensure a dignified, stable and predictable standard of living for all persons with disabilities, regardless of their support needs.

Article 29
Participation in political and public life

States Parties shall guarantee to Persons with disabilities political rights and the opportunity to enjoy them on an equal basis with others, and shall undertake to:

a) Ensure that persons with disabilities can effectively and fully participate in political and public life on an equal basis with others, directly or through freely chosen representatives, including the right and opportunity for persons with disabilities to vote and be elected, inter alia, by:

i) Ensuring that voting procedures, facilities and materials are appropriate, accessible and easy to understand and use;

ii) Protecting the right of persons with disabilities to vote by secret ballot in elections and public referendums without intimidation, and to stand for elections, to effectively hold office and perform all public functions at all levels of government, facilitating the use of assistive and new technologies where appropriate;

iii) Guaranteeing the free expression of the will of persons with disabilities as electors and to this end, where necessary, at their request, allowing assistance in voting by a person of their own choice;

b) Promote actively an environment in which persons with disabilities can effectively and fully participate in the conduct of public affairs, without discrimination and on an equal basis with others, and encourage their participation in public affairs, including:

i) Participation in non-governmental organizations and associations concerned with the public and political life of the country, and in the activities and administration of political parties;

ii) Forming and joining organizations of persons with disabilities to represent persons with disabilities at international, national, regional and local levels.

Article 29
Participation in political and public life

General Framework

The right to participate in political and public life consists of the obligation of States Parties to guarantee Persons with disabilities political rights on an equal basis, namely:

- The right to vote and to stand for election;
- The duty to ensure accessible electoral procedures;
- The duty to ensure accessible polling stations and materials;
- Ensuring the right to form and join political parties and organisations;
- Protecting the right to vote freely, in secret and without intimidation, namely:
  - Enabling the use of new technologies where appropriate;
  - Allowing a person with a disability to be assisted by a person of their own choosing when voting;
- Promoting the active participation of organisations representing persons with disabilities in matters relating to political and public life (Article 4(3) of the CRPD) (Me-CDPD, 2025k, p. 2).

Article 29 of the CRPD establishes obligations requiring immediate effect, requiring States Parties to eliminate legal or practical restrictions that limit the exercise of political rights on the basis of disability. These obligations are of immediate effect, not subject to progressive realisation, the fulfilment of which requires not only the prohibition of formal discrimination, but the adoption of positive measures to ensure substantive equality in access to and the exercise of the right to vote.

The right established in this article is a corollary of the core principle of "full and effective participation and inclusion in society", set out in Article 3(c) of the CRPD. In this regard, the Committee, in General Comment No. 7, highlighted the "extreme importance" of the participation of Persons with disabilities in political and public life, as a right that ensures equal opportunities, full participation and effective inclusion of persons with disabilities in society; emphasising as an essential component the right to vote and to be elected (General Comment No. 7 (2018) on the participation of Persons with disabilities, including children with disabilities, through their representative organisations, in the implementation and monitoring of the Convention, 2018, para. 88).

This article is fundamentally linked to the provisions of Article 9, concerning accessibility, and Article 21, which enshrines the right to freedom of expression and access to information, which naturally includes information of a political and electoral nature. In particular, as previously emphasised by the Me-CDPD, the "combination of these two articles implies that the exercise of the right to vote cannot be merely formally guaranteed, but must be materially accessible", that is to say, ensuring voter autonomy, secrecy of the ballot and freedom from intimidation inevitably requires ensuring that, in practical terms, physical, cognitive, digital, attitudinal and informational accessibility is guaranteed for Persons with disabilities (Me-CDPD, 2025k, p. 3).

Furthermore, it is also important to consider its relationship with Article 12 of the CRPD, which provides for equal recognition before the law. As emphasised by the Committee itself in General Comment No. 1 (2014), the recognition of legal capacity is "intrinsically linked" to the exercise of other human rights, including the right to vote and to be elected (General Comment No. 1 (2014), Equal recognition before the law, 2014, para. 31). According to the Committee, States have an obligation to protect and promote the right of Persons with disabilities to "access support of their choice in the exercise of the secret ballot, as well as to participate, without discrimination, in all elections and referendums" (General Comment No. 1 (2014), Equal recognition before the law, 2014, para. 49). The Committee has reiterated that any restriction on the right to vote based on disability, including judicial decisions limiting legal capacity, constitutes direct discrimination contrary to the Convention. The automatic or blanket deprivation of the right to vote on the basis of a diagnosis, support status or medical assessment is incompatible with Articles 12 and 29 of the CRPD.

The right of all persons to participate in political and public life is enshrined in Article 21 of the UDHR. This was the first international instrument to recognise the right to political participation as a human right, in 1948 (Waterstone, 2011, p. 373).

However, the main binding human rights instrument to establish this very right for all persons, including naturally Persons with disabilities, was the ICCPR (Waterstone, 2011, pp. 373–374). Article 25 of the ICCPR establishes that every citizen has the right and the opportunity, without discrimination or undue restrictions:

> "a) To take part in the conduct of public affairs, directly or through freely chosen representatives;
>
> b) To vote and to be elected at periodic, genuine elections which shall be by universal and equal suffrage and shall be held by secret ballot, guaranteeing the free expression of the will of the electors;
>
> c) To have access, on general terms of equality, to public service in their country."

This right is also enshrined in Article 7 of CEDAW, obliging States to take all appropriate measures to eliminate discrimination against women in the political and public life of the country.

At regional level, the CFR contains several articles that reflect different aspects of Article 29 of the CRPD, such as Article 12 (Freedom of assembly and association), Article 39 (Right to vote and stand for election in elections to the European Parliament) and Article 40 (Right to vote and stand for election in municipal elections). These articles require Portugal not only to guarantee political rights to all persons, but also to adopt specific measures to remove physical, communicational and legal barriers that exclude Persons with disabilities from the full exercise of their right to full political participation (Me-CDPD, 2025k, p. 4).

In 2018, in the run-up to the 2019 European Parliament elections, the European Commission issued Recommendation (EU) 2018/234 of 14 February, in which it recommended that the competent national authorities meet in spring 2018, with the support of the Commission, in order to "exchange best practices and measures to (...) promote the exercise of electoral rights by under-represented groups, including Persons with disabilities" (Commission Recommendation (EU) 2018/234 of 14 February 2018 on strengthening the European character of the 2019 European Parliament elections and the effectiveness of the electoral process, 2018, para. 5). Furthermore, in the Action Plan for European Democracy, the electoral Rights of Persons with Disabilities are listed as one of the Commission's priorities; in particular, the plan includes the development of "a compendium of e-voting practices, in conjunction with the Member States and in close cooperation with the Council of Europe" (Action Plan for European Democracy, 2020, p. 9). Similarly, in the European Disability Rights Strategy 2021–2030, one of the targets under the objective 'enjoying EU rights' concerns 'promoting the participation in the democratic process' (3.2.) (Equality Union: Strategy on the Rights of Persons with Disabilities 2021–2030, 2021, pp. 7–8).

At the constitutional level, several articles can also be cited that correspond to the provisions of this article, namely: Article 48, which guarantees the right of all citizens to "take part in political life and in the conduct of the country's public affairs, either directly or through freely elected representatives" (Article 48(1) of the CRP); Article 49, which establishes that all citizens over the age of eighteen have the right to vote, and that the exercise of this right is personal and constitutes a civic duty; Article 50 (right of access to public office), and also Articles 46 and 51, which establish freedom of association, comprising the right to form and participate in associations and political parties. It is also important to consider the provisions of Article 10 of the CRP, which states that "the people exercise political power through universal, equal, direct, secret and periodic suffrage, referendums and other forms provided for in the Constitution" (our emphasis). However, **as the Me-CDPD has previously noted (2025k,**

paras. 7–8), legislative solutions for persons with disabilities in Portugal continue to rely predominantly on the solution of assisted voting.

With regard to the right to vote, the following legislation should be considered:

- **Election of the President of the Republic:** Decree-Law No. 319-A/76 of 3 May, regulating the election of the President of the Republic (in particular, Articles 74 and 138)
- **Election to the Assembly of the Republic:** Law No. 14/79 of 16 May, which enacts the Electoral Law for the Assembly of the Republic (in particular, Articles 97 and 150);
- **Election to the Legislative Assembly of the Autonomous Region of the Azores:** Decree-Law No 267/80 of 8 August, approving the Electoral Law for the Regional Assembly of the Azores (in particular, Articles 99 and 147);
- **Election to the Legislative Assembly of the Autonomous Region of Madeira:** Organic Law No. 1/2006 of 13 February, which approves the Electoral Law for the Legislative Assembly of the Autonomous Region of Madeira (in particular, Articles 88 and 151);
- **Elections to Local Authorities:** Organic Law No. 1/2001 of 14 August, regulating the election of members of local authorities (in particular, Articles 116, 190 and 201);
- **Elections to the European Parliament:** Law No. 14/87 of 29 April, approving the Electoral Law for the European Parliament (in particular, Article 1).

