The Permanent Mission of the Republic of Estonia to the United Nations and Other International Organisations in Geneva presents its compliments to the Office of the High Commissioner for Human Rights, and in response to the Latter's letter from 18 September 2011, has the honour to forward the reply of the Government of Estonia to the enclosed questionnaire for the preparation of the OHCHR analytical study on Violence against women and disability referring to the Human Rights Council resolution 17/11.

The Permanent Mission of Estonia to the United Nations and Other International Organisations in Geneva avails itself of this opportunity to renew to the Office of the High Commissioner for Human Rights the assurances of its highest consideration.

Geneva, 22 November 2011

Enclosure: 8 pages

Office of the High Commissioner for Human Rights

GENEVA
Response of Estonia to the questionnaire for the preparation of the OHCHR analytical study on Violence against women and disability

Data/Statistics

Have studies/research been conducted on the prevalence, nature, causes and impact of violence against women and girls with disabilities in different settings (family/home, work-place, medical Institutions, schools, etc.?). What forms of disability and violence do they cover?

Several studies have been conducted in Estonia regarding violence against women; however, none of these specifically focus on disabilities of the victims. The following studies have been published over the years: Violence against women in Estonia (2001), Violence and women’s health (2003), Impact of Violence to Women’s Health from Doctor's Perspectives (2003), Violence Against Women in Personal Relationships (2004), Domestic violence in Western Estonia (2005), plus several studies on trafficked women and women involved in prostitution (both from health and social perspective). Also a national victim and violence survey has been conducted.

Please provide the available data on the number of women and girls with disabilities who have accessed services and programmes to prevent and address violence in the past year? Is this information disaggregated by disability, as well as by sex, age, socio-economic and ethnic backgrounds?

Since 2010 we have overview on women’s shelters clients, but this data collection did not take into account disabilities. As of 2011 shelters are obliged to collect data also on disabilities. The respective data and analysis will be available latest in autumn 2012.

Please provide available data on the number of households in which persons with disabilities reside. How many of these are women-headed households?

According to survey results from 2009 (Care load research of People With Disabilities And Their Families), most of the 16-year-olds and older people with disabilities (98,5%) live in households. 1.5% live in welfare institutions, but most of them disaggregate themselves as a household of 1 person and according to this study they were also categorised as such.

Majority of persons with disabilities live in a household of two persons (42%), 36% live alone, 14% live in a household of 3 persons and 8% in a household of 4 or more persons.

65% of persons with disabilities are the only ones with disabilities in their households, 33% of persons with disabilities have +1 person with disabilities in their households, 2% have 2 or more persons.

60% of the 16-year-olds and older people with disabilities live without a partner or a spouse: 45% of men and 69% of women with disabilities.
23% of people with disabilities live with their children. 4% of those children are under 17 years old. Women with disabilities live with their children often than men with disabilities (respectively 26% and 17%). There is no data available on how many of these households are women-headed.

Please provide any statistics, information of studies on disability/is resulting from violence against women and girls?

There have been no major studies on specifically women and girls with disabilities in recent years. In 2009, The Ministry of Social Affairs carried out a care load study of people with disabilities and their families to map the adult people’s (16 years of age and older persons with disabilities) coping and employment. In 2009/2010 the survey of coping and needs of the families of disabled children was carried out by the request of the Ministry of Social Affairs. The aim of the research was to map the situation and possibilities of the families, who raise a child or children with disabilities. Also, self-evaluation of families was included to find out the effectiveness of different measures of improving children's coping and the availability and sufficiency of support services on development of children.

Legislation and Policies

Is there a legal framework addressing violence against women and girls with disability in different contexts (within the family, at the community and in the workplace, and in State and non-State institutions such as medical, education and other service providing institutions)?

There is no separate legal framework addressing violence against women and girls with disability in different contexts. However, the aspect of violence in crimes committed against persons is taken into account in different contexts - § 58 in the Penal Code sates that there are aggravating circumstances to crimes committed which among other things take into account knowingly committing offences against a person who is less than 18 years of age, pregnant, in an advanced age, in need of assistance or has a severe mental disorder, or a person who is in a service, financial or family related dependent relationship with the offender.

