Overview of UNCRPD Article 16 in Ireland

Freedom from exploitation, violence and abuse

April 2022



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# Background to the UNCRPD Article review papers

The National Disability Authority (NDA) are developing a series of in-depth papers on individual United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) articles. These papers detail the main data available relevant to specific Articles and provides an overview of key policies, programmes, services, supports and data that exist in the Irish context. They are not a critique of what is currently in place but rather a record of what exists. Nevertheless, there are instances where certain gaps or concerns are highlighted, including those advised by the NDA or other stakeholders.

These papers were primarily developed through desk research. However, the papers were also informed by the NDA’s own work, updates and discussions at Departmental Disability Consultative Committees, the National Disability Inclusion Strategy Steering Group, and other relevant committees. They were also informed by interactions with the Disability Stakeholders Group and with persons with disabilities, particularly through participation on a range of working and advisory groups across Government Departments on areas related to NDIS actions. Given their factual nature a more direct consultation process with persons with disabilities was not conducted. However, the NDA conducts periodic consultations on issues related to articles of the UNCRPD and seeks to include the lived experience of persons with disabilities individually and through their representative bodies in our work.[[1]](#footnote-1)

The purpose of the papers are multiple. They were developed initially to support the development of the State Party report to the UNCRPD Committee. In line with the NDA’s anticipated new statutory function under the UNCRPD, ~~t~~hey are also intended to be useful to support the development by the Irish Human Rights and Equality Commission (IHREC) of the State’s parallel report to the UNCRPD Committee. They will also be used internally as reference papers within the NDA. The NDA has published these documents on our website to make them available to a wider audience to support any work underway to develop shadow reports on implementation of UNCRPD in Ireland.

Due to the changing nature of policies, programmes, services, supports and data these reports will date and we will endeavour to update them periodically to reflect any changes. The papers are not intended to be exhaustive but seek to provide a broad overview of the main issues of relevance to each article.

Seven Articles have been reviewed to date and are available at <https://nda.ie/publications/others/uncrpd/series-of-papers-on-individual-united-nations-convention-on-the-rights-of-persons-with-disabilities-uncrpd-articles.html>

These were selected to reflect some of the main topics of concern to the stakeholders noted above and to include some of the cross-cutting issues such as children and women with disabilities. It is intended that the NDA will develop further papers during 2022 and 2023.

* Article 6, Women with disabilities
* Article 7, Children with disabilities
* Article 8, Awareness-raising
* Article 25, Health
* Article 26, Work and employment
* Article 28, Adequate Standard of Living and Social Protection
* Article 31, Statistics and Data Collection

# Introduction

This document describes the current Irish context in relation to Article 16 of the UNCRPD, freedom from exploitation, violence and abuse. The Office of the United Nations High Commissioner for Human Rights’ (OHCHR’s) illustrative indicators guided the content for Article 16.[[2]](#footnote-2) This document highlights that our understanding of the scale of the problem of exploitation, violence and abuse of people with disabilities in Ireland is hindered by a lack of national data, or data disaggregated by disability status. Due to this lack of data, the quantitative data presented in this report is complemented by qualitative data where it is available. This document outlines:

* Legislation which criminalises, protects against and prevents violence, abuse and exploitation, inclusive of people with disabilities in Ireland
* Legislation which mandates reporting of abuse against children and vulnerable adults in Ireland
* Ireland’s international obligations on exploitation, violence and abuse
* National policies to prevent, detect and combat violence, abuse and exploitation and to provide support for victims and survivors
* National procedures on school bullying and sex education curricula
* National standards for the protection and welfare of children and safeguarding of vulnerable adults
* National reporting mechanisms for concerns about abuse
* Domestic, sexual and gender-based violence services, supports and reporting in Ireland
* Awareness raising on violence, abuse and exploitation in Ireland
* Available data on violence, abuse and exploitation in Ireland, including domestic violence, sexual violence and abuse, forced genital mutilation, human trafficking and exploitative sham marriages as well as bullying of children with disabilities/chronic illnesses relative to their non-disabled counterparts
* Reports of abuse and safeguarding concerns in health and social settings and child abuse referrals to Tusla, the Child and Family Agency

# Convention text

Article 16 of the UNCRPD states that:

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 their 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 the occurrence of 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

# Type of right

The UNCRPD includes economic, social, and cultural rights, and civil and political rights. States that ratify the Convention commit themselves to immediate delivery of civil and political rights to people with disabilities, and to progressive realisation of social and economic rights. Article 16 is a civil and political right, therefore subject to immediate realisation.

# Committee on the Rights of Persons with Disabilities Concluding Observations in respect of Article 16

In 2021, the NDA reviewed a selection of Concluding Observations on State reviews made by the Committee on the Rights of Persons with Disabilities.[[3]](#footnote-3) This selection included all EU Member States, the European Union itself, as a party to the UNCRPD, and Australia, Canada, Norway and the United Kingdom[[4]](#footnote-4). The latter States were chosen due to the similarities in some areas of disability law and policy with Ireland, and to offer a sample of State Parties outside the EU. In respect to Article 16 some of the recurring points mentioned by the Committee included:

* Concern about the level of sexual and physical violence inflicted on persons with disabilities
* Insufficient data, disaggregated data or data collection mechanisms to effectively understand the level of violence and abuse of people with disabilities
* A lack of legislation or national plans aimed at protecting and preventing the violence or abuse of people with disabilities
* A lack of measures to independently monitor or to detect the level of violence and abuse inflicted by persons with disabilities, for example, in residential settings
* A lack of mechanisms for reporting violence and abuse, including accessible reporting mechanisms for those with disabilities
* Inadequate investigation of allegations of violence and abuse made by people with disabilities
* The absence of accessible supports for persons with disabilities who are victims of violence and abuse
* A lack of fully accessible shelters for victims of abuse, in terms of information on the shelters and the physical structures
* The need to strengthen awareness raising of people with disabilities, law enforcement, and other relevant stakeholders on the risk of violence and abuse of those with disabilities

Of note is that comments by the Committee focussed largely on areas of violence and abuse, and less so on the exploitation of people with disabilities.

# Perspectives of those with disabilities on exploitation, violence and abuse

A number of consultation events have been held by the NDA, the Department of Justice and Equality and the Department of Children, Equality, Disability, Integration and Youth over the last number of years to discuss the UNCRPD and Ireland’s National Disability Inclusion Strategy 2017-21 with people with disabilities, Disabled Persons Organisations (DPOs) and other representatives of the disability sector. Issues to do with exploitation, violence and abuse were not raised in these consultations, possibly to do with the sensitivity of these subjects.[[5]](#footnote-5),[[6]](#footnote-6),[[7]](#footnote-7) However, perspectives from people with disabilities in Ireland on some of these issues are available from a number of sources, and these are referred to in the document where relevant.

# Legislation and international obligations

## The Equality Acts

The Equality Acts (Equal Status Acts 2000-2018[[8]](#footnote-8) and the Employment Equality Acts 1998-2015)[[9]](#footnote-9) prohibit discrimination, harassment and sexual harassment in access to and use of goods and services and to employment on nine different grounds, including disability. These Acts are currently under review by the Minister for Children, Equality, Disability, Integration and Youth to examine their functioning and effectiveness.[[10]](#footnote-10)

## The Criminal Justice (Victims of Crime) Act 2017

The Criminal Justice (Victims of Crime) Act 2017 transposed the EU Victims of Crime Directive (2012/29/EU), establishing minimum standards on the rights, support and protection of victims of crime in Irish law. These include the right to be given clear information in the course of an investigation, and to be given translation and interpretation services where necessary. It also sets out provisions for an assessment to be made of victims by An Garda Síochána or the Ombudsman Commission to identify if they have protection needs or if special measures are needed to support them through the investigation or criminal proceedings. When carrying out such an assessment, personal characteristics of the victim, including the presence of a disability or communication difficulties, are to be taken into consideration.

## Domestic Violence Act 2018

The Domestic Violence Act 2018 was commenced in Ireland in January 2018. This Act replaced the Domestic Violence Act 1996 and the Domestic Violence (Amendment) Act 2002 and consolidated the law on domestic violence in Ireland. It improves the protections and supports afforded to victims, adds coercive control as an offence, adds forced marriage as an offence, and repeals legislation which allows under 18s in certain cases to be married. This Act only specifically refers to a person with a disability in the context of being a dependent of the applicant and/ or the respondent. Two facets of the Act may be of particular benefit to some people with disabilities, in that victims may give evidence by video link in some cases and may be accompanied in court by an individual of their choosing, including a support worker.

## Istanbul Convention

The Council of Europe Convention on preventing and combating violence against women and domestic violence, commonly known as the Istanbul Convention, was ratified by Ireland in March 2019. As per this Convention, it is the obligation of the state to fully address violence against women and domestic violence in all its forms and to take measures to prevent violence against women, protect its victims and prosecute the perpetrators. The Istanbul Convention has due regard to the UNCRPD, and it states that the implementation of the provisions of this Convention, in particular measures to protect the rights of victims, shall be secured without discrimination on any ground such as disability.

