Reforming the Disability Assessment System in the State of Palestine

Towards a Rights-Based National Functional Assessment System

National Reference Paper

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Executive Summary

Reforming the disability assessment system in Palestine represents one of the most important constitutional, legislative, and institutional imperatives at the present stage. It is not merely a technical matter concerning the development of assessment tools or the modernization of administrative procedures, but rather **an entry point for rebuilding the relationship between the State and persons with disabilities based on rights, equality, human dignity, and the rule of law**.

In recent years, Palestine has witnessed fundamental legal and national transformations, reflected in the State of Palestine's accession to the **Convention on the Rights of Persons with Disabilities (CRPD)** and its publication in the Official Gazette (Palestinian Gazette) pursuant to **Decree-Law No. (36) of 2023 on the Publication of the Convention on the Rights of Persons with Disabilities**, alongside developments in certain related legislation and policies. Nevertheless, key aspects of the disability assessment system remain grounded in the traditional medical model, which focuses on diagnosing health conditions and determining degrees of incapacity rather than on functional performance, support needs, the removal of barriers, and enabling persons with disabilities to exercise their rights on an equal basis with others.

The need for this reform is further heightened by the profound humanitarian and social transformations taking place in the State of Palestine, particularly the escalating consequences of the ongoing aggression and international crimes targeting civilians and civilian objects in the Gaza Strip and throughout the Occupied Palestinian Territory. These developments have led to an unprecedented increase in the number of persons with disabilities, changing patterns of disability, increasingly diverse support and rehabilitation needs, and a widening gap between the growing demand for services and the capacity of the current system to respond effectively. In this context, it has become clear that rights-based public policies, evidence-based national planning, and the efficient and equitable allocation of resources are no longer possible without **a modern national functional assessment system and an integrated institutional framework for producing data, supporting planning and decision-making, and responding to changing and future needs.**

This reference paper is based on a central premise: the problem does not lie solely in insufficient services, the multiplicity of committees, or the need to develop certain technical forms. Rather, **the very philosophy of the disability assessment system is no longer consistent with the constitutional and legislative developments witnessed by the State of Palestine or with the rights-based model established by the Convention on the Rights of Persons with Disabilities.** Genuine reform must therefore begin by

redefining the function of assessment, transforming it from a tool for proving incapacity into a tool for realizing the system of rights, identifying support needs, directing services, and promoting full and effective participation in society.

On this basis, the paper presents **an integrated national reference framework** for managing this transformation. The framework is based on reconstructing the philosophy of disability assessment in accordance with a rights-based development model; adopting **multidisciplinary functional assessment** as the governing framework for determining support needs and accommodation measures; developing an institutional model founded on governance and integration across sectors; establishing a national system for disability data governance and digital transformation; and realigning the legislative environment with the provisions of the **Amended Palestinian Basic Law**, the Convention on the Rights of Persons with Disabilities, and relevant national legislation.

The paper further emphasizes that reforming the **disability assessment system** is not a project belonging to a particular ministry or sector. It is a **cross-sectoral national project** involving health, social protection, education, employment, the judiciary, public administration, statistics, public finance, planning, and digital transformation. The success of this reform therefore requires a clear model of **institutional governance**, based on a clear distribution of mandates and responsibilities; stronger coordination and integration among institutions; national capacity-building; the production of accurate, disaggregated, and updated data; effective monitoring, evaluation, and accountability systems; and the meaningful participation of persons with disabilities and their representative organizations at every stage of drafting legislation, formulating policies, making decisions, monitoring implementation, and evaluating results. This will strengthen national ownership of reform through a disability inclusion approach and ensure its sustainability and effectiveness.

Within this framework, the paper proposes **integrated legislative architecture for managing the transition**, grounded in the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities, Decree-Law No. (36) of 2023 on the publication of the Convention in the Official Gazette (Palestinian Gazette), and Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021. It also calls for reviewing national legislation that continues to rely on **medical fitness** as a criterion for determining rights or access to public employment for persons with disabilities, and for reconstructing such legislation in line with the approach and philosophy of rights-based functional assessment.

The reference paper also proposes **a national roadmap for managing the transition**, consisting of three interconnected phases: **foundation**, **gradual implementation, sustainability, and evaluation**. These phases are supported by strategic indicators for measuring the success of the reform, ensuring that the transition is a gradual institutional process grounded in planning, capacity-building, change management, continuous institutional learning, evidence-based data, and periodic review and development. This approach is intended to ensure the sustainability of reform and its institutionalization within State institutions.

The paper concludes that the future of the disability assessment system in the State of Palestine is not limited to developing examination forms or modernizing procedures for issuing certificates. Rather, it requires redefining the function of assessment within the State itself as a strategic tool for realizing the system of rights, guiding public policies, and supporting planning and decision-making. In a modern State, assessment is not a means of proving incapacity, but a tool for realizing rights; its purpose is not to classify people, but to empower them; and its success is not measured by the accuracy of a disability diagnosis, but by its ability to guide legislation, policies, services, and resources towards removing barriers, identifying necessary support needs, achieving substantive equality, and ensuring the full and effective participation of persons with disabilities in society.

Accordingly, the reform advocated by this reference paper is not merely a transition from one assessment model to another. It is a transition from a State that assesses a person to prove incapacity to a State that assesses the person's needs to enable the exercise of rights.

The ultimate purpose of this reform is not merely to develop the disability assessment system. It is to rebuild the State's capacity to realize rights, strengthen good governance, produce specialized knowledge, and formulate public policies that are more equitable, efficient, and responsive. Assessment should become a tool for realizing the system of rights, data should become the foundation for planning and decision-making, governance should serve as a guarantee of accountability, and human dignity should become the standard by which the quality of legislation, the efficiency of administration, and the effectiveness of policies in the State of Palestine are measured.

The challenge is no longer how to assess disability, but how to build a State capable of translating the results of that assessment into enforceable rights, more equitable policies, more responsive institutions, and more dignified lives for persons with disabilities.

1. Introduction

Public policies are not founded on good intentions, nor are rights established merely through their legal recognition. Rather, they depend on institutional and legislative systems capable of accurately identifying needs, directing resources efficiently, and measuring the impact of interventions on objective grounds. In this context, the **disability assessment system** represents a fundamental pillar that intersects with a wide range of public policies, because it serves as the entry point for decisions concerning rights and services, social protection, healthcare, education, employment, rehabilitation, accessibility, national planning, data production, and the allocation of public resources.