According to The Constitution of the Republic of Estonia, everyone is equal before the law (§12). No one shall be discriminated against on the basis of nationality, race, colour, sex, language, origin, religion, political opinion or other conviction, property or social status, or on other grounds. The incitement of hatred, violence or discrimination between social strata is also prohibited and punishable. Women and girls with disabilities have the same human rights and fundamental freedoms as everybody else in Estonia. These rights are covered by The Constitution and The Equal Treatment Act. Continuous improvements in the legal framework and in the non-governmental sector have taken place in discriminatory practices in recent years.
The Equal Treatment Act came into force on 1st of January in 2009 in Estonia. The act provides protection against discrimination on the grounds of race and ethnic origin, sexual orientation, religious and other beliefs, disability, and age. More precise obligations and output of government and local governments towards people with disabilities are introduced also in Social Welfare Act §26.

The rights of disabled children in Estonia are protected by UN Convention on the Rights of the Child (ratified in 1991). The principles of the convention are integrated into national law – Child Protection Act (adopted in 1992, last redaction in 2010), e.g. §3 (the principle of child protection is to put child’s interests always and everywhere as priority), §8 (every child has an inherent right to life, health, development, work and well-being), §10 (the child has an equal right to receive assistance and care and to develop, regardless of (...) whether the child is healthy, ill or disabled) and §52-54, that underline the rights of disabled children.

Identification, investigation and prosecution of instances of exploitation, violence and abuse are regulated in the Penal Code. It applies to all target groups, including persons with disabilities, women and children. Penalties enacted in Penal Code are not differentiated on the basis whether the victim is disabled or not.

Are practices such as 1) forced psychiatric intervention, 2) forced institutionalization, 3) solitary confinement and restraint in institutions, 4) forced drug and electroshock treatment, 5) forced abortion, 6) forced sterilization and 7) harmful practices, prohibited by law?

The Constitution enacts everyone’s right to liberty and security of person, with some exceptions. People with disabilities are no exception. In case of violation of this right, Penal Code prescribes sentence for physical abuse. Also has everyone the right to the inviolability of private and family life.

Parents have the right and the duty to raise and care for their children. The number of children of disabled people is not limited by law in any way and the right to have children has to be granted to everybody equally. Also, according to Constitution no one shall be subjected to medical or scientific experiments against his or her free will.

According to the Constitution, all the above-mentioned practices are forbidden, except for the cases provided by law (coercive psychiatric treatment; placing into a social welfare institution and sterilization of adults with restricted active legal capacity etc. are allowed by a court ruling). Legislation that regulate these fields in Mental Health Act, Termination of Pregnancy and Sterilization Act, partly also Artificial Insemination and Embryo Protection Act and Law of Obligations Act (about patients who are not able to make decisions). These topics are also regulated by Social Welfare Act and Family Law Act.

As for practices mentioned in the above question, the Estonian Mental Health Act states that psychiatric care is provided to a person with restricted active legal capacity at the request or with the consent of his or her legal representative. (§3) A person is admitted to the psychiatric department of a hospital for emergency psychiatric care without the
consent of the person or his or her legal representative, or the treatment of a person is continued regardless of his or her wishes only if the person has a severe mental disorder which restricts his or her ability to understand or control his or her behaviour; without inpatient treatment, the person endangers the life, health or safety of himself or herself or others due to a mental disorder; and other psychiatric care is not sufficient. (§ 11) Involuntary treatment can only be applied through a court order unless there is reason to believe he/she is a threat to himself/herself or the society, and getting a court order would take too long. The decision to apply involuntary treatment without the court order is made by the psychiatrist of the psychiatric ward upon the arrival of the person there. The decision is formalised according to the regulation stipulated by the Minister of Social Affairs. The time of formalisation of the decision is deemed the beginning of the involuntary treatment. Involuntary treatment based on the abovementioned decision of the psychiatrist may be applied only for 48 hours since the beginning of the treatment.

The Estonian Penal Code allows coercive psychiatric treatment if at the time of commission of an unlawful act the person lacks capacity or if he or she, after the making of the court judgment but before the service of the full sentence, becomes mentally ill or feeble-minded or suffers from any other severe mental disorder, or if it is established during preliminary investigation of the court hearing of the matter that the person suffers from one of the aforementioned conditions and therefore the mental state at the time of commission of the unlawful act cannot be ascertained and he or she poses danger to himself or herself and to the society due to his or her unlawful act and mental state and is in need of treatment, the court shall order coercive psychiatric treatment of the person. (§ 86) The offender will, at first, be admitted to an inpatient clinic but the treatment can also be outpatient when the person being treated is the treatment regime. The treatment specified above shall be provided by a psychiatric institution which has been issued a corresponding licence. Coercive psychiatric treatment shall be applied until the person recovers or ceases to pose danger. Termination of a treatment shall be ordered by the court. If a punishment is imposed on a person after coercive psychiatric treatment, the period of treatment shall be included in the term of the punishment. One day of treatment corresponds to one day of imprisonment.