Beginning in 2022, Ireland will be subject to monitoring by GREVIO (Group of Experts on Action against Violence against Women and Domestic Violence), the independent expert body responsible for monitoring the implementation of the Istanbul Convention. A recent horizontal review by GREVIO of their baseline evaluations conducted in 17 countries found common issues across countries regarding the protection and support of women with disabilities.[[11]](#footnote-11) They noted many instances of discrimination, including the lack of effective measures to address the needs of different groups of women, including women with disabilities. Other issues pertaining to women with disabilities included:

* Problems for women with disabilities and parents of children with disabilities in reporting violence and seeking help due to inaccessible police premises, lack of training and disability awareness of law enforcement, and a lack of accessible information on available support services,
* Shortcomings in the provision of adequate social and healthcare support tailored to individual needs, including women with disabilities,
* Shortcomings in specialist support services for groups such as children and women with disabilities,
* Barriers to accessing safe accommodation for women with disabilities,
* Concerns about protection of women who lack capacity to consent including forced abortion and sterilisation,
* National policies which do not place enough focus on the needs of women facing intersectional discrimination, and
* A lack of research on violence affecting women from intersectional groups, such as women with disabilities.

IHREC, as Ireland’s National Human Rights Institution, has the role of monitoring the implementation of the Istanbul Convention in Ireland and will independently report to the GREVIO on State progress. IHREC has also identified the need for a focus **on combatting violence against** women with disabilities and on intersectionality.[[12]](#footnote-12)

## National sexual offences legislation

In Ireland, rape and sexual assault legislation is provided for in the Criminal Law (Rape) Act 1981, the Criminal Law (Rape) (Amendment) Act 1990, and the Criminal Law (Sexual Offences) Act 2017. Judges may take a victim’s disability into account as an aggravating factor when sentencing perpetrators.[[13]](#footnote-13) The Criminal Law (Rape) (Amendment) Act 1990 removed exemptions to criminalisation for husbands who raped their wives. The Criminal Law (Sexual Offences) Act 2017 added new legislation on the abuse and exploitation of children, including grooming activities. It also added an offence of engaging in a sexual act with a ‘protected’ person. A protected person is defined in the legislation as: “a person lacks the capacity to consent to a sexual act if he or she is, by reason of a mental or intellectual disability or a mental illness, incapable of: (a) Understanding the nature, or the reasonably foreseeable consequences, of the act, (b) Evaluating relevant information for the purpose of deciding whether or not to engage in that act, or (c) Communicating his or her consent to that act by speech, sign language or otherwise.” Another new offence was that of engaging in a sexual act with a ‘relevant’ person by a person in authority, where a relevant person is: “a person who has (a) a mental or intellectual disability, or (b) a mental illness, which is of such a nature or degree as to severely restrict the ability of the person to guard himself or herself against serious exploitation.”

A recent review of protections for vulnerable witnesses in the investigation and prosecution of sexual offences in Ireland made over 50 recommendations to improve the experiences of such witnesses.[[14]](#footnote-14) A ‘vulnerable witness’ (including defendants) were those considered vulnerable due to age, disability, due to the nature of the offence/alleged offence and their overall circumstances. Recommendations from this review, the O’Malley Review, included the provision of intermediaries to facilitate communication between vulnerable witness and others in the justice system and specialist training for those in the justice system working on sexual offences, including the questioning of witnesses with disabilities. The NDA published an independent advice paper in June 2020 on the use of intermediaries in the Irish justice system[[15]](#footnote-15), and the recommendations included in this paper align with the recommendations subsequently made in the O’Malley Review.

The Department of Justice drafted an implementation plan and established three subgroups to progress the recommendations made in this report. One subgroup was tasked with reviewing the supports and funding of civil society organisations providing frontline services/mapping the journey that faces the victim. This exercise identified a) geographical areas and b) categories of victims which represent gaps or unmet needs in the current provision of these support services for victims of crime within the criminal justice system (within the parameters of the objectives of the Victims of Crime grant scheme). A second subgroup was tasked with planning for the use of intermediaries and establishment of a pilot. The NDA sits on this subgroup. An academic consultant, with the support of the subgroup, has been tasked with developing the framework for the operation and training of intermediaries and will engage with stakeholders in development of such. Development of the course content and university accreditation is currently underway. The third subgroup has been tasked with developing an approach to meeting training needs of a wide range of front-line staff and professionals, including legal professionals.The Department has engaged a consultant to conduct a mapping exercise to establish what training is already being provided, and in what areas. Following this mapping exercise, evaluation of the effectiveness of current training provision. Once these first two stages are complete, measures will be put forward as to meet the needs and gaps identified.

## National human trafficking legislation

The legislation in Ireland dealing with human trafficking includes the Criminal Law (Human Trafficking) Act 2009 and the Criminal Law (Human Trafficking) (Amendment) Act 2013. The legislation makes it an offence to traffic children or adults for sexual or labour exploitation, forced criminality, forced begging or the removal of their organs.[[16]](#footnote-16) People with disabilities are not explicitly mentioned in this legislation.

## UN Convention on the Elimination of all Forms of Discrimination against Women

The UN Convention on the Elimination of all Forms of Discrimination against Women (CEDAW) is an international treaty on the protection of human rights of women and girls, which defines discrimination against women, and lists what states need to do to end discrimination. Ireland signed and ratified CEDAW in 1985. A review of Ireland’s record under CEDAW was undertaken by the UN’s CEDAW Committee in 2017.[[17]](#footnote-17) From this review, the Committee recommended that Ireland take measures to collect data that could be disaggregated by sex, gender, ethnicity, disability and age, in order to inform policy and programmes on women and girls, as well as assist in tracking progress in the achievement of the Sustainable Development Goals. In 2020, the CEDAW Committee adopted a new General Recommendation on Trafficking of Women and Girls in the Context of Global Migration.[[18]](#footnote-18) This recommendation notes that women and girls most vulnerable to trafficking include those with disabilities.

## Protocol to Prevent, Suppress and Punish Trafficking in Persons Especially Women and Children

In 2010, Ireland ratified the Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially Women and Children, which supplements the UN Convention against Transnational Organized Crime (the Trafficking Protocol). This protocol commits Ireland to prevent and combat human trafficking, protect and support victims of trafficking and cooperate with other states against trafficking.

## Council of Europe Convention on Action against Trafficking in Human Beings

In 2010, Ireland also ratified the Council of Europe Convention on Action against Trafficking in Human Beings. This also commits Ireland to prevent and combat all forms of human trafficking, to protect and support victims and witnesses of trafficking, to effectively investigate and prosecute human trafficking and to co-operate internationally in efforts against human trafficking.

## Human Rights Council’s Universal Period Review

Ireland has recently undergone its third Universal Period Review, a process whereby all UN Member States review the human rights records of other states. Many of the recommendations from other countries in the 2016 review were for Ireland to ratify the UNCRPD.[[19]](#footnote-19) In its submission to the 2021 review, IHREC recommended that Ireland ensure services for victims of violence are not limited by geography or disability access.[[20]](#footnote-20) It noted that there were particularly limited support services available in rural locations. The Committee against Torture noted its concern of reports likening residential care settings for older persons and other vulnerable adults to detention centres and recommended that allegations of ill-treatment in residential care settings be effectively investigated, perpetrators prosecuted, and victims provided with redress.[[21]](#footnote-21) The final reports for the 2021 review are not yet available.[[22]](#footnote-22)

## Criminal Justice (Female Genital Mutilation) Act 2012

The Criminal Justice (Female Genital Mutilation) Act 2012 makes it a criminal offence to engage in, or attempt to engage in genital mutilation of a girl or woman, or to remove or attempt to remove a girl or woman from Ireland for the purpose of mutilating her genitals elsewhere.

## National hate crime legislation

At the time of writing, there is no Irish legislation in place to prohibit incitement to discrimination, hostility and violence and hate speech that explicitly includes disability as a protected ground. The Prohibition of Incitement to Hatred Act 1989 deals with hate-based offences in Ireland but disability is not one of the grounds covered. However, the General Scheme of the Criminal Justice (Hate Crime) Bill 2021 was published in April 2021 and in this forthcoming hate crime legislation, disability is considered a protected characteristic.

## Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012

The Criminal Justice (Withholding of Information on Offences against Children and Vulnerable Persons) Act 2012 creates a criminal offence of withholding information relating to the commission of a serious offence, including a sexual offence, against a person under 18 years and vulnerable adults, including those with a disability.

## National safeguarding legislation

The Adult Safeguarding Bill 2017 was introduced as a Private Member’s Bill to Seanad Éireann in 2017. This Bill proposes a rights-based regulatory framework for adult safeguarding as well as protections and supports for adults who are unable to protect themselves or who might be at risk of exploitation or abuse. Although this Bill made some progress, it was eventually agreed by the Joint Oireachtas Committee on Health that it required further research.[[23]](#footnote-23) This research was undertaken by the Law Reform Commission in their Issues Paper on A Regulatory Framework for Adult Safeguarding, which was followed by a public consultation.[[24]](#footnote-24) Law Reform Commission is currently finalising a report on this project, informed by the submissions it received.[[25]](#footnote-25) At present, the Department of Health is developing a national policy on adult safeguarding in the health and social care sector and it is intended that this policy will be underpinned by legislation, but the timeline for this is unclear.[[26]](#footnote-26)

## National corporal punishment legislation

The 1996 Offences Against the Person (Non Fatal) Act included provisions to make corporal punishment in schools illegal. The Children First Act 2015 then explicitly repealed the common law defence of ‘reasonable chastisement’ of children, making corporal punishment unlawful in all settings, including the home.

## Child and Family Agency Act 2013

The 2013 Act provided for the establishment of the Child and Family Agency, named Tusla. The 2013 Act vests statutory responsibility for the provision of specified child and family services in the Child and Family Agency, including to manage and deliver or arrange to have delivered on its behalf, services to support and promote the development, welfare and protection of children; and to support and encourage the effective functioning of families. The Child and Family Agency’s services include a range of universal and targeted services including child protection and welfare services and domestic, sexual and gender-based violence services.

