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**Promotion and protection of all human rights, civil,
political, economic, social and cultural rights,
including the right to development**

Written statement^{*} submitted by the International Catholic Child Bureau, a non-governmental organization in special consultative status

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[15 February 2016]

^{*} This written statement is issued, unedited, in the language(s) received from the submitting non-governmental organization(s).



Institutionalization of Children with Disabilities in Kazakhstan

I. POSITIVE DEVELOPMENTS

Legal and Policy Improvements

1. The Law n° 39-III of 13 April 2005 on “Social Protection of the Disabled” followed by the Government Decree n° 1266 of 21 December 2005 created a Coordination Council in the field of “Social Protection of the Disabled”. As for the Government Decree n° 754 of 20 July 2005 on several matters relating to rehabilitation of people living with disabilities, it provides for the Rules for granting prothesis and technical equipment to persons with disabilities, the Rules for granting special equipment for moving persons with disabilities, and the Rules for granting sanatorium treatment to persons and children with disabilities. In addition, to take into account specific needs of children in early childhood, the Law n°114-IV on Special Social Services of 29 December 2008¹, creates conditions to a child (family) with special needs for his/her social and cognitive development.

2. In 2011, the 2012-2018 Plan of action to promote the rights and quality of life of persons with disabilities has been adopted. The 2011-2020 State Program of Education Development aims at covering 50 % of children with disabilities’ inclusive education: 9% in 2010, 25% in 2015 and 50% in 2020. In its national report to the Universal Periodic Review process, Kazakhstan asserted that “the proportion of schools capable of providing inclusive education must reach the target of 70% of the total number of general education schools by 2020”². Furthermore, a coordinating Council on Social Protection of Persons with Disabilities has been set up.

3. The establishment of day-care centers has been instrumental as it encouraged family-based care and allowed for the deinstitutionalization of many children living with disabilities, even if families still need more social benefits and financial support.

II. ISSUES OF CONCERN³

Social Services Delivery and Violation of the Rights of Children with Disabilities

Trained Staff in State-run Residential Institutions

4. Despite the governmental efforts, children-care institutions lack specialized teachers and professionals to deliver adequate support than can improve stimulation and development, allow educators to ensure relevant activities towards autonomy, rehabilitation and reintegration of the child. Therefore, children with severe disabilities are sometimes neglected and left out without proper care and suitable development activities.

Violence against Children in State-run Residential Institutions

5. Violence in State-run residential understaffed institutions is most of the time generated by the poor quality of the relationship educators/children as well as the child living conditions. Children’s personalities as well as some uncontrolled, self-harm and aggressive behaviors linked with their disabilities are not properly managed by care-givers often overwhelmed by the workload and the high number of children they have to take care. Some educators complained about the low salary they get. In some cases, support methods are abusively implemented limiting

¹ Amended on 10 July 2012.

² A/HRC/WG.6/20/KAZ/1, § 230.

³ Kazakhstan has one of the highest rates in children with disability under 18 years old among CIS countries. Whilst the rate is 1,33% in Kazakhstan, it is 0.80% in Tajikistan in 2012, 0.55% in 2005 in Turkmenistan, 1,25% in 2012 in Kyrgyzstan and 1.88% in the Russian Federation in 2010 (Situation Analysis of Children with Disabilities for the Development of an Inclusive Society in the Republic of Kazakhstan, UNICEF, 2014, p. 17).

stimulating activities. Due to abuse and neglect, and verbal, psychological and physical violence, including corporal punishment, some children run away from institutions.

Social Services Provided by NGOs

6. Civil society organizations (CSOs) have been associated to the special social service delivery to children with disabilities. However they do not receive apposite support from the Government. Consequently, they are constrained sometimes to disrupt services' provision when allocated resources are exhausted. These interruptions have negative impact on children, threaten previous efforts, and jeopardize progress made so far by the children.

Early Intervention Challenge

7. The Ministry of Health Protection and Social Development is clearly pushing for the imperative need to implement an early intervention programme for children between 0 and 3 years old who might be affected by development disorders. Nonetheless, in practice, insufficient progress has been made from the Government side. It is proven that 0-3 is a critical period for children, even more for children with disabilities, and needs due attention and investments for pre-schooling. Convinced that early intervention could significantly reduce the institutionalization of abandoned children affected by development troubles, CSOs strived to increase endeavors in that regard. Early multidisciplinary care, support, counseling is likely to avoid the deterioration of symptoms, severe disabilities, and ultimately increase chances of recovery.