The laws governing elections for the **President of the Republic, the Assembly of the Republic, the Legislative Assembly of the Autonomous Region of the Azores, the Legislative Assembly of the Autonomous Region of Madeira,** and, on a supplementary basis, elections to the **European Parliament,** stipulate that:

"A voter affected by a known illness or physical disability, whom the polling station committee verifies as being unable to perform the acts described" in the articles setting out how each voter is to cast their vote, shall vote "accompanied by another voter of their choice, who shall guarantee the accuracy of their vote and who is bound to absolute secrecy." However, the same articles provide that if the polling station "decides that the illness or physical disability is not evident", it may require the voter to present, at the time of voting, a medical certificate attesting to the impossibility of voting, issued by "a doctor exercising public health authority within the municipality and authenticated with the seal of the relevant service". For this reason, the law stipulates that health centres must be open on election day and throughout the entire period during which polling stations are in operation (para. 3). Any member or delegate of a political party may lodge a protest

against the decision of the polling station committee (para. 4).

The requirement for a medical certificate at the time of voting may constitute a disproportionate and potentially discriminatory burden, particularly when it restricts the immediate exercise of the fundamental right to vote. In light of Article 29 of the CRPD, any additional requirements applicable only to Persons with disabilities must be strictly necessary, proportionate and must not constitute a substantial obstacle to the exercise of the right to vote.

With the exception of the Law governing elections to the Legislative Assembly of the Autonomous Region of the Azores, para. 5 of all the articles mentioned above stipulates that "voters with visual impairments may, if they so wish, request that the polling station provide a Braille ballot paper enabling them to vote independently" (Law No.267/80 of 8 August, consolidated version, 2022, Article 99; Decree-Law No.319-A/76, of 3 May, consolidated version, 2021, Article 74; Law No.14/79, of 16 May, consolidated version, 2020, Article 97; Law No.14/87, of 29 April, consolidated version, 2022, Article 1; Organic Law No.1/2006, of 13 February, consolidated version, 2025, Article 88).

In accordance with these same statutes, "any person who accompanies a blind or disabled person to vote and, with intent, misrepresents their will shall be" punished with imprisonment or a fine (the length of the sentence and the amounts depending on the election in question) (Law No.267/80 of 8 August, consolidated version 2022, Article 147; Decree-Law No.319-A/76, of 3 May, consolidated version, 2021, Article 138; Law No.14/79, of 16 May, consolidated version, 2020, Article 150; Law No.14/87, of 29 April, consolidated version, 2022, Article 1; Organic Law No.1/2006, of 13 February, consolidated version, 2025, Article 151).

Thus, the rule is that voting shall be direct, individual and unassisted, and it is up to each citizen with a disability, and only them, to express the wish to vote with assistance. Similarly, it is up to blind voters themselves to request that the polling station provide a Braille ballot paper (Me-CDPD, 2019b, p. 6).

Although assisted voting is a measure designed to ensure the exercise of the right to vote, its central role in the Portuguese model raises questions in light of the CRPD. The predominant reliance on assisted voting may compromise the secrecy of the ballot and the autonomy of the voter. Under Article 29 of the CRPD, assisted voting should remain strictly exceptional and subsidiary to measures that enable independent voting, including accessible technologies, accessible information and universal adaptations of the electoral process.

The law governing **local authority** elections stipulates that "a voter affected by a known illness or physical disability whom the polling station verifies is unable to perform the

acts described in the preceding article shall vote accompanied by another voter of their choice, who shall guarantee the accuracy of their vote and who is bound to absolute secrecy." Para. 2 of that article establishes, as in other elections, that "if the polling station determines that the illness or physical disability is not evident, it shall require the presentation, at the time of voting, of a medical certificate attesting to the impossibility of performing the acts referred to in the preceding para., issued by a doctor exercising public health authority within the municipality and authenticated with the seal of the relevant service." (Organic Law No.1/2001 of 14 August, consolidated version, 2021, Article 116). This law also stipulates that the "unfaithful polling officer", defined as one who fails to ensure "the faithful expression or secrecy of the vote, shall be punished with imprisonment for up to one year or a fine of up to 120 days." (Organic Law No. 1/2001, of 14 August, consolidated version, 2021, Article 190.). It remains impossible to vote using a Braille ballot paper in local elections.

The lack of independent voting mechanisms, such as Braille voting cards, in certain elections undermines the principle of equality in the exercise of political rights. The guarantee of electoral accessibility must not vary according to the type of election, lest a differentiated system of citizenship be established that is incompatible with Article 29 of the CRPD.

In 2025, the Assembly of the Republic, through Resolution No. 97/2025 of 25 March, recommended that the Government implement accessible voting for people with cerebral palsy, in particular: i) the conduct of a detailed study on the feasibility and benefits of the accessible voting system developed by the Federation of Portuguese Cerebral Palsy Associations (including an analysis of the impact of this solution in electoral contexts); and ii) the implementation of a pilot programme to test the application of this system, in order to assess the experience and satisfaction of voters and polling station staff; (Resolution of the Assembly of the Republic No. 97/2025, of 25 March 2025, para.s 1 and 2).

Later that year, a draft resolution was tabled by the PS Parliamentary Group aimed at strengthening the right to accessible voting (Draft Resolution No. 393/XVII/1 (PS), Promotion of Accessible and Universal Voting for All Persons, 2025).

It is important to emphasise that parliamentary resolutions and draft recommendations, whilst politically relevant, do not replace the binding legal obligation to ensure full electoral accessibility. Compliance with Article 29 of the CRPD does not depend on one-off initiatives, but on a structural and systemic approach to electoral accessibility capable of ensuring universal and permanent solutions.

Respect for the right to political participation requires not only formal equality before the law, but also substantive equality of opportunity. Electoral processes must therefore be administered in a manner that ensures the equal and effective participation

of persons with disabilities, in accordance with Articles 9, 12 and 29 of the CRPD (Waterstone, 2011, pp. 376–377).

Although legislative and operational progress has been recognised in recent years, structural, procedural and attitudinal barriers remain that disproportionately affect persons with intellectual, psychosocial and multiple disabilities. (Me-CDPD, 2025b, p. 2). The persistence of assistance-based solutions, centred on accompanied voting, demonstrates that the transition to a fully inclusive model has not yet been consolidated.

A systematic review of the electoral framework is therefore required in line with the CRPD model of inclusive and equal citizenship, ensuring that no person with a disability is faced with additional obstacles, disproportionate burdens or unnecessary dependence on third parties to exercise a right that constitutes a fundamental expression of democratic citizenship.

Observations, recommendations and developments

In its concluding observations to the Portuguese State (2016), the Committee expressed "serious concern" that there are Persons with disabilities, in particular those deprived of their legal capacity or institutionalised, who are deprived of their right to vote or prevented from exercising that right. It also expressed concern that electoral processes (political campaigns, political programmes, etc.) were not accessible, as well as the fact that it is legally possible for polling station chairpersons, upon recognising a "manifest mental incapacity", to require a medical attesting to a person's capacity to vote on the basis of disability (Committee on the Rights of Persons with Disabilities, 2016, paras. 55). This concern is directly linked to Article 12 of the CRPD, insofar as the requirement for medical proof of the capacity to vote may constitute a presumption of incapacity based on disability, which is incompatible with equal recognition before the law.

Accordingly, the Committee recommended that, in cooperation with organisations representing Persons with disabilities, Portugal adopt the necessary measures to enable all persons with all types of disability (regardless of whether they are accompanied or institutionalised) to exercise their right to vote and to stand for election on an equal footing with others, by providing accessible communication formats, facilities and electoral infrastructure (Committee on the Rights of Persons with Disabilities, 2016, para. 56). These recommendations impose positive obligations on the State to adopt legislative, administrative and technical measures that guarantee the full accessibility of the electoral process, and not merely the removal of specific barriers.

With regard to Article 9 (accessibility), measures in the ENIPD 2021–2025 were identified that also give effect to the right of Persons with disabilities to participate in political and public life, namely:

- Measure “EE1 – 1.2.5. Implement accessible voting”;
- Measure “EE1 – 1.2.6. Promote awareness-raising initiatives among political parties to disseminate political propaganda in an accessible format”; and
- Measure “EE1 – 1.2.7. Ensure that election campaigns and events broadcast by media organisations with a public service obligation are in an accessible format” (ENIPD 2021–2025, 2021, p. 21).