Termination of a pregnancy against the will of the pregnant woman is punishable by 3 to 12 years’ imprisonment (Penal Code § 125). Termination of a pregnancy at the request of the pregnant woman by a person without the right arising from law to terminate pregnancy is punishable by a pecuniary punishment or up to 3 years’ imprisonment. The same act is punishable by up to 5 years imprisonment if the pregnancy has lasted for more than twenty-one weeks (Penal Code § 126).

Harmful practices are punishable by law. Placing or leaving another person in a situation which is life threatening or likely to cause serious damage to the health of the person is punishable by a pecuniary punishment or up to 3 years imprisonment (Penal Code § 123). Knowing refusal to provide assistance to a person who is in a life threatening situation due to an accident or general danger, although such assistance could be provided without endangering the person providing assistance, is punishable by a pecuniary punishment or up to 3 years imprisonment (Penal Code § 124).
Forced drug and electroshock treatment and forced sterilisation are not allowed by law.

What specific policies/programmes are in place to prevent and address violence against women and girls with disabilities and/or to address harmful practises that can result into disabilities? How do general policies and plans/programmes on violence against women ensure the inclusion of and accessibility by women and girls with disabilities?

In 2010, the Development Plan for Reducing Violence for Years 2010-2014 was approved by the Estonian Government. The purpose of the development plan is to reduce and prevent violence in its various forms. The development plan deals with violence related to minors, domestic violence and trafficking in human beings, the types of violence, situations and risk factors that endanger vulnerable target groups – women and children – the most.

Based on international experience (WHO 2004 guide to implementing the recommendations of the World report on violence and health; National Programme for Reducing Violence in Finland, 2006), it is recommended to use a comprehensive approach when dealing with violence, not to focus strictly on the prevention of one type of violence, and to integrate prevention activities, identification of and provision of support to the victims and also rehabilitation of criminal offenders for that purpose. The Development Plan for Reducing Violence for Years 2010-2014 was prepared assuming that in order to reduce violence it is important to prevent violence by changing people’s values, dispositions and attitude to violence; reduce possibilities for the occurrence of situations facilitating violence; improve access of victims of violence to assisting and supporting services; ensure more efficient intervention of the criminal justice system in crimes of violence and thus reduce repetitive victimisation and recidivism of criminal offenders. Various stakeholders were involved in the preparation of the development plan, incl. NGOs that address their activities to female victims of different age groups.

The obligation of the state to take all appropriate measures to protect persons with disabilities, both within and outside the home, from all forms of exploitation, violence and abuse, is covered by constitution (§18 and 19. It covers also the person’s right to act or not to act according to his will. There are several sanctions in the Penal Code to protect these rights).

Victim Support Act enacts victim support service and the respective benefits paid. The aim of victim support services is to maintain or to improve the ability to cope of those who have been neglected, mistreated or suffered physical, mental or sexual abuse. The victims are counselled and helped by communication with state and local governments and legal persons. Victims and their dependents are paid state amends.

How has the participation of women with disabilities in the development of such laws, programmes/policies been ensured?
Women with disabilities enjoy all human rights and fundamental freedoms on an equal basis with men with disabilities, as well as with women without disabilities. The representatives of organisations of people with disabilities are also included in elaboration of legislation and policies in Estonia, e.g. The Estonian Chamber of Disabled People as an umbrella organisation of different organisations of disabled people has frequently given its opinions. Besides that, there is a ‘Good practice of inclusion’ – guidelines for including people, and webpage www.osale.ee, where every Estonian inhabitant, NGO and interest group, persons with disabilities included, can also express their opinions and suggestions about governmental issues.

Prevention and Protection

What measures/initiatives are in place to combat negative perceptions, stereotyping and prejudices of women and girls with disabilities in the public and private spheres?