However, developments in international law and the evolution of disability concepts over recent decades have demonstrated that many disability assessment systems established under the traditional medical model are no longer capable of responding to the requirements of the contemporary rights-based approach or keeping pace with the shift from a focus on incapacity to a focus on rights, participation, and the removal of barriers. Disability assessment is no longer confined to diagnosing a health condition or determining the degree of incapacity. It has become a multidimensional process aimed at understanding a person's functional performance, analyzing the impact of environmental and personal factors on participation, identifying support needs and accommodation measures, linking assessment results to the realization of rights, and enabling persons with disabilities to participate fully and effectively in society.

In Palestine, this issue has acquired exceptional importance considering the constitutional, legislative, and institutional developments of recent years, particularly following the State of Palestine's accession to the Convention on the Rights of Persons with Disabilities and its publication in the Official Gazette. The resulting legal obligations require the alignment of national legislation, policies, and practices with **rights-based functional assessment**. The issue has become even more significant amid the humanitarian and social transformations imposed by the ongoing aggression against the Gaza Strip and the entirety of the Occupied Palestinian Territory, and its compounded impact on the rights of persons with disabilities. This has resulted in an unprecedented increase in the number of persons with disabilities, greater complexity in their needs, and a widening gap between demand for services and the capacity of the existing system to respond effectively. Reforming the disability assessment system has therefore become an urgent national necessity that extends beyond the health or social sector and serves as an entry point for reforming the public policy system itself.

Accordingly, this reference paper does not treat disability assessment as a technical or medical procedure, but as a national issue that extends beyond the health or social sector and relates to the quality of

legislation, the efficiency of public administration, the fairness of public policies, and the State's capacity to realize rights. It is based on the premise that developing the **disability assessment system** is a strategic entry point for building a more coherent national system linking legislation, policies, and institutions. This requires a transition to **rights-based functional assessment**, grounded in good governance, evidence-based data, a disability inclusion lens, and multidisciplinary institutional work. Such an approach will improve the quality of services, strengthen the efficiency of planning and decision-making, enable the State of Palestine to fulfill its constitutional and international obligations, and establish human dignity as the governing purpose of public policy.

For this reason, the paper does not merely present a technical vision for developing assessment mechanisms. It proposes **an integrated national reference framework** for managing this transformation, bringing together constitutional and legislative analysis, international references, institutional diagnosis, the proposed national model, legislative architecture, and an implementation roadmap. The framework seeks to integrate legislation, policies, institutions, and data within a unified national vision. The value of the paper is not limited to proposing reforms; it also establishes a national reference that can guide the development of legislation and policies, institution-building, stronger governance, support for planning and decision-making, and the management of the transition towards a national rights-based functional assessment system in the State of Palestine.

1.1 Background and National Context of the Paper

This paper comes at a time when the State of Palestine is experiencing legal, institutional, and humanitarian transformations that require reconsideration of the foundations of the **disability assessment system**. Recent years have witnessed significant developments, including the State of Palestine's accession to and publication of the Convention on the Rights of Persons with Disabilities, a growing trend towards aligning national legislation and policies with international obligations, and the emergence of constitutional and judicial jurisprudence emphasizing the importance of respecting international human rights references once the required legal procedures have been completed. At the same time, certain national legislation has begun to reflect early indications of this transition by adopting concepts more closely linked to multidisciplinary assessment, governance, data production, and service development.

Nevertheless, the national disability assessment system remains largely based on concepts and procedures developed under the traditional medical model, which focuses on medical diagnosis and the determination of incapacity more than on functional performance, support needs, the removal of barriers, and full and effective participation in society. This has created an inconsistency between developments in

constitutional, legislative, and international references, on the one hand, and significant aspects of the practices and procedures that continue to govern disability assessment and link it to rights, services, and entitlements, on the other. This inconsistency has impeded the existing system's ability to keep pace with the shift towards the rights-based model and has weakened its effectiveness in supporting planning, decision-making, and the integrated realization of rights.

This challenge has become even more urgent at the national level in light of the humanitarian and social consequences of the ongoing aggression against the Gaza Strip. These consequences include a significant increase in the number of persons with disabilities, greater diversity in patterns of disability, more complex support and rehabilitation needs, and an expanded need for public policies capable of responding to rapid changes. It has become clear that effective national strategies, equitable service design, and efficient resource allocation are no longer possible without a modern assessment system, accurate national data, and an institutional framework capable of producing the knowledge required for planning and decision-making.

In this context, reforming the **disability assessment system** is not limited to developing a technical tool or modernizing an administrative procedure. Rather, it represents an entry point for reconstructing the relationship among legislation, policies, institutions, and data, making assessment part of an integrated national system for realizing rights, strengthening governance, and supporting evidence-based planning. This paper responds to the changing national context by seeking to provide a **reference framework** that can guide the transformation in a systematic and gradual manner, grounded in the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities, international best practices, and the particularities of the Palestinian context.

1.2 The Paper's Central Issue and Significance

The issue addressed by this paper does not consist merely of insufficient services for persons with disabilities or the need to develop certain administrative or technical procedures related to disability assessment. Rather, it lies in the fact that the **disability assessment system** itself remains fundamentally based on a legal and institutional philosophy that is no longer consistent with developments in international human rights law, constitutional and legislative progress, or the growing requirements of evidence-based planning and good governance.

This issue is reflected in the continuing dominance of the traditional medical model over the assessment process, which reduces disability to a medical diagnosis or a determination of the degree of incapacity and

links rights, services, and entitlements to abstract medical criteria. By contrast, **rights-based functional assessment** is founded on understanding the relationship among a person's health condition, functional performance, and environmental and personal factors; identifying support needs; removing barriers; and enabling persons with disabilities to exercise their rights in full.

The impact of this issue is not limited to persons with disabilities. It also extends to the State's capacity to plan, formulate public policies, and manage resources efficiently and equitably. A disability assessment system is not merely a mechanism for determining entitlements. It is the entry point on which national databases are built, intervention priorities are identified, resources are allocated, services are designed, and public policy outcomes are measured. Any deficiency in the philosophy or methodology of assessment therefore affects not only service quality, but also the efficiency of national planning, the equitable distribution of resources, the accuracy of data, the effectiveness of public policies, and the ability of State institutions to fulfill their constitutional and international obligations and respond to the changing needs of persons with disabilities based on rights, evidence, and good governance, particularly in situations of armed conflict and occupation.

The significance of this paper is further reinforced by the fact that it does not assume the existence of a legislative or institutional vacuum. Instead, it recognizes that reform elements are dispersed throughout the Palestinian national system but have not yet been integrated into a comprehensive national framework. The Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities to which Palestine has acceded, Decree-Law No. (36) of 2023 on the publication of the Convention, Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021, and a number of national initiatives and policies all provide foundations on which a transition towards a more coherent, equitable, and effective system can be built.