With regard to the implementation of these measures, according to data provided by IDiPD, I. P. (formerly known as INR, I.P.) in its report on the implementation of ENIPD 2021–2025 activities, as of 31 December 2024, measure EE1 – 1.2.5. to implement accessible voting was 75% implemented with regard to the indicator “expansion of electoral processes with Braille voting”. As the basis for this percentage, IDiPD, I.P. explains: “Currently, Braille voting is available in the following electoral processes: Legislative Elections, Presidential Elections and European Parliamentary Elections. Local elections are excluded; for this reason, the percentage presented above is considered.” (INR, I.P., 2025a, p. 23). The exclusion of local elections from the Braille voting scheme highlights an asymmetry in the exercise of the right to vote that may undermine the principle of the principle of equal and universal suffrage. Regarding the second indicator, "first election with accessible voting", as of 31 December 2024, the measure was listed as not implemented, but could be incorporated into the new strategy (INR, I.P., 2025a, p. 24). The failure to implement this measure reveals the persistence of a gap between strategic planning and effective implementation, with direct implications for the equal exercise of political rights.

Measure EE1 – 1.2.6., up to 31 December 2024, was considered 77% implemented, with actions planned for the 2025 local elections; and measure EE1 – 1.2.7., also by the indicated date, was considered 100% implemented through the provision of sign language interpretation in all debates during the pre-campaign and campaign periods, since the 2021 presidential elections (INR, I.P., 2025a, pp. 25–27). Notwithstanding these advances, it is important to ensure that communication accessibility also encompasses easy-to-read and plain-language formats, guaranteeing the informed participation of persons with intellectual or psychosocial disabilities.

The evaluation of the implementation of these measures must be accompanied by qualitative indicators capable of assessing of the actual impact on autonomy, the secrecy of the vote and the effective political participation of Persons with disabilities, in accordance with Articles 29 and 31 of the CRPD.

Action by the Me-CDPD

Over the years, the Me-CDPD has played an active role in issuing recommendations and contributions on the participation of Persons with disabilities in political and public life, and in particular on the right to accessible voting. Accordingly, the following documents have been drawn up on this subject:

- Recommendation No. 1/Me-CDPD/2019, of 16 May 2019, on the 2019 European Parliament elections;
- Contribution No. 1/Me-CDPD/2024, of 13 December 2024, to the Permanent Observatory on Justice, of the Centre for Social Studies at the University of Coimbra, as part of the FRA's annual Fundamental Rights Report 2025, covering the year 2024, dedicated to political participation and equality in electoral processes, focusing on issues such as diversity and inclusion, violence and intimidation, and disinformation (including online);
- Recommendation No. 3/Me-CDPD/2025, of 30 July 2025, on the Rights of Persons with Disabilities regarding the right to accessible voting in all electoral processes in Portugal;
- Contribution No. 3/Me-CDPD/2025, of 31 October 2025, on the equal participation of Persons with disabilities in political life.

These instruments fall within the remit of the Me-CDPD as an independent mechanism for the promotion, protection and monitoring of the Convention, pursuant to Article 33 (2) of the CRPD, demonstrating continuous and systematic action in this area.

Recently, also within the scope of its powers and responsibilities, **the Me-CDPD has begun collaborating with the IDiPD, I.P. and the National Electoral Commission on the production of guides and information leaflets on the Rights of Persons with Disabilities in the various electoral processes.** Furthermore, since January 2026 and at the invitation of the IDiPD, I.P., the Me-CDPD has joined the Working Group for Accessible Elections, comprising various organisations representing persons with disabilities[26], in coordination with the IDiPD, I.P., the National Electoral Commission and the General Secretariat of the Ministry of Internal Administration. The existence and establishment of this Working Group gives practical effect to the principle of close consultation and active participation of organisations representing Persons with disabilities in the formulation and implementation of public policies, as provided for in Article 4(3) of the CRPD. The most recent outcome of these collaborations was the publication of an Easy-to-Read Guide entitled "Guidelines for voting by Persons with disabilities" for the 2026 Presidential Election (National Electoral Commission, 2026), as well as the drafting and subsequent publication on the National Electoral Commission's website of easy-to-read electoral guides (National Electoral Commission et al., 2026a) and, in particular, on the 2026 Presidential Election (National Electoral Commission et al., 2026b).

With regard to the right to vote, the Me-CDPD has, over the years, highlighted certain issues, particularly in the area of accessibility, the persistence of physical and architectural barriers, as well as attitudinal and procedural barriers. In this regard, investment in the capacity-building and training of all those involved in the electoral process is essential (Me-CDPD, 2025k, pp. 8–9). Furthermore, the need to review

[26] Including FENACERCI, the Portuguese Association of the Blind and Visually Impaired ("ACAPO"), FPAS, the Portuguese Federation for Intellectual Disability, the Portuguese Association of Persons with Disabilities ("APD"), and the Federation of Portuguese Cerebral Palsy Associations ("FAPPC").

the electoral system must ensure full autonomy and accessibility in the exercise of the right to vote for all voters; in other words, the option of assisted voting should be understood as a resource and not as the default or sole solution imposed on persons with disabilities (Me-CDPD, 2025k, p. 6). For example, the possibility for voters with visual impairments to request the provision of a Braille voting card (approved by Organic Law No. 3/2018 of 17 August), although it represents a significant step forward in terms of autonomy in voting, does not cover all electoral acts, nor all persons with visual impairments, since not all voters with visual impairments are proficient in reading this format; (Me-CDPD, 2025k, p. 7). This finding demonstrates that segmented solutions or those aimed exclusively at specific profiles of support needs do not, in themselves, ensure the equal and universal exercise of the right to vote, necessitating the adoption of solutions based on the principle of universal design, as defined in Article 2 of the CRPD.

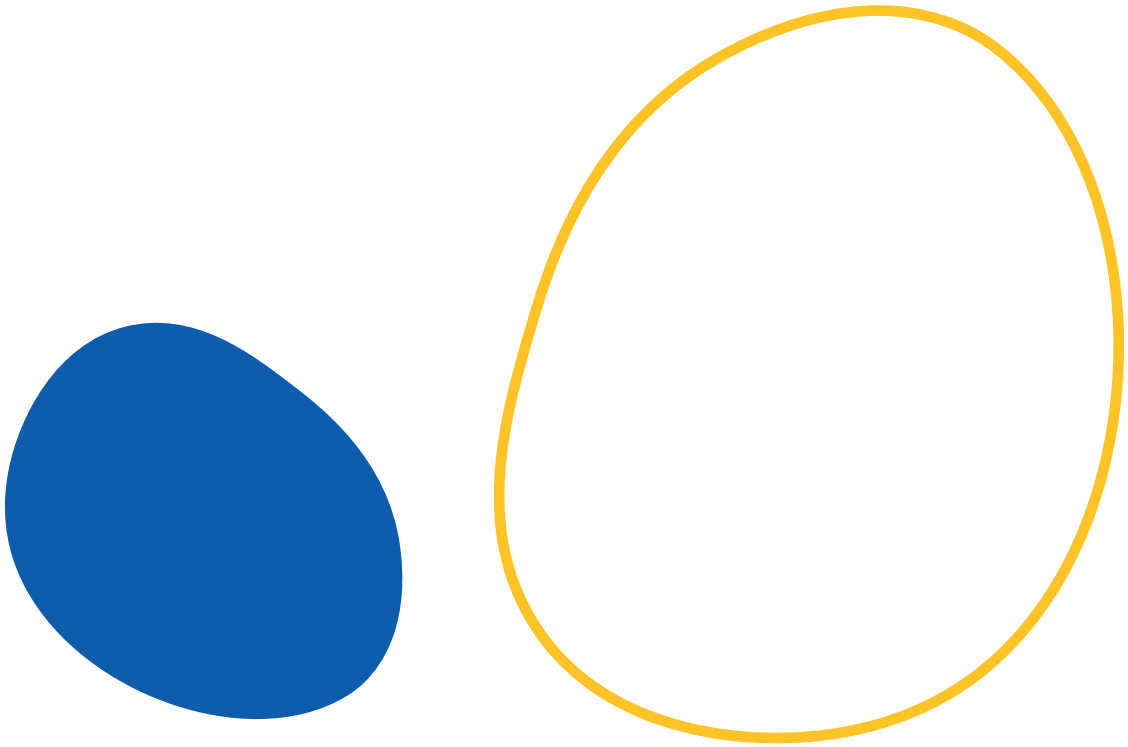
In short, **the Portuguese State must implement an accessible and universal voting system in all electoral processes, guaranteeing all persons the right to cast an autonomous, secret and independent vote.** This requirement stems directly from Article 29 of the CRPD and constitutes a binding legal obligation to ensure equal conditions in the exercise of political rights. **In this regard, the Me-CDPD, in addition to a careful reading of the Recommendations and Contributions mentioned above, recommends:**