## Child Care Act 1991

The Child Care Act 1991as amended is a wide-ranging piece of legislation which seeks to promote the welfare of children who may not receive adequate care and protection. The legislation includes:

* the promotion of welfare of children, including the relevant functions of Tusla, the Child and Family Agency
* protection of children in emergencies, including section 12 which governs the powers of An Garda Síochána to take a child to safety,
* care proceedings, and
* children in need of special care or protection.

A review of the Child Care Act 1991 is ongoing.[[27]](#footnote-27)

## Children First Act 2015

The Children First Act 2015 introduced statutory obligations for professionals and organisations who provide a service to children and families to report to Tusla where there are reasonable grounds to suspect that a child has been harmed, is being harmed or is at risk of being harmed.

## National Vetting Bureau (Children and Vulnerable Persons) Act 2012

The National Vetting Bureau (Children and Vulnerable Persons) Act 2012 provides a statutory basis for the vetting of persons carrying out relevant work with children or vulnerable persons, including persons with a disability.

## **The Irish Human Rights and Equality Commission Act, 2014**

The Irish Human Rights and Equality Commission Act, 2014 (Section 42) established a Public Sector Equality and Human Rights Duty. This places a statutory obligation on all public bodies in Ireland to promote equality, prevent discrimination and protect the human rights of their employees, customers, service users and those affected by their policies and plans. IHREC has a role in holding public bodies to account under this Duty.[[28]](#footnote-28)

## Assisted Decision Making (Capacity) Act 2015

The Assisted Decision Making (Capacity) Act 2015, when fully commenced in mid-2022, will put in in place safeguards to protect against exploitation of people whose capacity may be in question, by putting in place explicit, enumerated offences around coercion and duress. It should ensure that information and options regarding decisions will be provided to people in a way they understand, so that they cannot be exploited in respect of the two classes of decision covered by the legislation: personal welfare decisions and property and affairs decisions. Personal welfare decisions include decisions around accommodation, employment, education, training, social activities, social services, healthcare and well-being. Property and affairs decisions include decisions relating to property, business, contracts, debts, taxes, benefits and finances. A specific concern of Article 16 that falls under ‘personal welfare decisions’ is forced contraception, and this Act should offer protections to protect people with disabilities from forced contraception, in that a person will have a presumption of capacity in relation to making a decision about his/her contraceptive choices. Where a person lacks capacity to make such a decision, another person with legal authority to make the decision must ascertain and give due consideration to the person’s will and preferences, and beliefs and values in respect of the decision in question. To date there has been no such protection in place in Ireland.

A specific concern of Article 16 that falls under ‘property and affairs decision’ is financial abuse. The legislation will introduce strict parameters around who may access and make decisions in respect of a person’s finances, if they lack the capacity to do so themselves. Persons with legal authority to make financial decisions on behalf of a person will be required to submit regular reports and updates to the Decision Support Service, and may be investigated if there is any suspicion or allegation of abuse or negligence.

## Protection of liberty legislation

Responsibility for developing a new legislative basis for Protection of Liberty safeguards rests with the Department of Health. In 2018, consultation was carried out on the Heads of Bill, with a consultation report published in 2019.[[29]](#footnote-29) However, in Quarter 4 of 2019, the Department of Health informed stakeholders that it was continuing to refine the draft Heads and was working to resolve complicated policy issues that had arisen, both in the consultation and in the Supreme Court case, “AC”. In Q4 2019, the Department held a workshop, aimed at identifying types of deprivations of liberty. Unfortunately, in 2020, much of the Protection of Liberty safeguards team was redeployed to various units to assist with the response to the Covid-19 pandemic. Until such safeguards are put in place, a challenge remains to Ireland’s realisation of UNCRPD Article 14 (Liberty and Security).The repercussions of this may give rise to instances of exploitation, violence and abuse, for example in the continued use of chemical restraints to manage behaviour. This issue will be addressed in more detail in the NDA’s ‘Overview of UNCRPD Article 14 in Ireland’, forthcoming in 2022.

## Dying with Dignity Bill 2020

The Dying with Dignity Bill 2020 is a Private Member’s Bill that sought to make provision for assisted dying to those suffering from terminal illness, in order to help them achieve a dignified and peaceful end of life. While this Bill made some progress through the Houses of the Oireachtas, in 2021 the Joint Committee on Justice noted a number of concerns with the Bill, including a ‘lack of sufficient safeguards to protect against undue pressure being put on vulnerable people to avail of assisted dying’.[[30]](#footnote-30) Instead of progressing this Bill, the Committee recommended that an Oireachtas Special Committee be established to undertake an examination on the topic of assisted dying.

# Policies, strategies, standards, regulation and reporting

## National strategies on domestic, sexual and gender-based violence

Ireland is in the process of developing a third National Strategy on Domestic, Sexual and Gender-based Violence. The first strategy spanned 2010-2014 and strongly acknowledged that some groups, including those with disabilities, could be at increased risk of domestic and sexual violence[[31]](#footnote-31). Actions in this Strategy of particular relevance to those with disabilities included suitable service responses to particular groups of victims (in mainstream services) and ensuring the dissemination of accessible and consistent information on domestic and sexual violence by state bodies.

The second Strategy spanned 2016-2021 and a main action in this was the establishment of a gold standard of data collection and analysis, meaning agencies working in the area of domestic and sexual violence could disaggregate their data by key variables, including disability and other important variables such as age, sex and ethnicity.[[32]](#footnote-32) Other general actions included awareness raising, improving services for victims and holding perpetrators to account. A mid-term review of this second strategy took place in 2019 but does not appear to be publicly available at this time. There is a final review of the strategy underway.[[33]](#footnote-33) A recent audit of domestic, sexual, and gender-based violence services in Ireland commissioned by the Department of Justice, in consultation with the Department of Children, Equality, Disability, Integration and Youth reported that there had been good progress in Ireland in the areas of prevention and public awareness, although a sub-group set up to progress the gold standard data collection action in the second Strategy was said to have stalled.[[34]](#footnote-34) Stakeholders in this audit criticised the previous two strategies for not paying enough attention to marginalised groups. In their submission to the third national strategy, the Disabled Women’s Group from the National Women’s Council of Ireland (NWCI) noted that “the experiences and voice of disabled women has been notably lacking in both the preceding strategies and in their implementation and monitoring.”[[35]](#footnote-35)

## National action plans to prevent and combat human trafficking

An Anti-Human Trafficking Unit was set up in the Department of Justice and Equality in 2008. The firstNational Action Plan to Prevent and Combat Trafficking of Human Beings[[36]](#footnote-36) in Ireland was published in 2009and covered 2009-2012*.* This plan aimed to protect the human rights of trafficking victims and set out a framework of victim supports. The second national action plan to Prevent and Combat Human Trafficking in Ireland was published in 2016.[[37]](#footnote-37) This plan takes into account national and international reviews of Ireland’s progress with regard to human trafficking. It covers prevention, protection, prosecution, criminal justice response, partnership, response to child trafficking, and monitoring and evaluation. These plans do not refer specifically to people with disabilities.

The Group of Experts on Action against Trafficking in Human Beings (GRETA) have monitored Ireland’s progress on the implementation of the Council of Europe’s Convention on Action against Trafficking in Human Beings twice since 2013[[38]](#footnote-38) [[39]](#footnote-39). In its most recent evaluation, it reports positive progress such as awareness raising, a comprehensive national plan and the establishment of the Human Trafficking Investigation and Co-ordination Unit (HTICU) within the Garda National Protective Services Bureau.[[40]](#footnote-40) Areas needing improvement include prosecution and sanctions for those engaging in human trafficking, better identification of victims and the increase in trafficking for the purposes of labour exploitation. An assessment by the US State Department in 2020 on Ireland’s measures to combat human trafficking downgraded Ireland to its Tier 2 Watch List.[[41]](#footnote-41) Their reported reasons for this included issues with prosecuting perpetrators and victim identification, referral, assistance and support.

### National Referral Mechanism

At present, An Garda Síochána refer suspected human trafficking victims to the National Referral Mechanism, where they are provided with services and supports from the government and non-governmental organisations (NGOs). The issue with this approach is that not all victims will feel comfortable approaching law enforcement. In May 2021, the Government approved plans for a revised National Referral Mechanism, whereby other government bodies and NGOs will have a role in identifying human trafficking victims and referring them to the National Referral Mechanism.[[42]](#footnote-42) However, it is not clear when this revised mechanism will be implemented.