The importance of this reference paper therefore lies in the fact that it goes beyond diagnosing deficiencies or calling for the development of certain procedures or the amendment of legal provisions. It presents **an integrated national reference framework** for reconstructing the philosophy of disability assessment and linking it to the constitutional framework, international references, governance, data production, legislative architecture, and strategic planning. It seeks to build a unified national vision that integrates legislation, public policies, institutions, and implementation practices, thereby providing a systematic foundation for managing reform in a gradual, sustainable, rights-based, and evidence-based manner.

In this sense, the paper goes beyond sectoral reform of the disability assessment system and contributes to improving the quality of public administration, legislative drafting, policy efficiency,

and governance. Its importance lies not only in proposing a new model for disability assessment, but also in redefining the function of assessment within the State so that it becomes a tool for realizing rights, producing knowledge, supporting planning and decision-making, directing resources, and building policies that are more equitable, efficient, and responsive to the needs of persons with disabilities. This establishes human dignity as the governing purpose of legislation and public policy.

1.3 Objectives of the Paper

This reference paper aims to provide an integrated national reference framework for reforming the **disability assessment system** in the State of Palestine. The framework is grounded in the Amended Palestinian Basic Law and relevant national and international references and supports the shift **towards rights-based functional assessment** as the governing framework for identifying support needs, linking assessment results to the realization of rights, and promoting the full and effective participation of persons with disabilities in society. It also seeks to contribute to building a national system that is more coherent across legislation, public policies, and institutions, thereby improving the quality of public administration and strengthening the efficiency of planning and decision-making.

The paper seeks to analyze the reference framework governing the disability assessment system at the constitutional, legislative, institutional, national, and international levels; diagnose structural deficiencies that impede the development of the existing system; and identify their impact on the realization of rights, service quality, planning efficiency, and data production. This analysis provides a sound basis for determining reform priorities.

Based on this analysis, the paper presents an integrated national model for reconstructing the philosophy of disability assessment. The model is founded on **multidisciplinary functional assessment**, institutional governance, integrated cross-sectoral work, and evidence-based data. It also sets out the legislative and regulatory architecture required to manage the transition in a manner that ensures consistency among the Amended Basic Law, the Convention on the Rights of Persons with Disabilities, and national legislation, while establishing a more equitable, effective, and sustainable system.

The objectives of the paper extend beyond analysis or the design of the proposed model. They include establishing **a national roadmap** for managing the transition in a systematic and gradual manner, defining the phases, priorities, requirements, monitoring and evaluation mechanisms, and success indicators of the reform. This will support decision-makers in developing a modern national disability assessment system

capable of responding to societal transformations, directing public resources efficiently, and improving the quality of policies and services on a rights-based foundation.

Accordingly, the ultimate purpose of this reference paper is not merely to develop disability assessment mechanisms, but to contribute to establishing a national reference that supports the reform of Palestinian legislation, the development of public policies, stronger institutional governance, the production of knowledge, and the ability of State institutions to plan and make decisions on foundations that are more equitable, efficient, and responsive. Disability assessment will thereby become a strategic tool for realizing rights, supporting inclusive development, and establishing human dignity as the governing standard for the quality of legislation, the efficiency of public administration, and the effectiveness of public policies in the State of Palestine.

1.4 Methodology for Preparing the Paper

This paper adopts an integrated methodology combining constitutional and legislative analysis, institutional analysis, and public policy development methodologies to build a national reference framework for reforming the **disability assessment system** in the State of Palestine. The paper does not address an isolated technical or sectoral issue. Rather, it adopts a comprehensive approach that views the assessment system as part of the State's broader governance system, together with the related legislation, policies, institutions, data, accountability mechanisms, and decision-making processes.

The paper is based on an analysis of the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities, Decree-Law No. (36) of 2023 on the publication of the Convention in the Official Gazette, and relevant national legislation and regulations. It also draws on the International Classification of Functioning, Disability and Health (ICF) as the internationally recognized scientific and methodological framework for understanding functioning and disability, as well as references and standards issued by the World Health Organization (WHO), the International Labour Organization (ILO), and other relevant international instruments and references. This ensures that the proposed national model is aligned with international developments and comparative best practices while considering the constitutional, legislative, and institutional particularities of the State of Palestine.

The paper also analyzes the Palestinian institutional and legislative context and diagnoses the structural deficiencies affecting the current system by examining the relationship among Palestinian legislation, public policies, and implementation practices; identifying areas of consistency and existing gaps; and assessing their impact on the realization of the rights of persons with disabilities, service quality, planning

efficiency, and data production. This makes it possible to identify reform priorities based on evidence and objective analysis.

At the same time, the paper adopts **a forward-looking methodology** that extends beyond diagnosing the current situation to **designing a proposed national model, formulating legislative architecture for managing the transition, and establishing an implementation roadmap and indicators for measuring success**. It therefore serves as a reference document that brings together analysis, planning, policymaking, and institutional change management within an integrated national vision.

Accordingly, the purpose of this methodology is not to produce a theoretical study of disability assessment, but to **build a practical national reference** that can guide the development of legislation, the formulation of public policies, institution-building, stronger governance, and support for decision-makers in managing the transition towards **rights-based functional assessment** in a systematic, gradual, and sustainable manner.

2. The Shift towards Reforming the Disability Assessment System

Reforming the disability assessment system represents one of the most important institutional and legislative transformations facing the State of Palestine as it continues to align its legal and policy system with the Convention on the Rights of Persons with Disabilities, to which it acceded in early April 2014 and which was published in the Official Gazette in early January 2024. This reform is also central to building a national system that is better able to guarantee equality and non-discrimination and to enhance access by persons with disabilities to their rights and entitlements based on human dignity, autonomy, and full and effective participation in society. The transformation is not limited to developing assessment tools or modernizing administrative procedures. It extends to reconsidering the philosophy underpinning the entire system and the purpose it serves within the national human rights framework.

This reference paper proceeds from the understanding that disability assessment is neither a purely medical matter nor an isolated technical procedure. Rather, it constitutes the point at which legislation and public policies intersect with health and rehabilitation services, social protection systems, education, employment, the judiciary, and all other sectors directly or indirectly connected to the rights of persons with disabilities.

Consequently, the nature of the assessment system adopted directly affects the State's ability to fulfill its constitutional and international obligations, the extent to which persons with disabilities enjoy their rights, the efficiency of national planning, the equitable distribution of resources, and the quality of services.