- Promoting the necessary legal amendments to the various electoral laws, enshrining the possibility of autonomous voting through a voting process accessible to all voters, regardless of their support needs.This solution should be based on the principle of universal design, so that it can be used by any voter (Me-CDPD, 2025k, p. 10);
- Ensuring the solution adopted is rolled out nationwide; (Me-CDPD, 2025k, p. 11);
- Adopting mandatory standards for physical, communicational, cognitive and digital accessibility at all stages of the electoral process (Me-CDPD, 2025b, p. 8);
- Public awareness campaigns and training for political actors and the media on the rights and capabilities of persons with disabilities, in accordance with the human rights model advocated by the CRPD (Me-CDPD, 2025b, p. 8);
- Training for all those involved in the electoral process and the provision of accessible information for everyone, regardless of their support needs (Me-CDPD, 2025k, pp. 11–12);
- Adoption of an accessible voting process that is properly monitored in an independent and participatory manner (Me-CDPD, 2025k, pp. 13–14), using public indicators and independent evaluation, in conjunction with the duty to collect data set out in Article 31 and the monitoring framework established in Article 33 of the CRPD;

- Systematic collection of disaggregated data on political representation, whilst respecting privacy and voluntariness (Me-CDPD, 2025b, p. 8), ensuring that the collection complies with the principle of informed consent and personal data protection standards, in accordance with the General Data Protection Regulation;
- Creation of accessible political training and mentoring programmes aimed at candidates with disabilities (who express an interest in attending) (Me-CDPD, 2025b, p. 8);
- Financial and technical support for accessible campaigns aimed at promoting the participation of Persons with disabilities in political parties and representative bodies (Me-CDPD, 2025b, p. 8);
- Active involvement of organisations representing Persons with disabilities in the design and monitoring of public policies (Article 4(3) CRPD). (Me-CDPD, 2025b, p. 9).

The measures listed above must be understood in an integrated and coherent manner, avoiding fragmented or merely symbolic solutions that do not ensure the full and effective political participation of Persons with disabilities. The realisation of the right to participation in political and public life constitutes a key indicator of the democratic quality of the rule of law and requires a systematic, sustained approach aligned with the human rights model enshrined in the CRPD.

The Me-CDPD thus **reaffirms that the removal of legal, physical, communicational and attitudinal barriers in the electoral process is a requirement of substantive equality and the universality of political rights, obliging the Portuguese State to adopt appropriate legislative, administrative and budgetary measures to ensure that no person is excluded from voting and civic participation on the basis of disability.**



Summary Analytical

Article 29 of the CRPD imposes an immediate obligation on States Parties to ensure that persons with disabilities exercise their political rights on an equal basis — including the rights to vote and be elected, to participate in the conduct of public affairs, and to join or form organisations and political parties — by eliminating legal and practical restrictions based on disability and adopting positive measures to ensure substantive equality in the exercise of universal suffrage. The realisation of this right depends on a fully accessible electoral process (e.g. procedures, facilities, materials and communication) and on effective guarantees of a secret, free and intimidation-free vote, including access to assistive technologies and, only when necessary and upon request, assistance from a freely chosen person.

This article is structurally linked to Article 9 and Article 21, as the right to vote cannot be merely formal; it requires practical conditions that preserve autonomy, secrecy and independence. It is also linked to Article 12, insofar as any restriction on voting based on disability, support status, institutionalisation or medical assessments constitutes direct discrimination incompatible with the Convention. In this context, models that rely predominantly on assisted voting must be strictly subsidiary and cannot function as the default solution, lest they compromise the secrecy of the vote and reinforce undue dependency.

According to the Committee's Concluding Observations (2016), particularly serious risks persist where national legislation permits the exclusion of persons with disabilities from the electoral roll (especially those living in institutional settings or affected by decisions regarding legal capacity) and where the exercise of the right to vote is subject to requirements such as the presentation of a medical certificate at the time of voting, a potentially disproportionate and discriminatory burden. Similarly, accessibility must not vary depending on the electoral process; thus, disparities such as the absence of independent voting solutions (e.g. Braille voting cards) in certain elections — notably local elections — reflect a model of unequal political citizenship that is inconsistent with Article 29.

Finally, strategic and operational measures (such as those provided for in the ENIPD and initiatives involving accessible guides and good practices) are relevant, but full compliance with the CRPD requires a structural overhaul of the electoral model to ensure, in all elections and throughout the country, a universally accessible voting system based on universal design, with training for electoral officials, information in multiple accessible formats (including easy-to-read and plain language), and independent and participatory monitoring, accompanied by adequate data collection (Articles 31 and 33) and the effective participation of representative organisations (Article 4(3)). In summary, Article 29 measures democratic quality by the State's ability to ensure that no person is excluded — either de facto or through structural, procedural or attitudinal barriers — from the full exercise of political citizenship on the basis of disability.

Summary Table

Participation in Political and Public Life

Participation and democratic legitimacy (Article 29 of the CRPD)

Right to Political Participation on an Equal Basis

Article 29 of the CRPD guarantees Persons with disabilities the right to:

- Vote and stand for election.
- Participate in public and political life.

Engage in political decision-making processes, through both active participation (standing for election) and passive participation (voting).

Political participation constitutes a binding obligation on the State and requires:

- Substantive equality: It is not sufficient to formally recognise the right to vote; the entire electoral process must be fully accessible (*e.g.* polling stations, ballots, information and communication).
- Autonomy and secrecy of the vote: Voting must be free, autonomous and secret.
- Assistance by another person should remain exceptional (and only at the request of the voter), not the default solution.
- Equal recognition before the law (Article 12): No disability, support status or support measure may serve as a basis for restricting the right to vote or to stand for election.

Current Situation

Portugal formally recognises these rights, including through:

- Universal suffrage.
- Electoral accessibility measures.
- Institutional initiatives aimed at supporting political participation.
- An established legal and institutional framework.

Identified Issues

Portugal continues to present structural shortcomings in the implementation of Article 29:

- Barriers to voting: Including inaccessible polling stations and the lack of information in accessible formats.
- Fragmented accessibility solutions: For example, the use of Braille voting templates in certain elections, but not consistently across all electoral processes (*e.g.* local elections).

Identified Issues

- Limitations on autonomy in the voting process: Including reliance on assisted voting and requirements such as the presentation of medical certification at the time of voting, which may impose a disproportionate burden on voters with disabilities.
- Limited political participation: Underrepresentation of persons with disabilities in elected office and barriers to active political participation.
- Persistent legal, procedural and administrative barriers: Persons in institutional settings face increased risks of exclusion, dependency or undue influence due to insufficient accessibility and safeguards.
- Gap between formal rights and effective exercise: While political rights are formally recognised, they are not consistently guaranteed in practice.

To ensure compliance with Article 29, the Portuguese electoral system requires a structural review aimed at:

- Ensuring universal accessibility across all electoral processes.
- Guaranteeing autonomous, secret and informed voting.
- Providing electoral information in multiple accessible formats.
- Removing legal, procedural and administrative barriers.
- Ensuring mandatory training for electoral officials, including polling station staff, to provide appropriate support without interfering with the voter's will and preferences;.

Recommendations of the Me-CDPD

- Promoting the active participation of Persons with disabilities, including the right to stand for election;
- Ensuring the inclusion and effective participation of persons with disabilities in political decision-making processes;
- Establishing participatory monitoring mechanisms, including the collection of disaggregated data on effective participation and accessibility audits involving persons with disabilities and their representative organisations.

Political participation of Persons with disabilities is a condition of democratic legitimacy.

In this area, the Me-CDPD has:

- Developed joint work with the National Electoral Commission;
- Contributed to the development of guidelines on accessible and universal voting;

Activities of the Me-CDPD

- Promoted recommendations on the political participation of Persons with disabilities;
- Advocated for a human rights-based approach to electoral accessibility and political participation.

A democracy is fully inclusive only when all persons are able to participate on an equal basis.

Article 33
National implementation and monitoring

1. States Parties, in accordance with their system of organization, shall designate one or more focal points within government for matters relating to the implementation of the present Convention, and shall give due consideration to the establishment or designation of a coordination mechanism within government to facilitate related action in different sectors and at different levels.

2. States Parties shall, in accordance with their legal and administrative systems, maintain, strengthen, designate or establish within the State party, a framework, including one or more independent mechanisms, as appropriate, to promote, protect and monitor implementation of the present Convention. When designating or establishing such a mechanism, States Parties shall take into account the principles relating to the status and functioning of national institutions for protection and promotion of human rights.

3. Civil society, in particular persons with disabilities and their representative organizations, shall be involved and participate fully in the monitoring process.