## The HSE Safeguarding Vulnerable Persons at Risk of Abuse - National Policy and Procedures

In 2014, the HSE published the Safeguarding Vulnerable Persons at Risk of Abuse - National Policy and Procedures, which apply to all HSE and HSE-funded social care services.[[43]](#footnote-43) Please see Figure 1 which illustrates the legislation, policies, standards and bodies responsible for adult safeguarding in Ireland. This policy considers a ‘vulnerable person’ as “an adult who may be restricted in capacity to guard himself/herself against harm or exploitation or to report such harm or exploitation.” This restriction in capacity may be physical or intellectual. This policy outlines principles to promote the welfare of vulnerable people and to safeguard them from abuse. The varied nature of abuse is considered and includes physical, sexual, psychological, financial or material, institutional, neglect or acts of omission, and discriminatory abuse. This policy is currently being revised and the intention is to broaden its scope to all HSE and HSE-funded social care and healthcare services.[[44]](#footnote-44)

### HSE National Safeguarding Office

A National Safeguarding Office was established in December 2015 to oversee the implementation, monitoring, review and evaluation of the Safeguarding Vulnerable Persons at Risk of Abuse policy, and to co-ordinate the development and implementation of safeguarding training.[[45]](#footnote-45) Since 2015, safeguarding training has been completed over 100,000 times.[[46]](#footnote-46)

### Safeguarding Ireland

While the HSE National Safeguarding Office was established to be responsible for the operational side of safeguarding, Safeguarding Ireland was also established as an NGO in 2015 with a focus on promoting the safeguarding of adults who may be vulnerable, protect them from all forms of abuse by persons, organisations and institutions. Safeguarding Ireland is HSE-funded and its aims are to promote collaboration, increase public and professional awareness on adult safeguarding, and conduct research to inform policy, practice and legislation.[[47]](#footnote-47)

### Confidential Recipient

In 2015, the HSE appointed an independent ‘Confidential Recipient’ to receive concerns and allegations of abuse, negligence, mistreatment or poor care practices in HSE or HSE funded residential care facilities from patients, service users, families, staff or other concerned individuals.[[48]](#footnote-48) The Confidential Recipient can direct concerns to the appropriate HSE National Director for further action. A concern will not be closed until the Confidential Recipient is satisfied it has been thoroughly investigated and appropriately addressed.

## National Standards for Adult Safeguarding in Health and Social Care Services

The Health Information and Quality Authority (HIQA) and Mental Health Commission (MHC) launched National Standards for Adult Safeguarding in Health and Social Care Services in 2019[[49]](#footnote-49). These standards are focussed on reducing the risk of harm and promoting the health, wellbeing and rights of each person, including the right to live free from abuse and exploitation. There is a responsibility on all residential services for older people and people with disabilities and all publicly-funded health and social care services, including mental health services, to implement these national standards. While HIQA have a remit to inspect services on these standards if they wish, the purpose of the standards in the first instance is to assist services in improving practice and reducing potential harm.[[50]](#footnote-50) The MHC will use their existing quality and judgement support frameworks to monitor the implementation of these standards.[[51]](#footnote-51)

## Statutory monitoring of services by HIQA and MHC

HIQA is an independent statutory body, and part of its mandate is to monitor health and social care services, including centres for adults and children with disabilities. The Disability inspection teams talk to residents and families as well as service providers as part of their inspections.[[52]](#footnote-52) HIQA’s 2020 annual report on inspections of disability settings found that 93% of services were compliant or substantially compliant with safeguarding regulations.[[53]](#footnote-53) This differed according to the type of setting, with 88.1% of congregated settings being compliant or substantially compliant in safeguarding vs 93.8% in non-congregated settings. The MHC is also mandated to inspect mental health services. At the time of writing, there does not appear to be any reports published by the MHC relating to monitoring of safeguarding in mental health settings. Both bodies publish their inspection reports on their websites[[54]](#footnote-54) [[55]](#footnote-55).

## National safeguarding policy for health and social care sector

At the time of writing, the Department of Health is developing a national policy on adult safeguarding in the health and social care sector.[[56]](#footnote-56) This will apply to all public, voluntary, and private health and social care settings. Focus groups on the development of this policy have taken place with a range of service users including those who have experienced significant mental health challenges, those with intellectual disability, with dementia, acquired brain injury, and nursing home residents.

Figure 1. Legislation, policies, standards and bodies responsible for adult safeguarding in Ireland



## Children First: National Guidance for the Protection and Welfare of Children, 2017

Children First: National Guidance for the Protection and Welfare of Children 2017[[57]](#footnote-57) is a national policy document to help people to identify and report child abuse. It also outlines the statutory responsibilities of mandated persons and organisations under the Children First Act 2015. Children with disabilities are considered to be at increased vulnerability to abuse under Children First. Please see Figure 2 which illustrates the legislation, policies, standards and bodies responsible for child safeguarding in Ireland.

## National Standards for the Protection and Welfare of Children

The National Standards for the Protection and Welfare of Children[[58]](#footnote-58) assess the performance of Tusla in relation to its statutory functions to provide adequate care and protection to children, and under Children First. The Standards also guide Tusla’s response to child protection concerns and how these concerns are managed. The Standards require that “[c]hildren are listened to and their concerns and complaints are responded to openly and effectively”.[[59]](#footnote-59)

Children with disabilities are mentioned in a number of areas in these standards. Specifically that services should ensure children and families are not discriminated against according to disability when accessing services (Standard 2.4.3), services should respect those children with a disability (Standard 1.1.4) and that the service works with others to raise awareness about and promote the safety and protection of children with disabilities (Standard 2.12.1).

Figure 2. Legislation, policies, standards and bodies responsible for child safeguarding in Ireland



## Child Protection Procedures for Primary and Post-Primary Schools

The 2017 Child Protection Procedures for Primary and Post-Primary Schools[[60]](#footnote-60) provide guidance to schools on their statutory obligations under the Children First Act and Children First. According to these procedures, all primary schools are required to deliver the ‘Stay Safe’ programme[[61]](#footnote-61), which aims to equip children with the skills to recognise and resist abuse or potentially abusive situations. It is unclear if this programme is delivered in accessible and appropriate ways for learners with disabilities.

## Bullying policy for schools

The national Anti-Bullying Procedures for Primary and Post-Primary Schools[[62]](#footnote-62) gives guidance to schools on preventing and addressing school-based bullying. These guidelines refer to the potential vulnerability of different types of students to bullying, including those with disabilities and also includes identity-based bullying (e.g., bullying because of disability) in their definition of bullying.

## Sex education in schools

In primary school, one of the aims of Social, Personal and Health Education is to help children develop a sense of safety and ability to protect themselves from danger or abuse.[[63]](#footnote-63) In secondary school, students are taught about personal safety, including personal security in the context of relationships in Junior Cycle[[64]](#footnote-64) and in Senior Cycle, there is an explicit focus on sexual harassment, assault and rape.[[65]](#footnote-65) The area of consent is vital when considering sexual violence, but it is not explicitly mentioned in these curricula. However, in a 2019 report, students, parents, teachers and principals all indicated the importance of teaching children and young people about consent.[[66]](#footnote-66)

The National Council for Special Education runs tailored courses for teachers regarding Relationships and Sexuality Education (RSE) for students with special education needs and the Professional Development Service for Teachers has compiled a list of Special Needs Resources for RSE.[[67]](#footnote-67) The National Council for Curriculum and Assessment (NCCA) drafted ‘Guidelines for Teachers of Students With General Learning Disabilities’, which contain guidance on teaching SPHE to students with mild general learning disabilities at primary and post-primary level, and to students with moderate, severe and profound general learning disabilities.[[68]](#footnote-68)

Due to a lack of information and data, we are not aware of the extent to which children with disabilities and/or special education needs are getting access to appropriately adapted RSE in schools. One practical issue is that because all special schools in Ireland are primary schools (even though pupils can be up to 18 years old), those in special schools would not typically be exposed to the post-primary RSE. In 2018, the NCCA were tasked by the Minster for Education at the time to conduct a review of the primary and post-primary relationships and sexuality curriculum to “ensure that it is fit for purpose and meets the needs of young people today in modern Ireland”.[[69]](#footnote-69) The report highlighted RSE for students with special education needs as a concern as part of their review. The review found RSE for children with special education needs is often only looked at from a safety perspective and that at times children with special education needs may be withdrawn for resource hours when SPHE is being taught. This report recommended the development of a new single, integrated curriculum across primary and post-primary school, and work on this will begin in approximately late 2021.[[70]](#footnote-70)

## Framework for Consent in Higher Education Institutions

In 2019, the Department of Education and Skills at the time launched the Framework for Consent in Higher Educations Institutions (HEIs): Safe, Respectful, Supportive and Positive: Ending Sexual Harassment in Irish Higher Education Institutions.[[71]](#footnote-71) Since 2020, the HEA Centre of Excellence for Equality, Diversity and Inclusion has been working with institutions and representative bodies to support implementation of this Framework and HEIs have to report on implementation progress to the HEA. Some of the achievements to date include the roll out of online consent training and online bystander intervention training and the development of an Anonymous Reporting Tool for issues of bullying, harassment, and sexual harassment in HEIs.

In 2021, the Department of Justice and the Department of Further and Higher Education, Research, Innovation and Science, in partnership with NUI Galway, launched a new online learning hub on sexual consent for third level education.[[72]](#footnote-72) This hub will include resources and training on sexual consent for students and staff.

