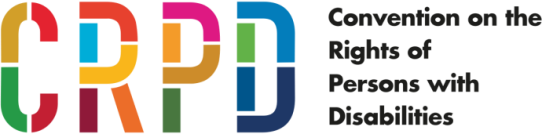
# Data sources for outcome indicators on Article 15 and 17:

# Freedom from torture or cruel, inhuman or degrading treatment or punishment and protecting the integrity of the person

United Nations Human Rights Office of the High Commissioner



ADVANCE VERSION

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## 15/17.21 Number of reported cases of torture and ill-treatment against persons with disabilities, including the denial of reasonable accommodation in detention, disaggregated by sex, age disability, context of the violation.

#### Level 3: Indicator for which acquiring data is more complex or requires the development of data collection mechanisms which are currently not in place.

Reported cases for this indicator should be understood as a collection of a variety of potential sources. While assessment of ill-treatment and torture has many challenges, tendencies can be tracked. These sources include:

* National Preventive Mechanisms: many countries have National Preventative Mechanisms that operate under the United Nations Optional Protocol to the Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment and the CRPD. A list can be found at [www.ohchr.org](https://www.ohchr.org/EN/HRBodies/OPCAT/Pages/NationalPreventiveMechanisms.aspx). They receive torture claims, and their monitoring mandates include institutions for persons with disabilities. The National Preventative Mechanisms can collect this information through monitoring but, unfortunately, torture is significantly underreported and there are many complexities to assessing torture and attributing it.
* National Human Rights Institutions: in the absence of a National Preventative Mechanism, national human rights institutions can attempt to collect this information. Both institutions may categorize information on reported cases according to the place the alleged violation was committed, such as prison, psychiatric institution, residential institution, public or private hospital, etc.
* Media outlets: the media is another important source of information, both in press and broadcast.

## 15/17.22 Number and proportion of victims of torture or ill-treatment with disabilities who received compensation, rehabilitation and support per year

#### Level 3: Indicator for which acquiring data is more complex or requires the development of data collection mechanisms which are currently not in place

This indicator should be based on the number of reported cases (see indicator 15/17.21), as the true number of cases is unlikely to be known. This information can be obtained for victims with disabilities who receive compensation from court, or from administrative records.

Assumptions such as injuries in institutions, unreported deaths, and others, help to have a proxy, although it lags far behind a real data collection process. Direct data collection, where persons with disabilities can be targeted, would be the best option.

## 15/17.23 Proportion of children aged 1-17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month, disaggregated by sex (SDG indicator 16.2.1) and disability.

#### Level 2: Indicator that could be produced with straightforward additions or modifications to existing data collection efforts

[Link to the metadata related to this SDG indicator](https://unstats.un.org/sdgs/metadata?Text=&Goal=&Target=16.2)

According to the metadata:

“*Household surveys such as UNICEF-supported Multiple Indicator Cluster Surveys (MICS) and Demographic and Health Surveys (DHS) that have been collecting data on this indicator in low- and middle-income countries since around 2005. In some countries, such data are also collected through other national household surveys.*

*MICS, the source of the majority of comparable data, includes a module on disciplinary methods. The module, developed for use in MICS, is adapted from the parent-child version of the Conflict Tactics Scale (CTSPC), a standardized and validated epidemiological measurement tool that is widely accepted and has been implemented in a large number of countries, including high-income countries. The MICS module includes a standard set of questions covering non-violent forms of discipline, psychological aggression and physical means of punishing children. Data are collected for children ranging from age 1 to age 14. Some DHS have included the standard, or an adapted version of, the MICS module on child discipline.*”

An example from the [MICs from Sierra Leone](https://mics-surveys-prod.s3.amazonaws.com/MICS6/West%20and%20Central%20Africa/Sierra%20Leone/2017/Survey%20findings/Sierra%20Leone%202017%20MICS%20Survey%20Findings%20Report_English.pdf) is shown in table 1.

**Table 1:** Percentage of Children age 1-14 years by Child Disciplining Methods Experience during the last one month, Sierra Leone, 2017

|  | Only non-violent discipline | Psychological Aggression | *Physical punishment* | | Any violent discipline method | Number of children age 1-14 years |
| --- | --- | --- | --- | --- | --- | --- |
| Any | Severe |
| Total | 5.0 | 80 | 73.1 | 25.5 | 86.5 | 30,076 |
| ***Sex*** | | | | | | |
| Male | 4.5 | 80.4 | 74.1 | 26.4 | 87.0 | 15,068 |
| Female | 5.5 | 79.7 | 72.1 | 24.6 | 86.0 | 15,008 |
| ***Age*** | | | | | | |
| 1-2 | 7.6 | 59.3 | 53 | 9.5 | 66.9 | 4,654 |
| 3-4 | 6.1 | 77.9 | 73.6 | 20.4 | 85.2 | 4,702 |
| 5-9 | 4.3 | 83.9 | 79.8 | 27.3 | 90.6 | 11,797 |
| 10 to 14 | 4.1 | 86.8 | 74.5 | 34 | 92 | 8,923 |
| ***Child's functional difficulty (age 18-49 years)*** | | | | | | |
| Has functional difficulty | 2.2 | 86.2 | 81.3 | 30 | 91.8 | 5,471 |
| Has no functional difficulty | 5.3 | 81.6 | 74.2 | 26.3 | 88.2 | 22,339 |
| *Source:* Statistics Sierra Leone, *Sierra Leone Multiple Indicator Cluster Survey 2017, Survey Findings Report* (Freetown, Sierra Leone, Statistics Sierra Leone, 2018), p. 246 | | | | | | |

## 15/17.24 Number and proportion of persons with disabilities subjected to forced medical experimentation who received compensation, rehabilitation and support per year.

#### Level 3: Indicator for which acquiring data is more complex or requires the development of data collection mechanisms which are currently not in place.

This could be collected from court records or administrative data from national human rights commissions established to investigate these abuses, provided they ask about disability status.