This transformation is taking place at a time of qualitative development within the legal system, reflected in the State of Palestine's accession to the Convention on the Rights of Persons with Disabilities and its publication in the Official Gazette, alongside growing national efforts to modernize legislation and policies, strengthen governance, and transition towards rights-based and evidence-based administration. These developments require a reassessment of the traditional models that have governed the disability assessment system for decades and the construction of a new national model that is more consistent with constitutional, legislative, and institutional developments and capable of responding to the humanitarian and social transformations taking place in the State of Palestine.

Accordingly, the paper does not treat reform of the disability assessment system as a sectoral project concerning the Ministry of Health alone, nor as a technical response to the need to develop assessment procedures. Rather, it views reform as **a national project** to reconstruct one of the most important institutional gateways through which a broad range of rights, services, and entitlements are accessed. Reforming the system is understood as an entry point for improving the quality of legislation, administrative efficiency, institutional integration, and evidence-based planning and decision-making. Its success is therefore a foundation for strengthening the entire system of rights of persons with disabilities and for consolidating the principles of the rule of law, good governance, social justice, and inclusive development in the State of Palestine.

2.1 Why Has Reform Become a National Necessity?

Reforming the disability assessment system in Palestine is no longer an optional development initiative or a procedural matter that can be postponed. It has become a national necessity imposed by the constitutional, legislative, and institutional transformations witnessed by the State of Palestine over the past decade, alongside the rapid development of international standards concerning the rights of persons with disabilities and the resulting obligations to realign national legislation, policies, and practices with the rights-based model established by the Convention on the Rights of Persons with Disabilities.

This necessity extends beyond compliance with international obligations and reaches the core of the constitutional order itself. The Amended Basic Law does not merely prohibit discrimination and protect rights and freedoms. It places a positive constitutional obligation on the Palestinian Authority to support persons with disabilities and guarantee them education, social insurance, and health insurance services. This obligation cannot be fulfilled effectively unless the disability assessment system is based on a model capable of identifying the needs of persons with disabilities, directing services, and ensuring equitable and

effective access to rights, rather than being confined to classifying cases or determining degrees of incapacity.

At the same time, substantial parts of the Palestinian legislative and administrative system continue, directly or indirectly, to rely on traditional concepts that make medical assessment or the medical fitness requirement, which is widespread throughout legislative texts, the principal gateway for determining legal, occupational, or administrative eligibility for a range of rights and services. This situation has deepened the gap between developments in the constitutional and treaty-based framework, on the one hand, and legislation and administrative practices that continue to reflect a different philosophy, on the other. Reforming the disability assessment system is therefore part of a broader process aimed at ensuring the internal coherence of the Palestinian legal system and strengthening its consistency with constitutional and international obligations.

This necessity is further reinforced by developments in the State of Palestine in public policy, governance strategies, digital transformation, and results-based management, together with the growing need for more accurate data to support planning and decision-making. Developing the disability assessment system therefore constitutes a national investment in building institutions that are more efficient, equitable, and responsive to disadvantaged groups, rather than merely an improvement to an administrative procedure or technical tool. The reform sought is not limited to modernizing assessment mechanisms. It requires **a transformation in the philosophy underpinning the entire system**, from a model centered on diagnosing incapacity to one focused on functional performance, the realization of rights, and enabling persons with disabilities to participate fully and effectively in society.

2.2 From the Medical Model to the Rights-Based Model

Recent decades have witnessed a profound transformation in the understanding of disability at the international human rights level. Attention has shifted from focusing on an individual's health condition to understanding disability as the result of interaction between the person and environmental, legal, institutional, and societal barriers that restrict full and effective participation in society on an equal basis with others. This transformation is clearly reflected in the Convention on the Rights of Persons with Disabilities, which reframed the relationship between the State and persons with disabilities from one based on care and guardianship to one based on recognition of legal capacity, rights, equality, autonomy, and participation.

This transformation does not mean excluding medical expertise but redefining its role within a more inclusive and integrated system. Medical expertise remains essential for diagnosing a health condition, understanding its nature, and identifying treatment and rehabilitation needs. On its own, however, it is no longer sufficient to assess the impact of disability on a person's life, determine the person's level of functional performance, identify support and accommodation needs, or determine the extent to which the person is enabled to exercise rights and access services on an equal basis with others.

From this perspective, the transition to the rights-based model established by the Convention on the Rights of Persons with Disabilities does not replace medicine with rights. Rather, it moves beyond limiting the assessment process to a medical perspective and towards a multidisciplinary system in which medical, rehabilitation, psychological, social, educational, vocational, and other areas of expertise are integrated. Assessment thus becomes a comprehensive process based on understanding a person's functional performance in the person's actual environment, analyzing barriers to participation, and identifying the support required to enable the exercise of rights on an equal basis with others.

Accordingly, the transformation sought is not a matter of changing terminology or replacing one theoretical model with another. It requires **reconstructing the philosophy and function of disability assessment within the State**. Assessment is no longer intended to prove incapacity or classify people according to their health conditions. Instead, it should produce accurate knowledge that supports the removal of barriers, identifies support needs, and guides legislation, policies, services, and public resources. In this way, assessment promotes the full and effective participation of persons with disabilities, becomes a strategic tool for realizing the system of rights and consolidating equality, and enables people to live independently and with dignity.

2.3 Functional Assessment as a National Framework for the Realization of Rights

Functional assessment now represents the framework most consistent with the philosophy of human rights because it shifts attention from the traditional question, **what is the person unable to do?** to the essential question, **what does the person need in order to exercise rights and participate fully and effectively in society on an equal basis with others?** In this sense, assessment is not an end, but a means of enabling persons with disabilities to access the rights, services, and entitlements guaranteed by law.

Accordingly, the adoption of functional assessment in Palestine should not be understood as merely replacing an assessment form or tool. It constitutes a new national framework for managing the relationship between the State and persons with disabilities through a disability inclusion approach and

analytical lens. Functional assessment does not merely describe a condition. It links a person's functional capacities with environmental factors, support needs, accommodation measures, and available services, thereby providing a more equitable and objective basis for guiding public policies, designing programs, allocating public resources, and ensuring equality, justice, and equal opportunities in access to rights.

This transformation requires reconstructing the institutional and legislative system governing assessment so that medical expertise becomes one component of a multidisciplinary system and the function of assessment shifts from determining incapacity or medical fitness to identifying support needs, accommodation measures, and empowerment requirements, and linking them to the relevant rights, services, and entitlements. It also requires modern databases, stronger governance and institutional coordination mechanisms, and greater use of data in planning and decision-making, making the disability assessment system a principal component of development and social justice in the State of Palestine.