# Services and support organisations

## Provision of domestic, sexual and gender based violence services

In Ireland, Tusla, the Child and Family Agency are responsible for funding and delivery of domestic, sexual and gender based violence (DSGBV) services, with the exception of Sexual Assault Treatment Units which are based in health services. DSGBV services are provided by Tusla or by NGOs commissioned by Tusla such as the Rape Crisis Network, Women’s Aid, Men’s Development Network, and Men’s Aid. A recent audit of the DSGBV landscape in Ireland with relevant government bodies and NGOs reported a range of issues with DSGBV policies, services and structures.[[73]](#footnote-73) These include insufficient resources for services, the insecurity and limitations of annual funding cycles for NGOs, a lack of national, standardised data, insufficient numbers of refuges, issues with the quality of some refuges, no accommodation for male victims of domestic violence, a lack of cross-governmental working and in general a fragmented service. Stakeholders gave suggestions around what is needed for the future, and of relevance to this Article, was a suggestion for “Better public information in accessible languages and formats for a range of needs about available services and how to access them”.[[74]](#footnote-74)

## Other relevant NGOs, organisations and charities

There are many other services nationally which support those experiencing exploitation, violence and abuse, for example, the Sexual Violence Centre Cork[[75]](#footnote-75), One in Four[[76]](#footnote-76) and local and regional domestic violence support services and refuges. Ruhama[[77]](#footnote-77) works with women affected by prostitution and other forms of commercial sexual exploitation and AkiDwA[[78]](#footnote-78) highlights the issues faced by migrant women in Ireland, including female genital mutilation. The National Advocacy Service[[79]](#footnote-79) is an advocacy service to adults with a disability, particularly those in vulnerable situations and Sage Advocacy[[80]](#footnote-80) is a support and advocacy service for vulnerable adults, older people and healthcare patients. There are general support services for children including Childline[[81]](#footnote-81) and Teenline[[82]](#footnote-82) (both ISPCC), Jigsaw[[83]](#footnote-83), Turn2me Youth[[84]](#footnote-84) and spunout.ie[[85]](#footnote-85) which provides information for young people on identifying abuse and seeking help. This is not an exhaustive description of the services in Ireland that support those experiencing exploitation, violence and abuse.

## Hotlines and reporting mechanisms

There is no readily available national data on the accessibility of hotlines and reporting mechanisms for children or adults seeking assistance or making complaints of violence, abuse and exploitation. Accessible hotlines and reporting mechanisms would include for example, websites that work with screen readers, content that is available in Plain English and Easy to Read format, videos with captions, ISL content and availability of ways for children and adults who communicate via ISL to seek assistance or make complaints. One example of good practice is the provision of content through ISL by Women’s Aid.[[86]](#footnote-86) Deaf members of the NWCI have reported concerns about how they would be able to report abuse and communicate with An Garda Síochána.[[87]](#footnote-87)

## Social services and supports

There is no readily available national data on the accessibility of the physical environment of social services and supports for victims of violence in Ireland. There is also no data on how accessible the communication is about these services and supports.

## Shelters, refuges and other accommodation for victims of violence

Although refuges are available in Ireland for women and children leaving domestic violence in the home, there are not enough spaces to meet demand, and one third of counties do not have a refuge.[[88]](#footnote-88) A 2021 WAVE report (Women Against Violence Europe) found that Ireland was one of four EU member states with ‘critically low provision’ of refuge beds, with 72% of the recommended minimum number of refuge beds missing.[[89]](#footnote-89) There is no readily available national data on the accessibility of the physical environment of shelters, refuges and other accommodation for victims of violence in Ireland. There is also no data on how accessible the communication is about these accommodations. In their submission to the third National Strategy on Domestic, Sexual and Gender-Based Violence, the Disabled Women Group of the NWCI stated that “refuges are not universally accessible to disabled women and often they cannot meet the diverse needs of disabled women.”[[90]](#footnote-90) Furthermore, in a statement to the Joint Oireachtas Committee on Disability Matters in 2021, Amy Hassett from Disabled Women Ireland stated that “a significant proportion of gender-based services in Ireland are not accessible to disabled women, including intimate partner violence supports.”[[91]](#footnote-91) If such services are not all accessible for disabled women, it is assumed the same is true for disabled children. It is important to note that men with disabilities currently have no access to refuge in Ireland as there are none in existence for men fleeing domestic violence.

## Awareness raising and activities to eradicate violence, abuse, exploitation and harmful practices

In 2017, a national public awareness campaign by the National Safeguarding Committee[[92]](#footnote-92) took place to increase public understanding of the abuse or neglect of vulnerable adults, with one phase of the campaign focussing solely on financial abuse.[[93]](#footnote-93) Recently there have been a number of national awareness raising campaigns on violence, abuse and exploitation. This includes for example, the Department of Justice’s ‘Still Here’ campaign[[94]](#footnote-94) on domestic violence and their’ Get the Full Picture’ campaign[[95]](#footnote-95) with Ruhama on human trafficking for sexual exploitation, and Women’s Aid award winning “Too Into You”[[96]](#footnote-96) campaign on intimate relationship abuse against young women. None of these recent campaigns specifically represented violence, abuse or exploitation against people with disabilities. The ‘Still Here’ campaign did have a webpage dedicated to people with disabilities but was not directed specifically at disabled people and instead focussed on safeguarding. The Disabled Women’s Group of the NWCI have stated that they “believe strongly that there is little to no awareness of the forms of violence disabled women experience”.[[97]](#footnote-97)

# National data on exploitation, violence and abuse of people with disabilities

As previously noted, a key output from Ireland’s Second National Strategy on Domestic, Sexual and Gender-Based Violence was supposed to be the establishment of a bottom line ‘gold standard’ of data collection and analysis of domestic and sexual violence by different government departments and relevant bodies/agencies. There is no evidence available to suggest significant progress on this work. However, this gold standard data collection would fill many of the gaps in our knowledge of the violence, exploitation and abuse of people with disabilities in Ireland. In the meantime, the Minister of State with Special Responsibility for Disability, Anne Rabbitte, announced that research would be conducted into gender-based violence against people with disabilities in 2022 and the CSO are developing a new national survey on the prevalence of sexual violence in Ireland, also to take place in 2022. This survey will include a variable to identify whether a participant has a disability and should help to fill gaps in our knowledge of the sexual violence and abuse experienced by people with disabilities.

## Historical abuse in Ireland

Ireland has had a troubling history of clerical abuse[[98]](#footnote-98) [[99]](#footnote-99) and institutional exploitation, violence and abuse, particularly of women and children, and including women and children with disabilities. It is beyond the scope of this report to provide a full summary of this history. This means what is referenced below does not cover the full scale, detail, or extent of this exploitation, violence and abuse. Findings from a number of Commissions are outlined below but please note they do not include all institutions where survivors have reported similar abuses.

### The Commission to Inquire into Child Abuse 2009

The Commission to Inquire into Child Abuse received reports from 1,090 men and women who reported being abused as children in 216 Irish institutions run by religious congregations between the years of 1936 and the time of the investigation (the investigation took place between 2000 and 2009).[[100]](#footnote-100) These institutions were mostly Industrial and Reformatory Schools[[101]](#footnote-101), but they also included day and residential special needs schools. Physical abuse, emotional abuse and neglect were common elements of these institutions and sexual abuse happened in many of them, particularly boy’s institutions. With regard to children with disabilities, an excerpt from this report states:

Children with learning disability, physical and sensory impairments and children who had no known family contact were especially vulnerable in institutional settings. They described being powerless against adults who abused them, especially when those adults were in positions of authority and trust. Impaired mobility and communication deficits made it impossible to inform others of their abuse or to resist it. Children who were unable to hear, see, speak, move or adequately express themselves were at a complete disadvantage in environments that did not recognise or facilitate their right to be heard.

### Report on the Irish State’s involvement in the Magdalen Laundries (2013)

An investigation into the Irish State’s involvement with the Magdalen Laundries found that approximately 10,000 girls and women were sent to work in religious-run Magdalen laundries between 1922 and 1996. The last laundry closed in 1996.[[102]](#footnote-102) Girls and women were sent from a number of places, including from the criminal justice system, Industrial or Reformatory schools, the health and social services sector, and Mother and Baby homes.[[103]](#footnote-103) They were required to work in the laundries for no wages. There is reported to have been widespread verbal and mental abuse in these institutions and the work girls and women were doing was described as ‘harsh and physically demanding’. It is also reported that there was a lack of information given to girls and women as to why they were in these institutions, and how long they would be there. Some of these girls and women had mental or physical disabilities that meant they were unable to live independently, or they had psychiatric illnesses. There are reports of girls or women with disabilities being sent to the laundries by the health authority at the time, as it was more cost-efficient than directly providing their care in health facilities.

### The Mother and Baby Homes Commission of Investigation 2021

The Mother and Baby Homes Commission of Investigation found that between 1922 and 1998, ‘about 56,000 unmarried mothers and about 57,000 children were in the mother and baby homes and county homes investigated by the Commission’.[[104]](#footnote-104) It is estimated that there were a further 25,000 unmarried mothers and more children in the county homes not included in the Commission’s investigation. These girls and women went to or were sent to these institutions to give birth because their family or the father of the baby refused to support them. Living conditions in some of the homes were poor, many of the women suffered emotional abuse, and there were extremely high rates of infant mortality in Irish mother and baby homes. While some mothers did leave the homes with their babies, before the availability of legal adoption in 1953, children leaving the institutions were often sent to foster parents by the local authority or were placed in other institutions. From the 1960s, most women placed their child for adoption-this fell to 37% of all ‘illegitimate births’ in 1980 and to less than 9% in 1990 as homes closed down and society changed. Some survivors gave evidence to the Commission to say their consent to put their child up for adoption was not full, free or informed. There is evidence to suggest that if a mother had a mental illness or a child had an intellectual disability that adoption was prevented or delayed. This would have resulted in children being sent to Industrial schools instead. There appears to have been a ‘flow of disabled people’ moving from one type of institution to another, between mother and baby homes, county homes, psychiatric hospitals, Magdalen laundries, Industrial schools and disability services.[[105]](#footnote-105) County homes housed women and children with special needs and mental health problems. The commission’s report states:

The accommodation and care given to these children [with special needs] in county homes was grossly inadequate; some of the descriptions are extremely distressing.

In the course of their investigation the Commission did not hear from anyone with a disability[[106]](#footnote-106) and they did not engage with any disability bodies[[107]](#footnote-107) meaning the experiences of people with disabilities, who, according to the Commission , were “probably the most badly affected by being in institutions”, is missing.