Article 33
National implementation and monitoring

General Framework

This article deals with the monitoring of the CRPD, regulating different aspects in its three para.s. Para. 1 focuses on the focal points that must exist within the Government for matters relating to the implementation of the CRPD. This requirement is not to be confused with the provisions of para. 2, which provides for independent mechanisms for monitoring the CRPD, such as the Me-CDPD. This distinction is fundamental to avoiding confusion between implementation functions (the responsibility of the executive branch) and independent monitoring functions, which require institutional autonomy, pluralism and the capacity for public scrutiny, lest the credibility of the Convention's monitoring system be compromised. Thus, whilst focal points are "governmental bodies established to oversee or carry out implementation tasks, in accordance with the general obligations of States Parties set out in Article 4(1) of the CRPD", monitoring mechanisms are independent bodies that must ensure pluralism and the participation of persons with disabilities and their representative organisations (United Nations, 2023, pp. 6–7).

Para. 3 refers to the role of all civil society organisations, including organisations of persons with disabilities, in monitoring the CRPD. In this regard, the Committee clarifies in its General Comment No. 7 (2018) that States must consult and actively involve organisations of persons with disabilities in addressing issues relating to persons with disabilities, including by developing mechanisms that actively involve these organisations and persons with disabilities in the work they carry out in relation to the rights enshrined in the CRPD (Article 4(3) and Article 33(3) of the CRPD) (General Comment No. 7 (2018) on the participation of persons with disabilities, including children with disabilities, through their representative organizations, in the implementation and monitoring of the Convention, 2018, p. 4).

Particular attention should be given to paragraph 2 of this article, as the UN itself explains in a fact sheet dedicated to national institutions for the promotion and protection of human rights: beyond the importance of ratifying human rights instruments, which oblige States to incorporate provisions into their domestic law, it is becoming "increasingly clear that the effective enjoyment of human rights depends on the establishment of national infrastructures that guarantee their protection and promotion" (United Nations, 2001, p. 3).

Over the years, various United Nations activities have been developed in the field of national institutions (United Nations, 1995). In 1990, the Commission on Human Rights called for the convening of an International Workshop on National Institutions for the Promotion and Protection of Human Rights, with a view to examining "the modalities of cooperation between national institutions and international organisations, such as the United Nations and its agencies, as well as exploring ways of enhancing the effectiveness of national institutions" (United Nations, 1995, p. 6). This workshop took place in Paris from 7 to 9 October 1991 and its conclusions were adopted, first by the Commission on Human Rights in Resolution 1992/54 as the Principles relating to the status of national institutions ("Paris Principles") and, subsequently, by the United Nations General Assembly in Resolution No. 48/134 (United Nations, 1995; Principles relating to the Status of National Human Rights Institutions (Paris Principles), 1993). After 1991, the United Nations' work on nationalinstitutions "intensified considerably", with the Paris Principles representing a fundamental step in this evolving process (United Nations, 1995, pp. 7, 9). The Paris Principles thus establish the minimum international standards for the establishment and operation of mechanisms designed to promote, protect and monitor human rights effectively and credibly at the national (United Nations, 2023, p. 2). The Paris Principles have acquired legally binding recognition in the Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatmentor Punishment and in the CRPD (United Nations, 2023, p. 2). Under Article 33(2) of the CRPD, States Parties shall establish or designate independent mechanisms to promote, protect and monitor the implementation of the Convention, taking into account the Paris Principles relating to the status of national human rights institutions. Accordingly, these national mechanisms must:

- "Be independent of the Government, and that independence be guaranteed by law or constitutional provisions;
- Be pluralistic in their functions and membership;
- Have as broad a mandate as possible, capable, within the context of the Convention, of collectively promoting, protecting and monitoring the implementation of all aspects of the Convention, through various means, including the ability to make recommendations and submit proposals regarding existing or proposed laws and policies;
- Have adequate investigative powers, with the capacity to receive complaints and refer them to the competent authorities;
- Operate on a regular and effective basis;
- Have adequate funding and not be subject to financial control that could affect its independence; and

- Be accessible to the general public and, in the context of the CRPD, in particular to with disabilities, including women and children with disabilities, and their representative organisations." (United Nations, 2007, p. 99)

In detail, according to the United Nations, the following factors are considered "essential for the effective functioning of a national institution" (1995, p. 15):

INDEPENDENCE:

1. Independence through Legal and Operational Autonomy:
2. Independence through financial autonomy:
3. Independence through appointment and dismissal procedures:
4. Independence through composition;

DEFINED JURISDICTION AND APPROPRIATE POWERS

1. Subject-matter jurisdiction;
2. Prevention of conflicts of jurisdiction;
3. Appropriate powers;

ACCESSIBILITY

1. Knowledge of the Institution;
2. Physical accessibility;
3. Accessibility through a representative composition;

COOPERATION

1. Cooperation with non-governmental organisations;
2. Cooperation between national institutions;
3. Cooperation with intergovernmental organisations;

OPERATIONAL EFFECTIVENESS

1. Adequate resources;
2. Working methods;
3. Staffing issues;
4. Review and Evaluation;

ACCOUNTABILITY.

Recently, the UN High Commissioner for Human Rights, together with the Committee and the United Nations Development Programme, produced a guide aimed at answering frequently asked questions regarding the establishment and operation of independent national monitoring mechanisms for the CRPD (United Nations, 2023). According to this guide, the functions of the independent monitoring mechanisms provided for in Article 33(2) of the CRPD are essentially threefold: to promote, protect and monitor the Rights of Persons with Disabilities at the national level (United Nations, 2023, p. 13). This includes, for example:

- Assessing the compliance of national legislation with the human rights framework for disability established in the CRPD;
- Analysing whether the objectives set out by programmes, facilities and services intended to serve Persons with disabilities are effectively achieved;
- Monitoring progress made in implementing strategies for the deinstitutionalisation of persons with disabilities;
- Monitoring progress made in implementing measures to support independent living in the community;

In this context, the fact that these are mechanisms independent of the executive branch is an essential factor in ensuring the credibility of the information gathered on the actual situation of persons with disabilities at national level and in holding the State party accountable for fulfilling its obligations under the CRPD (United Nations, 2023, p. 13).

In light of these criteria, the mechanisms provided for in Article 33(2) of the CRPD must be analysed not only in terms of their formal establishment, but also in terms of the effective guarantee of functional independence, financial stability, technical capacity and freedom to issue constructive opinions and recommendations to the State.

In Portugal, Law No. 71/2019 of 2 September established the legal framework for the Me-CDPD. The Me-CDPD is an "independent national body" responsible for monitoring the implementation of the CRPD, which, under Article 2, "operates within the Assembly of the Republic" (Law No. 71/2019, Legal Framework of the National Mechanism for the Implementation of the CRPD, 2019, Article 2).

Article 3 of Law No. 71/2019 establishes that **the remit of the Me-CDPD is the "promotion, protection and monitoring of the implementation of the Convention", and that it is responsible, in particular, for "issuing a mandatory, non-binding opinion on draft legislation concerning the Rights of Persons with Disabilities"; "to propose**

legislative amendments relating to the Rights of Persons with Disabilities that are deemed appropriate", "to monitor the implementation by the Portuguese authorities of the recommendations made to Portugal by the United Nations Committee on the Rights of Persons with Disabilities", amongst others (Law No.71/2019, Legal Framework for the National Mechanism for the Implementation of the CRPD, 2019, Article 3, para. 2, subparas (a), (b) and (h)).

The Me-CDPD is a mixed-membership body comprising 11 members, including one representative of the Ombudsman, one representative of the Commission for Policies on the Inclusion of Persons with disabilities, two representatives of national confederations, federations or associations working to defend the Rights of Persons with Disabilities, as well as five representatives of NGOs for persons with disabilities, one for each of the following disability categories: visual, motor, intellectual, hearing and organic; as well as two individuals of recognised merit (Law No. 71/2019, Legal Framework of the National Mechanism for the Implementation of the CRPD, 2019, Article 4(1)). **The Me-CDPD also has an Advisory Council,** tasked with advising the Me-CDPD in the performance of its duties, **comprising various representatives,** namely **from each parliamentary group of the Assembly of the Republic, from each autonomous region, from the National Commission for Human Rights, and twenty representatives from national confederations, federations and associations registered as NGDOs** (Law No.71/2019, Legal Framework for the National Mechanism for the Implementation of the CRPD, 2019, Article 5, nos. 1 and 2).