On this basis, the paper advances the proposition that reforming the disability assessment system in the State of Palestine does not merely modernize an administrative procedure or respond to an international obligation under the CRPD. Rather, it constitutes a structural transformation in the philosophy of State action, shifting the administration of rights from a logic of medical classification to a logic of empowerment, support needs, participation, and the rule of law. Functional assessment is therefore not simply a new tool, but **a national framework for the realization of rights** and an entry point for rebuilding the relationship between the State and persons with disabilities on constitutional, rights-based, and institutional foundations that are more equitable and sustainable.

3. The Governing Reference Framework for Reform

Reform of the disability assessment system cannot be approached as an independent technical or administrative project. Its nature extends beyond developing assessment tools or reorganizing institutional procedures and reaches the constitutional, legislative, and policy structure governing the relationship between the State and persons with disabilities. Any national model for developing the disability assessment system must therefore be grounded in **an integrated reference framework** in which international references interact with national constitutional and legislative references, judicial jurisprudence, public policies, and accumulated national experience. This will ensure that reform is consistent with the obligations of the State of Palestine, aligned with its institutional context, and capable of responding to the growing challenges revealed by practice.

The paper does not view these references merely as sources for citation or documentation, but as **an integrated system of principles, rules, obligations, and standards** that establish the philosophy of

reform, guide its legislative and institutional choices, govern the design of **the proposed national model**, and provide an objective framework for evaluating the existing system. The governing references therefore do more than describe what ought to exist. They also constitute **a standard for measuring the consistency of the national system** with constitutional and international obligations, identifying priorities for legislative and institutional reform, and building a gradual national pathway for reform and the realization of rights.

Accordingly, this chapter adopts **four interconnected levels of reference** that together form the governing framework for reform. It begins with the international references that established the shift from the medical model to the rights-based model, followed by Palestinian national constitutional and legislative references that provide the binding legal basis for this transformation. It then examines policy and institutional references reflecting modern national directions in good governance, public administration, planning, and digital transformation, and concludes with previous national experiences and efforts, which constitute a body of knowledge and institutional experience that should be developed and built upon. This approach recognizes that **sustainable reform is based on institutional accumulation and continuous development, rather than rupture or starting from zero.**

3.1 International References

Reform of the disability assessment system in the State of Palestine does not begin in a vacuum or constitute an isolated response to domestic developments. It forms part of a profound international transformation in the human rights system over recent decades, which has reframed disability through an inclusion approach, redefined State obligations towards persons with disabilities, and shifted attention from classifying people according to health status to enabling them to exercise their rights on a fully equal basis with others. This transformation has produced an integrated body of international references that extends beyond the recognition of rights to the development of governance models, assessment mechanisms, data systems, public policies, and institutional arrangements capable of realizing those rights in practice.

The Convention on the Rights of Persons with Disabilities represents the principal turning point in this process. It established a new rights-based model that recognizes persons with disabilities as full rights-holders and confirms that disability is not an inherent characteristic of the individual, but results from the interaction between persons with disabilities and various barriers that hinder their full and effective participation in society. The purpose of disability assessment is therefore no longer to determine a level of

incapacity or prove a medical condition. It is to understand the effect of interaction between a person and the surrounding environment and to identify the measures required to ensure the full enjoyment of rights and remove barriers to participation.

In the same context, the **International Classification of Functioning, Disability and Health (ICF)** represents the most advanced scientific and methodological framework for understanding disability as a multidimensional functional condition shaped by the interaction among health conditions and environmental, personal, and social factors. The ICF has helped move beyond traditional models that reduced assessment to medical diagnosis or the determination of incapacity by providing an integrated framework for assessing a person's functional performance, analyzing factors that facilitate or restrict participation, and identifying support needs, reasonable accommodation, and appropriate services. This approach is particularly important because it makes **assessment a tool for producing accurate knowledge about a person's capacities and needs, rather than merely a means of proving the existence of disability**. Assessment results can consequently be linked to planning, policymaking, resource allocation, service design, and measurement of the impact of interventions, thereby improving the efficiency of public administration and supporting the realization of rights based on evidence and equality. The **International Classification of Functioning, Disability and Health (ICF)** has therefore become one of the principal global references used by States to develop disability assessment systems, build national databases, and design related public policies and services.

The paper also draws on **guidance and standards issued by the World Health Organization, the International Labour Organization, and UNICEF**, as well as other relevant international bodies. These sources increasingly affirm that the effectiveness of disability assessment systems is not measured solely by the accuracy of medical diagnosis, but by their ability to guide services, strengthen social protection, support inclusion in education and employment, improve planning and policymaking, and build databases capable of supporting decision-making and the efficient and equitable management of resources.

The paper does not treat these international references as ready-made models for replication or literal transfer. Rather, it regards them as a governing normative and philosophical framework for national reform, while taking constitutional, legislative, and institutional particularities into account. A national model does not succeed merely by importing international practices. Its success depends on the ability to adapt global principles to the national context and build a coherent and integrated Palestinian system that responds to international obligations while reflecting the needs of society, the capacities of its institutions, and its public policy priorities, thereby achieving sustainable and practicable national reform.

3.2 National Constitutional and Legislative References

Reforming the disability assessment system in Palestine rests on a firm constitutional and legislative foundation, making it a national legal imperative before it is a response to international conventions and standards. The Palestinian constitutional framework, represented by the Basic Law, does not merely establish general principles concerning equality and human rights. It imposes obligations on public authorities to build a legal and institutional system that guarantees the rights of persons with disabilities and ensures their access to services and entitlements on an equal basis with others. Developing the disability assessment system is therefore part of fulfilling these national constitutional obligations.

The Amended Palestinian Basic Law provides the starting point for this framework. It establishes a set of constitutional principles in **Chapter Two on Public Rights and Freedoms**, which form the governing foundation of this reference paper. Foremost among them are equality and non-discrimination, including the prohibition of all forms of discrimination based on disability; respect for human rights; the protection of fundamental rights and freedoms; and the constitutional obligation to support persons with disabilities and guarantee them education, social insurance, and health insurance services. The importance of these constitutional provisions is not confined to recognizing rights. They impose a positive obligation on the ordinary legislator and public administration to establish a legal and administrative system capable of translating those rights into practice, making disability assessment an effective tool for enabling persons with disabilities to access their rights rather than a barrier to their exercise.

This constitutional framework was strengthened by the State of Palestine's accession to the Convention on the Rights of Persons with Disabilities in early April 2014 and completion of the domestic procedures through its publication in the Official Gazette (Palestinian Gazette) pursuant to Decree-Law No. (36) of 2023. Publication gave the Convention's provisions legal force within the Palestinian legislative system and made them part of the governing national reference for interpreting related legislation, policies, and practices. Palestinian constitutional jurisprudence further reinforced this direction by affirming that human rights conventions become part of the national legal system once their constitutional procedures have been completed, requiring national legislation to be interpreted and developed consistently with the international obligations of the State of Palestine.