The Irish State has apologised to survivors of institutional child abuse[[108]](#footnote-108), the Magdalen laundries[[109]](#footnote-109) and the Mother and Baby homes[[110]](#footnote-110). While, there are redress schemes in place for survivors, these have been heavily criticised at times.[[111]](#footnote-111) [[112]](#footnote-112) [[113]](#footnote-113) [[114]](#footnote-114)

## Crime and victimisation data

### National administrative data

It is generally considered that people with disabilities are at a greater risk of being victims of a crime[[115]](#footnote-115). Unfortunately, data published by the Central Statistics Office (CSO) on crime victims using data from An Garda Síochána is not disaggregated by disability status. In addition, due to issues with the quality of data collected by An Garda Síochána, these data do not meet the standard required to be considered national statistics.

Furthermore, at present there is no systematic data available on District or Circuit Court cases in which to examine the disability status of crime victims. However, a focus on data in An Garda Síochána’s Diversity and Integration Strategy 2019-2021[[116]](#footnote-116) and the planned development of a Criminal Justice Operational Hub[[117]](#footnote-117) will hopefully ensure variables like a crime victim’s disability status will be routinely collected and reported on in the future.

### CSO crime and victimisation surveys

The CSO have conducted crime and victimisation household surveys in 1998, 2003, 2006, 2010 and 2015 and 2019.[[118]](#footnote-118) These surveys do not ask about sexual violence or domestic violence as they are deemed too sensitive to include in a household survey. Reports have not included any data on whether respondents have a disability.

### National consultation on hate crime and hate speech

In 2019 and 2020 the Department of Justice conducted a public consultation on legislating for hate speech and hate crime in Ireland. [[119]](#footnote-119) People with disabilities participated in this consultation. According to this consultation, there were reports of “ill-treatment and abuse on grounds of all kinds of disability, from physical disability, to mental disability and mental illness. Individuals with disabilities and mental illness gave compelling descriptions of the types of hate they have been faced with because of their disability.”[[120]](#footnote-120)

## Sexual violence data

### National sexual violence surveys 2002 and 2022

The 2002 Sexual Abuse and Violence in Ireland (SAVI) report was the first national study in Ireland to estimate the prevalence of sexual violence experienced by Irish women and men from childhood through adulthood.[[121]](#footnote-121) Participants were not asked if they had a disability. The study found that 42% of women and 28% of men had experienced sexual abuse or assault over their lifetime. Those who had experienced sexual abuse or assault were more likely to experience mental health issues than those who had not. The disclosure of sexual violence to professionals such as the Guards, doctors or therapists was very low at 6% and 8% of those who experienced sexual assault or abuse in adulthood and in childhood, respectively. The findings from this survey were considered broadly representative but the authors acknowledged the limitations of the study in reflecting the experiences of marginalised groups. Instead, they included chapters on the challenges of disclosure and management of sexual violence for these groups, including those with learning disabilities and those with psychiatric problems. At present the CSO are developing a new national survey on the prevalence of sexual violence in Ireland. This survey will include a variable to identify whether a participant has a disability. It will take place in 2022 and results will be made available between 2023 and 2024.

### National survey on students’ sexual violence and harassment experiences in higher education institutions 2020

In 2020, a national survey on students’ sexual violence and harassment experiences in higher education institutions was conducted by NUI Galway’s Active\* Consent Programme in partnership with the Union of Students in Ireland (USI).[[122]](#footnote-122) A total of 6,026 students completed the survey and 14.7% of these respondents had a disability. This study found that students with a disability reported higher rates of negative experiences across all measures of sexual misconduct and harassment compared with students who did not have a disability (see Table 1). Table 1 shows that the three most prevalent experiences for those with disabilities were sexist hostility (76.5%), sexual hostility (69.0%) and unwanted sexual touching, completed or attempted penetration (55.7%). The largest gaps between students with and without disabilities were with regard to experiencing force or threat of force (31.8% of those with disabilities compared to 17.3% of those without) and unwanted sexual touching, penetration, or attempted penetration (55.7% of those with disabilities compared to 41.5% of those without disabilities).

Table 1 – Experiences of sexual misconduct and harassment by students with and without a disability in NUIG’s Sexual Experiences Survey

| Experience of sexual misconduct (by any perpetrator tactic) | Students with a disability | Students without a disability |
| --- | --- | --- |
| Unwanted sexual touching, completed or attempted penetration | 55.7 | 41.5 |
| Completed or attempted oral, vaginal, or anal penetration | 48.4 | 34.2 |
| Completed oral, vaginal, or anal penetration | 38.8 | 25.8 |
| Exposure to each perpetrator tactic: Acts of coercion | 44.5 | 30.3 |
| Exposure to each perpetrator tactic: Incapacitation | 43.6 | 31.8 |
| Exposure to each perpetrator tactic: Force or threat of force | 31.8 | 17.3 |
| Experience of sexual misconduct, through incapacitation or force (or threat of force): Unwanted sexual touching, penetration, or attempted penetration | 51.0 | 36.6 |
| Experience of sexual misconduct, through incapacitation or force (or threat of force): Completed or attempted oral, vaginal, or anal penetration | 40.8 | 27.3 |
| Experience of sexual misconduct, through incapacitation or force (or threat of force): Completed oral, vaginal, or anal penetration | 33.4 | 21.0 |
| Experience of different forms of sexual harassment: Sexist hostility | 76.5 | 65.6 |
| Experience of different forms of sexual harassment: Sexual hostility | 69.0 | 56.0 |
| Experience of different forms of sexual harassment: Unwanted sexual relationship | 42.0 | 36.5 |
| Experience of different forms of sexual harassment: Electronic communication | 39.5 | 28.3 |

### National survey on staff and student experiences of sexual violence and sexual harassment in Irish higher education institutions 2021

In April 2021, the Minister for Further and Higher Education, Research, Innovation and Science launched a national survey into staff and student experiences of sexual violence and sexual harassment in Irish Higher Education Institutions.[[123]](#footnote-123) Out of 7,901 students who completed the survey, almost one fifth (19%) reported that they had a disability.[[124]](#footnote-124) The most common disability was a mental health difficulty (62%), while a further 13% reported having ASD, Asperger’s Syndrome, ADD or ADHD. Eight percent had an ongoing physical illness, the same percentage had a specific learning disability, 5% had a physical or mobility related disability, 1% were deaf or hard of hearing, 1% had a visual impairment or were blind and 2% of students preferred not to say their disability. There was limited analysis in the report on the experiences of those with disabilities but the authors did note that females with a disability reported higher rates of sexual violence and harassment than those without a disability. Specifically, they experienced higher rates of sexual touching through coercion (43% vs 30%), of sexual touching through incapacitation, force or the threat of force (52% vs 38%), and of non-consensual vaginal penetration through coercion (30% vs 16%). Out of 3,516 staff members of higher education institutions who completed the survey, 6% reporting having a disability[[125]](#footnote-125). This report did not provide an analysis on the experiences of those staff members with disabilities.

### Support services data

#### Rape Crisis Network Ireland

The percentage of survivors with a disability attending Rape Crisis Centres (RCCs) in Ireland since 2011 has ranged between 6 and 8%.[[126]](#footnote-126) In 2020, 7% (n=75) of survivors attending RCCs for counselling and support had a disability of some kind.[[127]](#footnote-127) This figure is an underestimate of those with disabilities attending RCCs as data on psychological/mental health or emotional conditions is not collected on those attending. In 2020, chronic illness was the most commonly disclosed disability (35%), followed by an intellectual disability (19%), a learning disability (15%), a physical disability (13%), being deaf or hard of hearing (8%), being blind or visually impaired (5%) and using a wheelchair (5%).

Rape Crisis Network Ireland reported some key points about this group (albeit with a caveat that the numbers are small):

* The majority of survivors with disabilities attending RCCs were female,
* There was a spread of age groups, with the highest number being in the 40-49 age group,
* Perpetrators of sexual violence against people with a disability were most commonly within their circle of trust, and
* The sexual violence was usually perpetrated within the survivor’s or perpetrator’s homes.

Previous research funded by the NDA found that 197 people with disabilities attended RCCs between 2008 and 2010. [[128]](#footnote-128) While there were similarities between the details of the sexual violence reported by those with disabilities and by others who contacted RCCs for counselling and support, several clear differences were highlighted:

* Survivors with disabilities were more likely to disclose having been abused solely as adults, and less likely to report having been solely abused as children,
* Women with disabilities were more vulnerable to sexual violence as they got older, in contrast to other survivors, and
* Survivors with disabilities were more likely than others to have experienced multiple incidents of sexual violence.

The top barriers to disclosing sexual violence by those with disabilities were fear of being blamed, fear of not being believed, or fear of the legal process. About a quarter of respondents with disabilities mentioned fear of losing support as a factor in not disclosing abuse.

#### Sexual assault treatment units

In Ireland there are six Sexual Assault Treatment Units (SATUs) that provide care for those aged 14 and over who have experienced recent or historic rape/sexual assault. In 2020, 734 people attended an SATU, a 22% decrease from the number attending in 2019 (when 943 people attended).[[129]](#footnote-129) One quarter of these patients were children under the age of 18 (n=186). While there is data collected on whether those attending have a disability, this is not included in the SATU’s annual report. Planning is currently underway to examine how data on disability is collected and reported on by SATUs.