The Ministry of Social Affairs of Estonia prepared a Development Plan of Children and Families for 2011-2020 in 2011. People with disabilities are included also in National Health Plan 2009-2020 and Development Plan of Education System 2007-2013. Prevention of maltreatment and protection of persons is organised by Estonian Patients’ Advocacy Association in order to represent the interests of patients on individual, systematic and international level. The association also organises lectures about patients’ rights. The Estonian Chamber of Disabled People also coordinates campaigns to raise public awareness about disabled people etc. In Estonian universities there are courses about human rights, including rights of children and people with disabilities.

There are also several NGO’s that tackle the issues of discrimination. In 2009, 2010 and 2011 the Ministry of Social Affairs has co-funded activities related to anti-discrimination under programme PROGRESS. The activities have been coordinated by the NGO Human Rights Centre and included film festival TARTUFF on different families (including families with disabled family member etc), conference Diversity Enriches, outdoor media campaign, handbook on non-discrimination and other awareness raising activities. Also activities addressing the general equal treatment issues as well as specifically raising awareness and combating discrimination based on disability have been included, e.g. thematic television program, youth discussion sessions, developing teaching kits to use at schools by teachers and students, human rights film sub-programme at the PÖFF film festival focusing on tolerance for people with disabilities, newspaper supplement on disability awareness etc.

There have been several campaigns targeting violence against women, but none of them have put special attention to disabled women. Campaigns such as “Stop violence against women” in 2004, “Stop violence in home!” (2005) (supported by The Body Shop), poster campaign “When love hurts” (2005), website www.estonia.stopvawmonitors.org, presentations and articles from specialists, etc have been important in activating media discussions and raising awareness. The Council of Europe Campaign to Combat Violence against Women, including Domestic Violence, was carried out in Estonia as well. The aim of the national campaign (2007) was to raise awareness on domestic violence against women. The campaign had two target groups: government officials (including civil
servants in different ministries) and the wider public. Series of articles on the issue of domestic violence were published in the Estonian daily newspaper.

**What initiatives exist to inform women and girls with disabilities about their rights, including sexual and reproductive health issues? To what extent do these initiatives address also women in institutions?**

According to the Constitution, every person has his right for health protection. People with disabilities are no exception. The quality of provided health care services is equal for everybody. All the insurers are guaranteed to get primary health care as well as special health care in hospitals.

Women are informed about their rights mostly by victim support specialists, local government social workers, or women's shelters. 26 national victim support specialists all around Estonia coordinate victim support. Most of the regional victim support officials work in local police units and therefore the police participates actively in the system. The cooperation takes place between the police, Victim Support department of Social Insurance Board, the NGO Estonian Women’s Shelters Union, and all the Women’s Shelters, and leaders of regional women support groups. Also, there are social workers located in each local government. And, currently, there are 10 women’s shelters in Estonia, which provide temporary shelter for women with or without children. Besides offering support and shelter to the victims, the shelters provide information and preventive and follow-up activities. They try to address all the issues important for women, including information about their rights, sexual health issues etc.

A country-wide hotline 1492 for female victims of violence was opened up in March 2008.

According to Child Protection Act is the purpose of helping a child to ensure the child's security, development and wellbeing by keeping in mind of his needs and will and supporting his independence. It is every person's obligation to report of a child in need of protection and help to social services, police or any other help providing organisation. Social services have the right and responsibility to act immediately, regardless of the regional or other affiliation of the child in need. Collaboration between government and civil society organisations is strong. The Estonian Chamber of Disabled People is training specialists, coordinates campaigns to raise public awareness about disabled people etc.

**What programmes/initiatives have been developed to train women with disabilities to develop skills and abilities for economic autonomy and participation in society and to use technological and other aid that lead to greater independence?**

To guarantee and promote the full realization of rights of people with disabilities, including participating in political and public life etc, the Government has developed numerous policy measures in addition to legal means. In this regard, disability area is perhaps the most advanced area involving the general concept of Estonian disability policy. Standard regulation for creating equal opportunities for disabled people and the action plan to implement it. Counselling (social, debt, legal etc.) of people with disabilities is organised similarly to all the others who need help.
Ministry of Social Affairs of Estonia has also prepared a Development Plan of Children and Families for 2011-2020 in 2011. Many activities in it are directed to improving the quality of life of children with disabilities and their families. Women with disabilities have formed the Estonian Union of Disabled Women to protect their rights. The mission of the union is integration of women and girls with disabilities, raising their social activeness and awareness and promoting gender equality among disabled people by training programs, campaigns and other events. The union has organized information days and courses on coping with everyday life and work and translated articles about the rights of women and girls with disabilities.