The national legislative framework extends beyond constitutional and treaty provisions to encompass a range of legislation and regulations directly intersecting with the disability assessment system. Foremost among them is Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021, which adopted the concept of **a multidisciplinary rehabilitation committee**, reflecting an important

national move beyond single-discipline medical assessment towards a more integrated approach to assessing needs. The framework also includes legislation governing the civil service, service in the security forces, the judiciary, and other laws that continue to contain **medical fitness requirements**. These provisions need to be reinterpreted considering constitutional developments and the CRPD to achieve the internal coherence of the legal system and eliminate inconsistencies between the rights-based philosophy established by the Constitution and the Convention and certain legislative and administrative applications that remain grounded in the traditional medical model.

Accordingly, the paper does not treat constitutional and legislative references as static texts, but as **a dynamic legal system** requiring continuous review of legislation, policies, and practices to ensure consistency with the Convention on the Rights of Persons with Disabilities, to which the State of Palestine acceded without reservations; Decree-Law No. (36) of 2023 on its publication in the Official Gazette; judicial jurisprudence; and the ongoing process of developing the draft Decree-Law on the Rights of Persons with Disabilities. This will strengthen a national legislative framework that is more consistent with the contemporary rights-based model. Reform of the disability assessment system does not begin with preparing a new assessment form. It begins with **realigning the constitutional and legal environment governing assessment** so that it can support a national system based on rights, functional assessment, support needs, reasonable accommodation, an inclusion approach, and the full and effective participation of persons with disabilities in society.

3.3 Policy and Institutional References

The reference framework for reforming the disability assessment system cannot be completed through constitutional and legislative references alone. The success of any institutional reform also depends on its consistency with State public policies, strategic directions, and the governance and administrative frameworks governing its institutions. Developing the disability assessment system in the State of Palestine should therefore be viewed as part of a broader national project to modernize public administration, strengthen good governance, improve the efficiency of public services, and consolidate results-based and evidence-based administration, rather than as a sectoral project limited to the health sector.

Modern national strategies, particularly in the fields of health, governance, social protection, and the empowerment of persons with disabilities, demonstrate a clear direction towards stronger cross-sectoral integration, improved public services, digital transformation, higher-quality data, and more effective accountability, monitoring, and evaluation systems. All these foundations intersect directly with **the**

requirements for reforming the disability assessment system. This confirms that the transition to functional assessment is not separate from national legislation and policies but is consistent with the broader direction towards building institutions that are more efficient, responsive, and transparent.

These institutional references also reflect a notable development in understanding the relationship between data and decision-making, planning and resource allocation, and governance and service quality. The disability assessment system must therefore be transformed from a system whose role is limited to issuing certificates or proving status into a national system for producing knowledge, providing reliable data, supporting planning, guiding public policies, and promoting fairness in the distribution of services and entitlements. It will thereby become an integral part of the State's institutional structure.

In the same context, national policies relating to persons with disabilities, health, education, employment, and social protection emphasize the importance of multisectoral approaches, stronger institutional coordination, and the participation of persons with disabilities and their representative organizations in planning and decision-making processes based on **"Nothing About Us Without Us."** These principles are fully consistent with the philosophy of rights-based functional assessment, which does not merely analyze an individual condition but connects it to the surrounding environment, available services, support needs, accommodation measures, and factors affecting full participation in society.

Accordingly, the paper views policy and institutional references as an enabling environment for reform rather than merely planning documents or regulatory frameworks. They serve as governing instruments for directing policies, building institutions, and managing change. They provide the foundation for redesigning the disability assessment system within an integrated vision that intersects with State priorities in governance, digital transformation, knowledge management, capacity-building, service quality improvement, evidence-based data production, and stronger cross-sectoral integration. Functional assessment therefore becomes part of a broader national project to develop public administration, improve planning and decision-making, and strengthen the capacity to realize rights, rather than an isolated technical project or a limited intervention.

3.4 Previous National Experiences and Efforts

Reform of the disability assessment system in Palestine is based on the conviction that policymaking does not begin in a vacuum and that sustainable institutional reform is not founded on a break with previous achievements. Rather, it requires critical evaluation and the cumulative development of national experience, as well as the incorporation of lessons learned from the initiatives, policies, studies, and

institutional efforts undertaken in recent years. These experiences are not merely a historical record of reform. They constitute a body of knowledge and institutional experience that reveals progress achieved, gaps and challenges encountered, and foundations on which a more mature, coherent, and sustainable national model can be built.

From this perspective, the paper does not treat previous national efforts as separate attempts or completed stages, but as integrated components of a continuing reform process that has helped prepare the legal, institutional, and technical environment on which the proposed reform is based. Their value is measured not only by what they achieved at the time, but by the cumulative knowledge they now offer, which can be used to avoid repeating challenges, accelerate reform, and strengthen the prospects for success of the proposed national model.

Recent years have witnessed several important national initiatives that reopened discussion of the philosophy of disability assessment. These include UNICEF's August 2022 report on disability assessments for social protection purposes in Palestine, institutional initiatives led by the Ministry of Health, the concept paper on the transition to functional assessment, and the related technical dialogues and consultations with national institutions and international partners. Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021 also reflected clear indications of an emerging legislative transition towards multidisciplinary approaches to disability and the needs of persons with disabilities.

At the same time, experience has shown that a number of structural problems remain at the legislative, institutional, and administrative levels, as well as in the relationship between assessment results and access to rights, services, and entitlements. This experience has exposed the limitations of the existing model and demonstrated the need to move beyond partial or sectoral reforms towards a more comprehensive approach that reconsiders the philosophy of the system itself and the place of assessment within the State's legal and institutional structure.

This paper draws on accumulated experience in legislative development, public policy formulation, stronger governance, and alignment of legislation with human rights conventions, as well as the expertise developed by government institutions, organizations of persons with disabilities, civil society organizations, universities, and United Nations agencies, all of which are partners in building a national model for reform. The transition to a rights-based functional assessment system is not the responsibility of a single institution. It is a multisectoral national project that requires the use of diverse expertise, stronger partnerships, and institutional consensus on the objectives and mechanisms of reform.