A recent retrospective chart analysis of 2,042 patients who attended SATUs between 2018 and 2020 found that over half of them (56%) reported previous and current mental health concerns at their first SATU visit.[[130]](#footnote-130) Almost one quarter had previous mental health concerns (23%) and one third had a mental health concern at the time of their attendance. Of relevance to this Article, is that the authors concluded that “there was a dearth of information regarding how SATUs responded to the needs of this cohort”[[131]](#footnote-131).

#### Child sexual abuse services

In Ireland, there are forensic services and assessment and therapy services for children who are victims of rape, sexual assault or suspected child abuse. A new model of supporting children, the Barnahus model, was introduced in Galway in 2019.[[132]](#footnote-132) This is a child-centred multi-agency integrated service for children who have experienced sexual abuse, and their families. It incorporates health, medical, therapeutic and policing services.[[133]](#footnote-133) [[134]](#footnote-134) A second Barnahus location is currently being planned for the south of Ireland.[[135]](#footnote-135)

There are no national statistics published on the numbers of children seeking forensic services or assessment and therapy services and it is not clear if all services routinely collect disability data on children. Of concern, it was recently reported that in one of the assessment and therapy services in Dublin, there was a significant increase in the referrals to their service in 2021 (65 up until May 14th 2021) compared to 2019 (87 for the full year).[[136]](#footnote-136)

## Domestic violence data

### National domestic abuse study 2005

What appears to be the last national study of domestic abuse in Ireland, was conducted in 2005 by the National Crime Council and the Economic and Social Research Institute.[[137]](#footnote-137) This study found that when controlling for a range of variables, those who had a longstanding physical or mental health problem, illness or disability which did not severely hamper their daily activities were 58% more likely to have experienced domestic abuse than those with no illness or disability. Those with a longstanding condition who were severely hampered in their daily activities were 186% more likely to have experienced domestic abuse than those with no illness or disability. For women with a longstanding condition, the more hampered they were in their daily activities the more at risk they were of severe abuse. There was also some evidence to suggest that men who were severely hampered by a longstanding condition may have experienced higher levels of abuse than other men less hampered by their condition and men without any longstanding condition.

### Service provider data

#### Safe Ireland

Safe Ireland is the national development and co-ordination body with responsibility for domestic violence and coercive control.[[138]](#footnote-138) Safe Ireland’s national statistics on women and children seeking help from domestic violence services do not disaggregate by factors such as disability.

#### Women’s Aid

Women’s Aid state they do not actively collect data on factors such as disability from those who call their Helpline as its primary purpose is a support service.[[139]](#footnote-139) However, if someone discloses that are they are from a marginalised group, such as that they have a disability or are from an ethnic minority, this data is collected. Less than 4% of those who called the helpline in 2020 volunteered information that they were from a marginalised group, and only 2% of these were disabled. In their face-to-face service, no data on those with disabilities is presented in their annual report.

#### Men’s Aid

Men’s Aid do provide support to male victims with various disabilities, but they have indicated that due to minimal funding they do not have the resources to provide data on same.[[140]](#footnote-140)

#### Men’s Development Network

The Men’s Development Network work directly with persons with disabilities across their transforming masculinities work in health, development and client support services. However, at present they do not collect data or information on persons with disabilities.[[141]](#footnote-141)

## Forced contraception data

There is no national data on forced contraception of people with disabilities in Ireland. However, in a statement to the Joint Oireachtas Committee on Disability Matters in 2021 it was noted that the Re(al) Productive Justice: Gender and Disability project currently underway in NUI Galway has identified “historic and contemporary use of long-term contraceptives without informed consent”.[[142]](#footnote-142)

## Female genital mutilation data

Using 2016 Irish census data and international data on the prevalence of Female Genital Mutilation (FGM), AKIDWA estimate that almost 6,000 women in Ireland have undergone this practice. [[143]](#footnote-143) Although this estimate is not disaggregated by disability, the procedure itself can be disabling and FGM can have negative long-term physical, emotional and psychological impacts on women and girls.[[144]](#footnote-144) In particular, FGM can result in adverse obstetric outcomes for women and babies[[145]](#footnote-145).

## Human trafficking data

In 2019, An Garda Síochána identified 42 victims of human trafficking in Ireland.[[146]](#footnote-146) The majority of these were victims of sexual exploitation. The Department of Justice at the time acknowledged that this was likely to be a significant underestimation. Indeed, in 2019, Ruhama worked with 415 women from 44 nationalities, and 116 of these women were victims of trafficking.[[147]](#footnote-147) Additionally, a report into human trafficking and exploitation into the island of Ireland found that between 2014 and 2019, the number of adults and children trafficked into Ireland (north and south) was higher than those identified in official records.[[148]](#footnote-148) The number of adults and children trafficked into the Republic of Ireland was found to be at least 38% higher than official records.

While numbers of people with disabilities found to be victims of human trafficking are not specifically reported on, the issue of disability is consistently mentioned in Ruhama’s annual reports.[[149]](#footnote-149) They note that their organisation regularly encounters women who are suffering from a range of mental health issues including anxiety, depression, disassociation, post-traumatic stress disorder and suicidal ideation.[[150]](#footnote-150) Furthermore, the Human Trafficking and Exploitation project reported that some trafficking victims have disabilities, such as undiagnosed learning disabilities, which can hinder help-seeking behaviour, as some individuals may not recognise that they have been trafficked.[[151]](#footnote-151) IHREC is designated as the National Rapporteur on the Trafficking of Human Beings in Ireland. In their recent report to the Council of Europe Group of Experts on Action against Trafficking in Human Beings (GRETA) they outlined progress in Ireland and highlighted current issues.[[152]](#footnote-152) Data collection was flagged as a serious issue, and it was noted that the importance of collecting data on disability has not been considered by data collectors.

## Exploitative sham marriages data

Ireland has been identified as being a destination country for ‘sham marriages’ or ‘marriages of convenience’ between EU and non-EU nationals.[[153]](#footnote-153) After joining the EU, both Latvia and Estonia identified significant numbers of their citizens entering into marriages in Ireland with non-EU nationals. The large majority of their citizens were women and the non-EU nationals were men. Both countries also noted that there were possible indicators of human trafficking apparent in these marriages. In 2015, the Immigrant Council of Ireland Independent Law Centre (ICI) took part in an EU funded research project examining the links between sham marriages and human trafficking in five EU countries - Latvia, Lithuania, Estonia, the Slovak Republic and Ireland – with Ireland being the only ‘destination’ country.[[154]](#footnote-154) This study used the term exploitative sham marriages “to express the potential for or presence of exploitation in the context of the sham.”[[155]](#footnote-155) An examination of case studies found common risk factors for women exploited into a sham marriage, with family breakdown and extreme poverty being the most common. The authors also noted with concern the amount of women with mental disabilities in these case studies. Other data from this study found that four of the marriages flagged as concerning by the Latvian embassy in 2012 were of women with disabilities.[[156]](#footnote-156) The report highlighted areas where the Irish government’s response to women who had been exploited into sham marriages and who had sought help could be improved.[[157]](#footnote-157)

## Reports of abuse and safeguarding concerns in health and social care settings

### HIQA

HIQA’s 2020 annual report on inspections of disability settings includes a summary of their inspections as well as information on the 28,426 mandatory notifications they received of incidents, events or changes that happened in the centre.[[158]](#footnote-158) In 2020, the largest proportion of these mandatory notifications (27%, n=6,227) related to an allegation, suspected or confirmed, of abuse of a resident. HIQA noted that “Many of these notifications continued to relate to altercations between residents in centres and do not necessarily mean that there is an immediate risk of abuse to residents in the centre.”[[159]](#footnote-159) They also indicated they had referred a service provider to the National Safeguarding Office over concerns about neglect and institutional abuse due to very poor living conditions. As noted earlier, congregated settings had lower safeguarding compliance rates than non-congregated settings, putting the people living in them at increased risk. HIQA noted that some providers in these congregated settings failed to show they had the ability to appropriately and effectively identify and respond to safeguarding concerns.

### Mental Health Commission

The Mental Health Commission receives information from mental health services on Serious Reportable Offences. In 2020, nine of the 46 Serious Reportable Offences received related to sexual assault on a patient or other person.[[160]](#footnote-160) Such notifications are reviewed and followed up as appropriate to ensure actions have been taken to safeguard all residents or to incorporate learnings from incidents into practice.