Law No. 71/2019 further sets out, in Article 6, the rules governing the functioning of the Me-CDPD and, in Article 7, the appointment of its members and those of the Advisory Council. Furthermore, Article 8 sets out the administrative and financial support, stating only that this support is provided "from funds allocated in its annual budget, which forms part of the budget of the Assembly of the Republic" (para. 1), that the Me-CDPD is supported by a person performing the duties of an executive secretariat (para. 4), that documentary support is "provided by the services of the Assembly of the Republic" (para. 2) **and, regarding its operational autonomy, para. 3 stipulates that "to ensure the exercise of its powers, the Me-CDPD may be provided, in accordance with its budgetary resources, with its own support services, under terms to be established by resolution of the Assembly of the Republic."** (Law No.71/2019, Legal Framework of **the National Mechanism for the Implementation of the CRPD, 2019, Article 8). The absence of implementing regulations concerning the establishment of its own support services, as provided for in Article 8(3), constitutes a significant factor in the analysis of the Me-CDPD's operational autonomy, limiting its permanent technical capacity, its functional independence and its effectiveness in exercising its legally assigned powers. In light of the Paris Principles, independence is not limited to the formal provision of administrative autonomy, but also requires adequate material conditions for the effective exercise of the mandate.**

Article 9 stipulates that the Me-CDPD is endowed with administrative autonomy, deriving its revenue from appropriations entered in the budget of the Assembly of the Republic (para. 1) and from its activities (para. 2). With regard to expenditure, para. 3 stipulates that "the expenses of the Me-CDPD shall consist of those arising from costs incurred in the performance of the duties entrusted to it". It is the responsibility of the President of the Me-CDPD to ensure administrative and financial management and to submit the Me-CDPD's draft annual budget to the Secretary-General of the Assembly of the Republic, once approved by the Me-CDPD (Law No.71/2019, Legal Framework of the National Mechanism for the Implementation of the CRPD, 2019, Article 9). Article 10 deals with attendance allowances and subsistence allowances for members of the Me-CDPD and the Advisory Council. Although integration into the Assembly of the Republic's budget may reinforce separation from the executive branch, dependence on annual appropriations and the lack of a dedicated staff complement represent structural constraints if stable levels of funding, commensurate with the mandate conferred by Article 33(2) of the CRPD, are not ensured.

In structural terms, the legal framework of the Me-CDPD enshrines the essential elements set out in Article 33(2) of the CRPD, namely regarding its independent nature, pluralistic composition and broad mandate for promotion, protection and monitoring. However, **full compliance with the Paris Principles must be assessed not only in the light of the regulatory framework, but also of effective operational capacity, available human and financial resources, and institutional freedom to exercise critical public scrutiny without constraints.**

Article 33 of the CRPD is not merely an organisational provision. It is a structural guarantee of the international human rights system, ensuring that the implementation of the Convention is not confined to the executive branch, but is subject to independent, pluralistic and participatory scrutiny.

In this context, **the Me-CDPD plays a central role in the national system for the protection of the Rights of Persons with Disabilities, functioning as an independent monitoring body, a producer of technical and legal knowledge, and a mechanism for holding the Portuguese State publicly accountable.**

The consolidation of its functional autonomy, the guarantee of adequate resources and the strengthening of its operational capacity are not merely administrative matters, but a requirement arising from Article 33(2) of the CRPD and the Paris Principles, as an indispensable condition for ensuring the credibility, effectiveness and legitimacy of the national monitoring system.

Observations, recommendations and developments

In the Concluding Observations addressed to the Portuguese State (2016), the Committee expressed "serious concern" that the Me-CDPD "is not in full compliance with the Principles relating to the Status of National Institutions for the Promotion and Protection of Human Rights (Paris Principles), nor does it have sufficient funding", thereby highlighting structural weaknesses regarding institutional independence, composition and financial sustainability (Committee on the Rights of Persons with Disabilities, 2016, para. 64) (simple translation).

The assessment of compliance with the Paris Principles must be continuous and dynamic, extending beyond the formal establishment of the mechanism and requiring ongoing verification of the material conditions necessary to ensure independence, effectiveness and accessibility.

In light of these observations, the Committee recommended that Portugal adopt measures to ensure that the Me-CDPD "is fully in line with the Paris Principles, namely:

- that it does not include government representatives,
- that it has an adequate budget to carry out its functions, and
- that it acts in close consultation with organisations of Persons with disabilities." (simple translation) (Committee on the Rights of Persons with Disabilities, 2016, para. 65).

These recommendations directly address the structural elements of the independence required by Article 33(2) of the CRPD, namely autonomy from the executive branch, adequate resources and the guarantee of effective participation by organisations representing Persons with disabilities.

As analysed previously, **the adoption of Law No. 71/2019 of 2 September represented a decisive step towards the formal alignment of the Me-CDPD with Article 33(2) of the CRPD and with the Paris Principles, notably by providing for its independent nature, pluralistic composition and broad mandate. However, structural and operational constraints remain that may compromise the full realisation of these principles, particularly in terms of operational autonomy and the availability of adequate financial and human resources, as discussed below.**

Action by the Me-CDPD

On this matter, the Me-CDPD has had the opportunity to express its views on two occasions. Firstly, during the drafting of Law No. 71/2019 of 2 September, the Me-CDPD analysed draft law No. 830/XII/3rd, which gave rise to it, issuing Opinion No.2/Me-CDPD/2019 of 17 April (Me-CDPD, 2019a).Subsequently, the Me-CDPD

addressed this matter again in its 2024 Activity Report (Me-CDPD, 2024c). Thus, **Opinion No. 2/Me-CDPD/2019 contained several recommendations for specific amendments to various articles of the draft law which, in general, were incorporated into the approved law.** Exceptions include certain recommendations, such as that concerning the concept of disability enshrined in the CRPD, which moves away from the medical and charitable models, and which raised questions regarding the compatibility of disability-specific representation categories with the human rights model of disability enshrined in the CRPD currently set out in subpara. (d), para. 1, Article 4 of the current Law No. 71/2019. (Law No. 71/2019, Legal Framework of the National Mechanism for the Implementation of the CRPD, 2019, Article 4 n1(d); Me-CDPD, 2019a, pp. 16–17).

In its 2024 Activity Report, the Me-CDPD again highlighted, in particular **on the "persistence of administrative and financial challenges" that seriously compromise Me-CDPD's operational capacity, hindering effective monitoring and, consequently, Portugal's compliance with its obligations under the CRPD** (Me-CDPD, 2024c, p. 23). In particular, **the following constraints had been identified** at that time:

- Bureaucratic and administrative problems: significant administrative obstacles that directly affected the ability to operate on a regular basis, in particular regarding the appointment of missing members 27, the formalisation of the assumption of office28, and the implementation of important procedures to regularise the functioning of the Me-CDPD;

- Financial management difficulties and their impact on the implementation of the activity plan: structural and operational constraints, notably the lack of institutional support from the Assembly of the Republic; the absence of clear operational guidelines; the lack of a budgetary implementation system suited to the functioning of independent bodies; and limitations imposed by existing administrative mechanisms that hinder the effective management of available resources;

- Recruitment of staff and workload: Law No. 71/2019 of 2 September stipulates that the dedicated support staff structure must be established by resolution (Article 8(3)). This draft resolution to the Assembly of the Republic was unanimously approved by the Assembly of the Republic's Governing Board, but the President of the Assembly of the Republic considered that he lacked the legislative initiative to initiate the process for its approval. The situation was communicated to all parliamentary groups and independent Members of Parliament in 2024 so that they might take the initiative to table the resolution. To date, this situation remains unresolved, despite the efforts made by the Me-CDPD with various interlocutors

[27] Specifically, the appointment of the two individuals of recognised merit, in accordance with Article 4(1)(e) of Law No. 71/2019 of 2 September.

[28] Of Namely, the formal assumption of office by the members of the Me-CDPD, which remained pending until January 2026 due to the delayed implementation of Article 4(4) of Law No. 71/2019 of 2 September, only three months before the end of the current term of office, scheduled for 15 April 2026.

in the Assembly of the Republic, as well as with all parliamentary groups and independent Members of Parliament, and the recent provision of further information to the Government. Added to this constraint is the fact that the Me-CDPD has a large number of legal duties that are incompatible with a small team (currently consisting only of the members in office[29] and the Executive Secretary, while members of the Advisory Council perform their duties on a voluntary basis).

These constraints do not constitute mere occasional administrative difficulties, but are structural in nature, insofar as **they directly affect the Me-CDPD's ability to exercise, in a regular, predictable and effective manner, the powers legally conferred upon it, including the issuance of mandatory opinions, the monitoring of international recommendations and participation in reporting mechanisms to the Committee.**

In short, despite the developments observed and the gradual institutional recognition of the Me-CDPD's role, constraints remain to this day that prevent the full realisation of the Me-CDPD's mission, namely:

1. Lack of a dedicated support structure

Although Article 8(3) of Law No. 71/2019 provides for the possibility of establishing dedicated support services by resolution of the Assembly of the Republic, such a resolution has yet to be approved, seven years after the entry into force of the law. This omission undermines the Me-CDPD's operational autonomy, permanent technical capacity and ability to effectively exercise its mandate under Article 33(2) of the CRPD.