8. Despite the Ministry of Health orders n° 83 of 29 January 2003 and n° 478 of 28 September 2009 on "On approval of the Rules for organization of screening of psychological and physical disorders of the early age children", Governmental policies on early interventions and the required collaboration with local executive bodies are still insufficient. Effective actions would have drastically decreased the institutionalization of children, including non-orphan children in State-run institutions, and set up an appropriate environment for the education and rehabilitation of children with disabilities.

9. BICE partner KENES run a rehabilitation center and provide consultation, counseling and early intervention services for young parents of children with disabilities in view of better assessing, certifying and guiding their children to competent services, adequate care, nurseries, kindergartens and schools.

Inclusive Education

10. Inclusive education is a key tool for deinstitutionalization. The State Program of Education Development for 2011-2020⁴, identified the increasing number of children with disabilities as a challenge, and recognized that in 2010 "inclusive education has not been developed yet". During his visit to Kazakhstan in September 2011, the Special Rapporteur on the Rights to Education, Kishore Singh, stated that "inclusive education has not yet been developed, and facility provisions to meet the needs of students with physical disabilities have largely yet to be established"⁵ and that "specific action is also required to ensure adequate education opportunities for persons with disabilities"⁶. Four years later, in September 2015, the Committee on the Rights of the Child was concerned that "there remains challenges with regard to pedagogical and psychological assistance provided in schools to implement inclusive education and that large numbers of children with disabilities are still not enrolled in mainstream schools or kindergartens"⁷.

11. Therefore, it is quite a paradox that the education of children with disabilities does not fall under the regular education regime and the Ministry of Education has no competence over this topic which is dealt by the Ministries of Labor and Social Affairs, and Health.

12. In addition, the education system is not effectively inclusive. Children living with disabilities are placed in boarding schools and special remedial institutions. Many public schools are not adequately equipped, including with school infrastructures such as classrooms, and pedagogical tools to accommodate these children with their specific needs.

⁴ Approved by the Presidential Decree n°1118 of 7 December 2010.

⁵ A/HRC/20/21/Add.1 (2011), § 69

⁶ Op. cit, § 6.

⁷ CRC/C/KAZ/CO/4 (2015), § 40.

There is also a deficit of trained teachers to properly provide them with disability-adapted education. As a result, many schools refuse enrolment of children with disabilities.

III. RECOMMENDATIONS

13. We recommend the Government of Kazakhstan to:

- a. Strengthen its national legal framework by ratifying the Optional Protocol to the Convention on the Rights of Persons with Disabilities, and adopt a comprehensive national strategy in accordance with articles 23 and 27 of Convention on the Rights of the Child, the General Comment n°9 (2006) of the Committee on the Rights of the Child, and the General Assembly resolution 48/96 on Standard Rules on the Equalization of Opportunities for Persons with Disabilities, so as to facilitate and sustain *inter alia* the deinstitutionalization process.
- b. Effectively implement early identification and intervention programmes for early support and care to avoid systematic institutionalization and irremediable situations.
- c. Ensure effective implementation of the quota policy, flexible curriculum, and adapted equipments, to guarantee full access to children with disabilities to public preschools, schools and kindergartens.
- d. As alternatives to institutionalisation, ensure family-based care options with adequate support services and sufficient social benefits for families to provide care at home for their children, and when institutionalisation is inevitable, place children as nearer as possible to their parents' home.
- e. Provide initial, continued and specialized training to professional staff working with or for children with disabilities, such as medical, paramedical and related personnel, teachers, social workers, and other care givers, including on innovative approaches to special education, severe disability management, and genuine stimulation methods.
- f. Establish a monitoring system, with the participation of local executive bodies and CSOs, to regularly assess the quality of services towards inclusive education and within residential institutions, including revision of placement decisions, the control of living conditions, analysis of complaints from children, and prevention of violence and deaths in residential institutions.
- g. Combat violence against children with disabilities in State-run residential institutions and schools, allow children to report abuses, and ensure that genuine child-friendly pedagogical methods are implemented.
- h. For the improvement of legislations, policies and practices, establish a comprehensive disaggregated data collection system to gather accurate statistical data on children with disabilities in Kazakhstan.

KENES, an NGO without consultative status, also shares the views expressed in this statement.