### National Safeguarding Office

Since 2016, the HSE’s National Safeguarding Office has received 51,524 reports on concerns of abuse in social care services.[[161]](#footnote-161) Over that time, the largest proportion of reports have related to adults aged 18-64 in a service setting. In 2020, there were 10,216 concerns reported, a 9% decrease on the 2019 figure. This decrease is largely attributed to the impact of Covid-19 on service provision and fewer opportunities for staff to witness potential abuse rather than a real decrease in concern. In 2020, there were 11,847 types of abuse alleged.[[162]](#footnote-162) The most frequent concerns raised for those aged 18-64 and those aged 65 and over was psychological and physical abuse. There were higher rates of financial and negligence concerns raised with regards to those 65 and over. Each report of abuse is reviewed and it is decided whether there is reasonable grounds for concern, no grounds for concern, or more information is needed to make a decision. Since 2016, the percentage of reports designated as having reasonable grounds for concern has increased from 47% to 65% in 2020 (see Table 2). This is reported as being likely due to increased confidence of those conducting preliminary screenings.[[163]](#footnote-163)

Table 2 - Concerns of abuse reported to National Safeguarding Office 2016-2020 and outcomes

| Year | N | Reasonable grounds | More information needed | No grounds |
| --- | --- | --- | --- | --- |
| 2016 | 8,033 | 47% | 20% | 34% |
| 2017 | 10,280 | 54% | 15% | 31% |
| 2018 | 11,780 | 62% | 9% | 30% |
| 2019 | 11,215 | 67% | 8% | 25% |
| 2020 | 10,216 | 65% | 9% | 26% |

### Confidential Recipient

Since 2015 there have been 1,061 concerns reported to the Confidential Recipient.[[164]](#footnote-164) The numbers have tended to fluctuate each year (see Table 3). There was a total of 320 reports made in 2019 and 2020. Over one third of these complaints related to safeguarding concerns (37%, n=119) and the majority of these (36%, n=43) related to alleged abuse, mostly physical abuse, and mostly peer on peer abuse.[[165]](#footnote-165)

Table 3 - Annual number of concerns made to Confidential Recipient 2015-2020

| Year | N |
| --- | --- |
| 2015 | 119 |
| 2016 | 220 |
| 2017 | 196 |
| 2018 | 206 |
| 2019 | 155 |
| 2020 | 165 |

### High profile national cases

#### Aras Attracta

In 2014, the national broadcaster RTÉ aired a Prime Time[[166]](#footnote-166) investigation into abuse at a residential care facility for people with intellectual disabilities in Mayo. Undercover footage showed a number of staff members physically and psychologically abusing and neglecting residents in the facility. A subsequent investigation by An Garda Síochána resulted in criminal charges against 6 people, 5 of whom were found guilty[[167]](#footnote-167). The abuse of these residents led to the launch of the HSE’s Safeguarding Vulnerable Persons at Risk of Abuse - National Policy and Procedures and the establishment of the National Safeguarding Office.

#### Grace case

The Commission of Investigation (Certain matters relative to a disability service in the South East and related matters) was established in 2017.[[168]](#footnote-168) It is investigating the care of a woman with intellectual disabilities in a foster home in the Southeast of Ireland, and her alleged physical and sexual abuse. Grace[[169]](#footnote-169) was placed with the foster family in 1989 and remained in the home until 2009, despite a 1995 decision by the South Eastern Health Board to stop using the family for placements and to remove other vulnerable young people. Two interim reports from the Commission have suggested repeated and systemic failings in Grace’s care despite abuse concerns.[[170]](#footnote-170) The Commission has recently been granted a final extension and will complete its work by July 2022.

#### Brandon case

An investigation by the HSE’s National Independent Review Panel (NIRP) has found that at least 18 people with intellectual disabilities in care settings in Donegal were sexually abused by Brandon[[171]](#footnote-171), another resident, on multiple occasions by between 2003 and 2016.[[172]](#footnote-172) A Look Back Review into Brandon’s behaviour found that between 2003 and 2011 Brandon “engaged in a vast number of highly abusive and sexually intrusive behaviours” against other residents. NIRP identified case notes that also indicated inappropriate behaviour occurring from 1997 and while there are no written reports of his behaviour from 2011 onwards, they are records to suggest he continued to engage in this behaviour until he was moved to a nursing home in 2016. Staff and management were fully aware of this abuse occurring, but victims’ family members were only informed about the abuse in December 2018.[[173]](#footnote-173) Both NIRP and previous HIQA inspections identified failings regarding the governance and management of this particular service. The review team believed a key contributing factor enabling this abuse to continue was the clinical-like environment of the setting which treated residents as patients and promoted a situation where they were completely reliant on staff to protect them. Brandon spent 20 years in this service and there was never a holistic assessment of his needs or a more specialised placement considered for him. NIRP also found the work environment to be challenging for staff working there, who regularly reported Brandon’s behaviour to management but nothing was done to appropriately manage the situation. In some instances, Brandon was moved to another residence, which just exposed other residents and staff to his inappropriate behaviour. While the service had plenty of policies and procedures in place, NIRP found little evidence of staffing being adequately trained to use or implement these policies and procedures.[[174]](#footnote-174)

## Financial abuse data

The HSE defines financial abuse as “an act or acts where a person is deprived of control of their finances or personal possessions or exploited financially by another person or persons.”[[175]](#footnote-175) An example of this is a recent inspection by HIQA of a centre for people with disabilities which found residents’ money was being spent without receipts and on household items such as wall paint and bulbs against provider policy.[[176]](#footnote-176) Research and data on financial abuse can often focus on older people but some people with disabilities may also be at increased risk of financial abuse, especially if they are dependent on others for their care. Since 2016, annually around one in ten[[177]](#footnote-177) of abuse allegations received by the National Safeguarding Office related to financial abuse.[[178]](#footnote-178) [[179]](#footnote-179) [[180]](#footnote-180) [[181]](#footnote-181) [[182]](#footnote-182) In each year, financial abuse allegations were more prevalent in reports regarding those aged 65 and over than those under 65. Sage Advocacy reported an increase in referrals to their support and advocacy service of financial abuse and domestic violence of adults aged 65 and over between 2019 and 2020[[183]](#footnote-183). They receive referrals for vulnerable adults, older people and healthcare patients and their definition of vulnerable adults is broad and includes those with disabilities, mental illness, dementia and people who come under the provisions of the Assisted Decision-Making (Capacity) Act 2015. A 2019 RED C survey commissioned by the Banking and Payments Federation Ireland and Safeguarding Ireland found one in five adults aged 18 and over had experienced or were experiencing financial abuse.[[184]](#footnote-184) In this survey, younger age groups appeared to be more at risk of financial abuse. This survey did not collect information on whether participants had a disability. A 2018 study into the experience of staff in five banks in Ireland of the financial abuse of vulnerable adults found that 67% of 900 survey respondents had previously suspected one of their customers to be a victim of financial abuse.[[185]](#footnote-185) This study also heard examples of financial abuse within banks which included victims who had capacity issues, those who found it hard to identify suspicious financial activity as well as those aged over 65. Child abuse or welfare referrals

The most recent data available online from Tusla indicates that in Q3 2020, there were 69,712 referrals made regarding concerns around child abuse or welfare.[[186]](#footnote-186) No data is published on the children these referrals have been made about.

## Bullying of children with disabilities/illnesses

Analysis by the NDA of data from the Child Cohort of the Growing up in Ireland study found that 9 year olds with disabilities (in 2007/2008) were more likely than non-disabled 9 year olds to be bullied. On occasions, they were also more likely to bully others.[[187]](#footnote-187) (This analysis was included in a 2015 NDA report on preventing school bullying of children with special educational needs or disability. It was published online by the Department of Education and the NDA and disseminated to participating schools and other stakeholders).[[188]](#footnote-188) In the same group of children at aged 13, children with disabilities experienced more bullying episodes than those without disabilities.[[189]](#footnote-189) A longitudinal analysis of data on the same children found that those identified as having a special educational need who were bullied at age 9 were more likely to be bullied at age 13.[[190]](#footnote-190) In addition, those bullied at age 9 had poorer wellbeing at age 13. In 2014, data from the Health Behaviour in School Aged Children study found that 32% of children with a disability and/or chronic illness aged 10–17 reported that they had been bullied at school at least once in the previous couple of months.[[191]](#footnote-191) This was compared to 25% of children without a disability or chronic illness.

# Conclusion

This document provides a general overview of information on the Irish context in relation to Article 16 of the UNCRPD. Ireland has a strong legislative structure that criminalises, protects against and prevents violence, abuse and exploitation, inclusive of people with disabilities. This includes legislation that mandates reporting of abuse against children and vulnerable adults. There are national plans to deal with many areas of relevance to Article 16, including domestic, sexual, gender-based violence and human trafficking. There are mechanisms in place to safeguard children from abuse and to safeguard people with disabilities in certain settings. There are national procedures for bullying in schools and sex education curricula that includes learning on personal safety, and there are services and supports for victims of exploitation, violence and abuse.

However, what is lacking in Ireland is robust national data and information to help us truly understand the situation with regard to Article 16. We do not have enough information to consider the effectiveness of the aforementioned structures and processes in protecting and supporting people, inclusive of those with disabilities, and on how appropriate and accessible existing reporting mechanisms, services and supports are for disabled people. Many of the sources used in this report refer to the increased vulnerability of people with disabilities to exploitation, violence and abuse. However, we do not have enough national data, or appropriately disaggregated data to support or refute this. In the absence of reliable national administrative data, this document has relied on data from NGOs, survey data, anecdotal evidence from a range of sources and numbers of abuse or welfare concerns reported.

As previously noted, the establishment of a ‘gold standard’ of data collection and analysis of domestic and sexual violence as proposed in Ireland’s Second National Strategy on Domestic, Sexual and Gender-Based Violence would fill many gaps in our knowledge of the violence, exploitation or abuse of people with disabilities in Ireland. In addition, research and consultation with people with disabilities is also critical in exploring how violence, exploitation or abuse may manifest differently in their lives, their knowledge of services available to them and their experiences of seeking supports and services if they are victims of exploitation, violence and abuse. More research, more data, and data disaggregated by key intersectional variables including disability is critical. People with disabilities are consistently referred to as being at increased risk for exploitation, violence and abuse. However, without the necessary data and information, the experiences of people with disabilities are not visible, and as such the true extent of the problem in Ireland is not known.

1. For example, in 2021, the NDA hosted a virtual event to hear directly from people with disabilities and their representative organisations on the theme of ‘Building Back Better Post COVID-19’ and a number of roundtables and consultations have been held with Disabled Persons Organisations and others to discuss issues relevant to the lives of persons with disabilities. [↑](#footnote-ref-1)
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