2. Financial dependence on the Assembly of the Republic

Administrative and procedural dependence: the need to rely on the services of the Assembly of the Republic for financial and administrative support may hinder decision-making speed and operational autonomy, particularly where there are no specific procedural guidelines tailored to the nature of the Me-CDPD's mandate.

3. The absence of a formal follow-up mechanism

Lack of a formal mechanism for mandatory follow-up on the Me-CDPD's recommendations: the law does not provide for a structured mechanism that imposes on public bodies the duty to provide a reasoned response to the recommendations issued by the Mechanism, which may reduce the practical effectiveness of its monitoring function.

[29] At the time of writing this report, of the 11 members required for the Me-CDPD to function, only 7 are currently in full exercise of their duties. The full composition is therefore incomplete, with two positions for individuals of recognised merit and one position representing the Ombudsman yet to be filled.

4. Insufficient predictable and multi-annual funding

Lack of a guarantee of adequate and predictable funding: although the Me-CDPD has an allocation entered in the budget of the Assembly of the Republic, there is no provision for a stable funding mechanism, proportional to the scope of its assigned responsibilities, nor a multi-annual mechanism to ensure budgetary predictability.

That said, **it is necessary for the State to effectively comply with the provisions of Article 33 of the CRPD, namely by ensuring the autonomy and independence of the Me-CDPD in all its areas of activity.**

In this regard, the United Nations guide establishes that the independence of national mechanisms includes **functional, financial and operational independence** (United Nations, 2023, p. 7) (our emphasis). In this regard, **key aspects of functional independence include, in particular, that "the structure of an independent monitoring mechanism must allow for the effective fulfilment of its mandate, including the provision of adequate human, technical and financial resources."** (simplified translation) (United Nations, 2023, p. 9; Rules of procedure - Annex: Guidelines on independent monitoring frameworks and their participation in the work of the Committee on the Rights of Persons with Disabilities, 2016, para. 15).

Furthermore, in the document "Guidelines on independent monitoring mechanisms and their participation in the work of the Committee" (annexed to CRPD/C/1/Ver. 1), in para. 15, the Committee states:

"States Parties shall respect both the functional and substantive independence of monitoring mechanisms. In order to ensure respect for their substantive independence, States Parties shall ensure that the mandate of such mechanisms is defined in an appropriate and sufficiently broad manner to cover the promotion, protection and monitoring of all rights enshrined in the Convention, and that this mandate is enshrined in constitutional or legislative provisions; they must also ensure that such mechanisms are endowed with the necessary powers and entrusted with a wide range of responsibilities, including those referred to in para. 14 above."

In order to ensure respect for the functional independence of monitoring mechanisms, States Parties shall ensure that each constituent mechanism is independent of the executive branch of the State party and that monitoring mechanisms: (a) should comprise members appointed through a public, democratic, transparent and participatory procedure; (b) have adequate funding, as well as sufficient technical and qualified human resources; (c) enjoy autonomy in the management of their budget; (d) have autonomy to decide and assess matters falling within their remit; (e) be able to maintain and develop relationships and engage in consultations with other entities; and (f) be able to receive

and assess complaints submitted by individuals or groups alleging violations of their rights under the Convention." (emphasis added, simple translation) (Rules of procedure - Annex: Guidelines on independent monitoring frameworks and their participation in the work of the Committee on the Rights of Persons with Disabilities, 2016, para. 15).

The persistence of these constraints constitutes a structural limitation on the full implementation of Article 33(2) of the CRPD. The formal existence of a designated mechanism is not sufficient to ensure compliance with the Convention when the material conditions essential for the effective exercise of its mandate are not guaranteed.

The shortage of permanent technical staff, the lack of an approved staffing structure, limitations on administrative autonomy and the identified budgetary constraints directly affect the functional and material independence of the Me-CDPD, as required by the Paris Principles and the Committee's Guidelines on independent monitoring mechanisms.

These limitations reduce the capacity for systematic monitoring, timely legislative oversight, responding to international requests, and structured engagement with civil society, thereby compromising the effectiveness of the national framework for the implementation and monitoring of the Convention.

It is therefore imperative that the State party ensure, as a matter of priority, the provision of adequate human, technical and financial resources, as well as the full operational autonomy of the Me-CDPD, failing which the full implementation of Article 33 of the CRPD will remain compromised.

The structural strengthening of the independent national mechanism is an essential condition for ensuring credible, pluralistic, participatory monitoring that is aligned with the human rights model of disability, and constitutes an integral component of the international obligations assumed by Portugal under the CRPD.

Analytical Summary

Article 33 of the CRPD establishes the mandatory national framework required to ensure that the Convention is implemented, coordinated and monitored in a credible manner. Paragraph 1 requires the designation of focal points within Government and, where appropriate, the establishment of a coordination mechanism, clearly distinguishing implementation and execution functions (which fall within the remit of the executive branch) from independent monitoring functions.

Paragraph 2 requires States Parties to maintain, strengthen, deisgnate or establish a framework, including one or more independent mechanisms, to promote, protect and monitor the implementation of the CRPD. These mechanisms must comply with the Paris Principles, including guarantees of legal and functional independence, pluralism, a broad mandate, adequate powers, accessibility and sufficient resources.

Paragraph 3 establishes the active participation of civil society — in particular persons with disabilities and their representative organisations — as a structural component of the monitoring process, in conjunction with the obligation of close consultation set out in Article 4(3) of the CRPD.

In the Portuguese context, Law No. 71/2019 represents a significant step forward by formally establishing the Me-CDPD as the independent national monitoring mechanism operating within the Assembly of the Republic, with a pluralistic composition, broad competences and, to date, a membership composed predominantly of persons with disabilities.

However, substantive compliance with Article 33 of the CRPD and the Paris Principles does not depend solely on the formal legal framework, but also on the existence of effective guarantees of independence and operational effectiveness, including permanent human resources, operational autonomy, and adequate and predictable funding.

As highlighted by the Committee's Concluding Observations (2016) and international guidance, the persistence of structural constraints — such as the absence of an approved dedicated staffing structure, limitations affecting administrative and financial autonomy, and insufficient technical resources — undermines the functional and material independence of the mechanism and limits its capacity to carry out systematic monitoring, timely legislative scrutiny, follow-up of recommendations and structured engagement with civil society.

Accordingly, the effective implementation of Article 33 requires the State to strengthen, as a matter of priority, the material guarantees underpinning the Me-CDPD's work, including

adequate resources, operational autonomy and institutional sustainability, while consolidating a governance model in which implementation by the public administration is accompanied by independent, pluralistic and participatory scrutiny.

Only through a genuinely independent and adequately resourced national mechanism is it possible to ensure credible monitoring and continuous democratic accountability regarding the implementation of the CRPD.

Summary Table

National Implementation and Monitoring

Ensuring that the CRPD has a real impact on the lives of persons with disabilities (Article 33 of the CRPD)

National Mechanisms for the Implementation and Monitoring of the CRPD

Article 33 of the CRPD requires States Parties to ensure:

- Coordination mechanisms within Government.
- Independent monitoring frameworks.
- The active participation of persons with disabilities and their representative organisations.

The effective implementation of the CRPD depends on the interaction between:

- Government focal points: Public authorities responsible for the implementation and coordination of public policies.
- Me-CDPD: The independent mechanism responsible for promoting, protecting and monitoring the implementation of the CRPD.
- Civil society: The close involvement of persons with disabilities and their representative organisations throughout all implementation and monitoring processes.

The Me-CDPD and the Paris Principles

The Me-CDPD operates within the Assembly of the Republic and aligns its work with international standards, including the Paris Principles:

- Independence: Beyond the formal legal framework, the effective guarantee of financial, administrative and operational autonomy remains essential.
- Pluralism: The composition of the mechanism, with a majority of persons with disabilities, helps ensure that monitoring reflects lived experience and diverse perspectives.
- Broad mandate: The capacity to analyse legislative initiatives, issue opinions, formulate recommendations and monitor the implementation of the CRPD.

Current Situation

Portugal has established an institutional framework that includes:

- Government coordination structures.
- The Me-CDPD as the independent national mechanism responsible for promoting, protecting and monitoring the implementation of the CRPD, with its legal basis established in Law No. 71/2019.
- National strategic instruments (*e.g.* ENIPD).

Identified Issues

Despite the progress introduced by Law No. 71/2019, the Me-CDPD identifies several challenges affecting the effective exercise of its mandate:

- Gap between the formal framework and practice: Existing mechanisms do not always operate in a coordinated and effective manner.
- Operational limitations of the Me-CDPD: Including insufficient human and technical resources, as well as administrative and operational constraints.
- Inconsistent participation of Persons with disabilities and their representative organisations.
- Absence of a results-based monitoring system: Limited use of consistent indicators and difficulties in assessing the real impact of public policies.
- Irregular compliance with the obligation of prior consultation: The Me-CDPD is not systematically consulted in legislative processes and policy-making processes affecting persons with disabilities.