Accordingly, this reference paper adopts the principle of **cumulative reform** as one of its governing principles. It neither starts from zero nor merely reproduces previous work. Instead, it seeks to absorb and critically analyze earlier national experiences, build on their strengths, and address the shortcomings revealed by practice in order to develop **an integrated national reference** that establishes a new phase in reforming the disability assessment system in Palestine. This phase should be more consistent with the Constitution, the Convention, and national policies; more effective in realizing rights and supporting governance and decision-making; and more responsive to the needs of persons with disabilities.

4. Diagnosing Structural Deficiencies in the Disability Assessment System in Palestine

A modern national disability assessment model cannot be built without accurately diagnosing the structural deficiencies governing the existing system. The problem facing Palestine is not limited to procedural gaps, the need to develop assessment forms, or the modernization of medical committees. It extends to **the intellectual, legal, and institutional structure on which the system has been based for decades**, which continues to govern legislation, policies, and administrative practices and to shape the relationship between persons with disabilities and the State.

An examination of this system reveals that most of its components remain grounded in the traditional medical model, which views disability as an individual problem or medical condition requiring diagnosis and proof of incapacity, rather than as a cross-sectoral human rights issue connected to societal barriers and the State's obligations to remove them and enable persons with disabilities to exercise their rights on an equal basis with others. This understanding is reflected in several pieces of Palestinian legislation, including the Law on the Rights of Persons with Disabilities of 1999; the Civil Service Law of 1998 and its amendments; the Law of Service in the Palestinian Security Forces of 2005 and its amendments; Decree-Law No. (40) of 2020 Amending Judicial Authority Law No. (1) of 2002; the Penal Code of 1960 and its amendments; and the Criminal Procedure Law of 2001 and its amendments. It is also reflected in established regulatory and administrative practices governing the issuance of disability certificates, conditions for entry into public employment, access to services and entitlements, and the formation and mandates of competent committees. This has contributed to a legal and institutional system that indirectly reproduces exclusion despite developments in constitutional and international references.

The effects of this system are not confined to disability assessment but **extend to the entire system of rights and public policies**. Determination of medical status has become an entry point for deciding opportunities in education and employment, access to social protection, health insurance, and public services, and sometimes even a person's eligibility to participate fully and effectively in public life. Genuine

reform therefore cannot be limited to replacing assessment tools or modifying procedures. It requires reconstruction of the philosophy underpinning the entire system and redefinition of assessment as a tool for realizing the natural and constitutional rights of persons with disabilities, supporting planning and decision-making, and guiding policies in light of the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities, and developments in the national legal system in recent years.

From this perspective, the paper does not merely diagnose manifestations of deficiency in the existing system. It addresses **the structural deficiencies that have prevented Palestine from moving towards a modern national rights-based functional assessment system** by analyzing their legislative, institutional, and procedural roots and their impact on the realization of rights, the quality and inclusiveness of services, and the efficiency of public policies. Understanding these deficiencies is not an end. It is the starting point for building a comprehensive national reform model that is more consistent with the Constitution, the Convention, and national and international references, and more capable of achieving justice, strengthening governance, and enabling persons with disabilities to access their rights and services based on equality and non-discrimination.

4.1 The Centrality of the Medical Model and Its Problems

The principal problem in Palestine's disability assessment system does not lie in the assessment tools used, the composition of medical committees, or the administrative procedures followed. It lies in the philosophy underpinning the entire system. Systems, procedures, and institutions do not operate independently of the intellectual framework that created them. When the philosophy on which a system is founded is inconsistent with constitutional and rights-based developments and international standards, partial reforms remain incapable of addressing the structural defect at the system's core.

An examination of Palestinian legislation, public policies, and administrative practices shows that the medical model continues to serve as the implicit governing reference for understanding and assessing disability, despite fundamental developments in international human rights law and the State of Palestine's accession to the Convention on the Rights of Persons with Disabilities and completion of its publication in the Official Gazette, making it effective within the national legal system. Persons with disabilities continue to be assessed primarily by the degree of injury, health condition, or level of incapacity attributed to them, while essential questions concerning their capacity to participate, the barriers they face, their support needs, and the reasonable accommodation that would enable them to exercise their rights on an equal basis with others are marginalized.

The impact of this model is not confined to the health sector. It extends throughout the legislative and institutional structure, making medical diagnosis the starting point for decisions affecting a wide range of rights of persons with disabilities, including employment, education, social protection, health insurance, access to public services, and other disability-related entitlements. In this sense, the medical report ceases to be merely a health document and becomes a basis **on which decisions determining a person's legal status, the scope of rights and entitlements, and opportunities for participation in society are made**. The medical model is thereby given authority extending beyond its scientific and professional mandate, influencing the course of the lives of persons with disabilities within the legal and administrative system.

This approach has reduced disability to the individual, treating it as a condition requiring diagnosis, treatment, or proof of incapacity, rather than understanding it as the result of interaction between the person and environmental, legislative, institutional, and societal barriers that hinder full and effective participation in society. **This is the fundamental distinction between the medical model and the rights-based model: the former looks for incapacity in the person, whereas the latter looks for barriers in society.** The first leads to the classification of people, while the second holds the State and its institutions accountable for fulfilling their obligations to remove barriers and ensure substantive equality. The Convention on the Rights of Persons with Disabilities established this conceptual transformation by defining disability as resulting from interaction between persons with disabilities and the various barriers that hinder their full, effective, and equitable participation in society.

Moving beyond the medical model does not mean excluding medicine or diminishing its importance. Medicine remains essential to diagnosing health conditions and providing treatment and rehabilitation. The problem arises when medical diagnosis becomes the sole reference for legal and administrative decisions affecting rights and freedoms. **Disability is not merely a medical diagnosis, and rights must not be made dependent on a medical report**, because they extend beyond health status to participation, autonomy, accessibility, support needs, and the person's surrounding environment. The real challenge is not to replace one assessment form with another or modernize certain technical procedures, but to shift from a philosophy centered on proving incapacity to a constitutional and rights-based philosophy centered on the realization of rights. **This transition does not merely change assessment tools; it redefines the function of the State itself, from a State that verifies the existence of disability to a State that removes the barriers preventing persons with disabilities from enjoying their rights.**

4.2 The Medical Committee and the Problem of Determining Rights and Entitlements

The structural deficiencies in the disability assessment system in the State of Palestine are not limited to the centrality and governing philosophy of the medical model. They also extend to the institutional structure entrusted with assessing disability and determining its legal and administrative consequences across multiple interconnected fields. Over different periods, practice has assigned a central role to medical committees and their reports. Their function has consequently extended beyond diagnosing or medically describing health conditions and has come, directly or indirectly, to influence the determination of a wide range of rights, services, and entitlements relating to persons with disabilities.