Activities of the Me-CDPD

The Me-CDPD emphasises that independent monitoring constitutes a fundamental condition for the effective implementation and realisation of the Rights of Persons with Disabilities. In fulfilling its mandate, the Me-CDPD has:

- Carried out independent monitoring activities.
- Issued opinions, recommendations and contributions.
- Promoted dialogue with policymakers, public institutions, persons with disabilities and their representative organisations;
- Produced evidence-based analysis and knowledge.

Compliance with Article 33 of the CRPD requires the State to strengthen the resources, operational capacity and institutional autonomy of the Me-CDPD. Only a strong, independent and adequately resourced mechanism can ensure the effective scrutiny, accountability and transparency necessary for an inclusive democracy grounded in human rights.

Recommendations of the Me-CDPD

To ensure full compliance with Article 33 of the CRPD, the Me-CDPD recommends:

- Strengthening the institutional, operational and technical capacity of the Me-CDPD.
- Ensuring adequate, stable, predictable and sustainable human, financial and technical resources.
- Guaranteeing the effective participation of persons with disabilities and their representative organisations, in accordance with Article 4(3) of the CRPD.
- Establishing a monitoring system based on outcome indicators, and grounded in the human rights model of disability.
- Ensuring systematic compliance with the obligation of prior consultation of the Me-CDPD in all relevant legislative and policy-making processes.
- Ensuring that the EDPD 2026–2030 and its Action Plan include accessible monitoring, evaluation and accountability mechanisms.
- Strengthening coordination between public authorities and independent monitoring mechanisms.

Closing Note

Ensuring that all persons with disabilities can live with full autonomy, dignity and participation is a legal obligation undertaken by the Portuguese State. It is within this framework that the Me-CDPD has prepared this report.

The CRPD must guide, across all sectors, the design, implementation and evaluation of public policies. Its effectiveness cannot be confined to legislation or strategic documents alone; it requires practical implementation through institutions, accessible services and real-life conditions that enable persons with disabilities to exercise their rights on an equal basis with others.

The progress achieved to date reflects important advances, but also reveals a persistent gap between the formal recognition of rights and their effective realisation in people's everyday lives. Overcoming this gap requires more coherent public policies, adequate and predictable funding, investment in the training of professionals, the effective participation of persons with disabilities and their representative organisations, in accordance with Article 4(3) of the CRPD, and monitoring systems grounded in continuously collected and systematically analysed data, as well as accessible and effective complaints mechanisms.

In this context, it is important to emphasise that the existence of independent monitoring mechanisms, in accordance with Article 33 of the Convention, is essential to ensure transparency, democratic accountability and the continuous improvement of public policies. Strengthening the institutional and operational conditions of the Me-CDPD is therefore inseparable from the State's capacity to monitor and deepen the implementation of the CRPD.

This report forms part of the international dialogue on the monitoring of the Convention, contributing systematised information on the national context, the progress achieved and the remaining challenges in the realisation of the rights of persons with disabilities in Portugal.

At a time when a new cycle of public policies is beginning, notably with the Strategy for the Rights of Persons with Disabilities 2026–2030, the Me-CDPD will continue to monitor this process, contributing to implementation that is consistent with the CRPD, supported by effective monitoring mechanisms and focused on tangible results in people's lives.

It is with this sense of responsibility that we present this report.

Rights are built, day by day, within the realities of people's lives.



Vera Bonvalot, President of the Me-CDPD

Lisbon, March 2026

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Appendix 1. National Study on the Attitudes and Perceptions of the Portuguese Adult Population regarding Disability

As part of its mandate to promote, protect and monitor the implementation of the CRPD, the Me-CDPD commissioned the **National Study – Attitudes and Perceptions of the Portuguese Adult Population regarding Disability**, carried out by the Observatory on Disability and Human Rights (ISCSP-ULisboa). The study sought to answer the question: *"How does the Portuguese adult population perceive Persons with disabilities and the public policies designed to promote their fundamental rights?"* (Pinto et al., 2025, p. 7).

Based on a representative sample of 1,000 people, collected between 1 and 30 October 2025, the study provided important evidence on the structural dimensions of social attitudes, stereotypes, perceptions of discrimination and support for public policies in the area of disability, contributing to an evidence base for the formulation of public policies

Knowledge and visibility of disability

Although 65.1% of respondents stated they had contact with or were familiar with disability (pp. 11–12), there is an underestimation of its prevalence: "almost half (or 47.4%) of respondents believe that the proportion of persons with disabilities in Portuguese society is less than 10%" (p. 13). At the same time, there is a high level of unfamiliarity with the CRPD: "the majority of Portuguese people are unaware of the CRPD (57.9%)" and only "6% said they were familiar with it" (p. 13). With regard to perceptions of the national context, the results show that, on average, people "slightly disagree with the statement that Portugal is an inclusive country for persons with disabilities (M=3.3)" (p. 14), indicating a critical assessment of the effectiveness of inclusion policies and practices.

Positions and ambivalence

The study reveals a generally favourable pattern in the stated positions, with high agreement with statements such as "The main problem for Persons with disabilities is physical and social barriers" (M=5.03) and "With adequate support, most Persons with disabilities are productive in the labour market" (M=4.93) (p. 16). However, signs of ambivalence

persist. The statement “I feel sorry for Persons with disabilities” has an average score of 3.28 (p. 17) ,revealing the persistence of ableist attitudes and paternalistic perceptions. The report also emphasises that this pattern reflects “a stance within Portuguese society towards disability that is still not far removed from a paternalistic view” (p. 17).

With regard to indicators such as the age and educational attainment of respondents, these emerge as differentiating factors, with younger and more educated persons generally demonstrating attitudes more aligned with the social model of disability (pp. 17–21).

Stereotypes and social representations

When asked about the traits that society associates with persons with disabilities, the responses reveal that they are perceived primarily as “vulnerable” (M=4.7) and “dependent” (M=4.6) (pp. 22–23). The report therefore concludes that “a hegemonic and socially shared view still strongly influenced by the medical model of disability persists” (p. 22). At the same time, the traits “competent” (M=3.3) and “active” (M=3.2) fall below the midpoint of the scale (p. 23), a finding that may have significant implications for the employability, economic autonomy and independent living of persons with disabilities.

Perception of discrimination

One of the most significant findings of the study relates to the perception of discrimination: “91% of respondents believe that persons with disabilities face situations of discrimination very frequently (47%) or frequently (44.3%)” (p. 27). The areas perceived as most problematic are “vulnerability to situations of violence (M=4.68)” and “access to employment (M=4.49)” (p. 28), followed by sexuality, independent living and access to public spaces. These data confirm the social awareness of the structural barriers that still exist.

Support for public policies

In the area of public policy, the study reveals “a broadly favourable stance” towards inclusion and support measures (p. 31). In other words, measures such as “reserved parking for persons with disabilities (M=5.69)” and the “free provision of assistive devices (M=5.57)” receive very high levels of public support (p. 32) among respondents. Furthermore, in this regard, there is a clear preference for increased public investment, particularly in the “removal of architectural barriers and the promotion of physical accessibility (M=5.58)” and “healthcare and the provision of assistive devices (M=5.55)” (p. 35).

Conclusion

The National Study promoted by the Me-CDPD shows that Portuguese society recognises the existence of structural discrimination and expresses significant support for the consolidation of public inclusion policies (Pinto *et al.*, 2025). However, ambivalent social representations persist, still marked by traits of vulnerability and dependence, as well as a general lack of awareness of the CRPD, factors that continue to hinder the full consolidation of the human rights paradigm in the social understanding of disability.

This study constitutes a key contribution by the Me-CDPD to the systematic understanding of the national situation, strengthening an evidence-based monitoring approach and giving practical effect to Article 31 of the CRPD, which requires the collection of appropriate data to support the formulation and implementation of effective public policies.

At the same time, its findings are directly relevant to the implementation of Article 8 of the Convention (awareness-raising), by providing essential empirical evidence for the development of information, awareness-raising and capacity-building strategies aimed at combating stereotypes, prejudices and harmful practices, while promoting respect for the rights and dignity of persons with disabilities.

By producing and disseminating rigorous data on social attitudes, perceptions of discrimination and support for public policies, the Me-CDPD also strengthens its institutional role in the exercise of the promotion, protection and monitoring functions established under Article 33(2) of the CRPD.

In this way, the study provides a technical and evidence-based foundation for the formulation of opinions and recommendations, strengthens dialogue with policymakers and contributes to the international monitoring of Portugal's compliance with its obligations under the Convention, establishing itself as a strategic tool for evidence-based governance and for the consolidation of the human rights model of disability.

MeCDPD
Mecanismo Nacional
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