In this sense, the medical report has been transformed from a technical instrument describing a health condition into a reference for determining the legal status of a person with a disability and the person's opportunities to access employment, education, social protection, health insurance, public services, and other rights and entitlements. Expanding the medical committee's function in this manner gives medical expertise a role beyond its professional mandate, making it influential in decisions concerning rights, policies, and resource distribution. These matters extend beyond medical diagnosis and require a multidimensional, multidisciplinary approach based on rights and support needs.

Practice also reveals additional problems related to the absence of unified national assessment standards, variations in practices among different committees, and the resulting differences in assessment outcomes, descriptions of conditions, and determination of consequences. Certain national reports and investigative inquiries have identified inconsistencies between the reports of local and higher medical committees and differences in the assessment of identical conditions. This raises serious questions regarding the coherence of the current system and its ability to provide legal certainty, equality, and equitable access to rights, services, and entitlements on an equal basis.

The effects of these problems extend beyond procedural or technical matters and directly affect the rights and legal status of persons with disabilities. When access to rights, services, and entitlements depends on medical assessments that are inconsistent or incapable of addressing the different dimensions of disability, opportunities to enjoy rights become unequal, and access to services or benefits that should be available on an equal basis with others may be delayed or denied. This also adversely affects the State's ability to produce accurate data, plan interventions and public policies, and direct resources efficiently and equitably, thereby institutionally reproducing inequalities despite constitutional and international obligations requiring otherwise.

The problem does not arise from the importance of medical expertise or the vital role of physicians and health professionals in diagnosing conditions and providing technical opinions. It arises from **assigning**

medical reports legal and institutional functions that exceed their nature and professional limits and are inconsistent with the constitutional and legislative developments witnessed by the State of Palestine, as well as with the philosophy of the Convention on the Rights of Persons with Disabilities. A medical report can identify a person's health condition and its medical effects, but it cannot, by itself, assess the environmental, organizational, and societal barriers the person faces; identify support needs; evaluate the impact of accommodation measures; or determine the possibility of full participation on an equal basis with others. These issues extend beyond medical diagnosis and require a multidimensional, multidisciplinary functional assessment grounded in rights, capacities, and support needs.

This issue has particular significance in light of developments within the Palestinian legal system itself. **Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021** adopted a definition of disability consistent with the CRPD, made disability in its rights-based sense a criterion for entitlement, and adopted a multidisciplinary rehabilitation committee. This reflects the Palestinian legislator's recognition that identifying the needs of persons with disabilities cannot rest on an individual medical opinion but requires the integration of medical, rehabilitation, social, and other relevant expertise. It confirms that the Palestinian legislative environment has already begun to recognize the need to move beyond the centrality of traditional medical assessment.

The publication of the Convention on the Rights of Persons with Disabilities in the Official Gazette, together with established Palestinian constitutional and administrative jurisprudence recognizing international human rights conventions and applying legal provisions in a manner that achieves their legislative purpose, also requires reconsideration of the role of medical committees within the current system. These committees should no longer remain the decisive body for determining rights and entitlements. They should become one component of a broader multidisciplinary functional assessment framework based on rights, support needs, reasonable accommodation, accessibility, the removal of barriers, and effective participation.

The real problem therefore does not lie in the existence of medical committees as such, but in **the centrality of their role and the broad scope of the legal consequences arising from their reports**. The greater the distance between medical diagnosis and the realization of rights, the greater the need to build a more comprehensive and integrated assessment system that redistributes roles among the various disciplines and relevant bodies and distinguishes between the medical function of diagnosing a health condition and the rights-based and institutional functions of identifying support needs, providing

reasonable accommodation, ensuring substantive equality for persons with disabilities, and respecting the rule of law as a constitutional foundation.

The problem of the medical committee thus reveals one of the most prominent structural deficiencies in the existing system. Decisions concerning rights, services, and entitlements remain influenced by the logic of medical diagnosis, whereas the contemporary rights-based model requires a broader approach in which medicine is one component of assessment rather than its sole reference. Matters concerning employment, education, social protection, health insurance, and community participation cannot be decided based on an individual medical opinion because they extend beyond health status to functional capacity, support needs, environmental barriers, and accommodation measures. These elements can only be addressed through multidisciplinary, rights-based functional assessment.

Addressing this problem is therefore not limited to reorganizing the work of medical committees or developing their procedures. It requires reconstructing the legislative and institutional framework governing the entire assessment system, including reviewing the concept of medical fitness found in several laws, establishing unified national assessment standards, strengthening governance, and moving towards a multidisciplinary, rights-based functional assessment system. **In this sense, the medical committee issue is not an isolated procedural problem. It reflects the need for a deeper transformation in the philosophy of the State itself, from a State that determines rights based on an individual medical diagnosis to a State that defines its obligations based on human rights, support needs, and the effective participation of persons with disabilities.**

4.3 The Medical Fitness Requirement in the Palestinian Legislative System

The dominance of the medical model affects not only institutional practices and the expanding role of medical committees, but also the legislative structure itself. The concept of **medical fitness** remains present in varying forms in a number of laws in force, whether as a criterion for determining legal eligibility, entering or remaining in public employment, or exercising legal rights.

This reflects the continued confinement of parts of the legislative environment within a legal philosophy developed under the traditional medical model, which connects an individual's health status to legal or occupational capacity and assumes that medical diagnosis or the determination of incapacity provides a sufficient basis for deciding eligibility and entitlement. In certain legislation, the medical fitness requirement has therefore become a legal instrument for determining a person's suitability to enjoy rights or enter employment without a comprehensive assessment of environmental and organizational factors,

accommodation measures, necessary support needs, or the possibility of removing barriers that may impede effective participation.

This problem is particularly evident in several pieces of Palestinian legislation, including Civil Service Law No. (4) of 1998 and its amendments; the Law of Service in the Palestinian Security Forces No. (8) of 2005 and its amendments; Decree-Law No. (40) of 2020 Amending Judicial Authority Law No. (1) of 2002; and other provisions that continue to use concepts of medical fitness or sound health in general and abstract terms. These provisions do not explain the relationship between a health condition and the requirements of the job or right being regulated, nor do they define the standards for assessing a person's ability to perform essential functions.

In practice, this grants official administrative bodies broad discretion to interpret and apply the concept of medical fitness and creates a risk that persons with disabilities who possess the competence and actual ability to perform the required tasks will be excluded merely because they do not meet traditional medical standards that do not reflect rights-based functional performance or take into account the effect of reasonable accommodation or supportive measures that could enable them to exercise their rights or perform their duties on an equal basis with others.

The problem does not lie in verifying a person's ability to perform a job or exercise a mandate, but in **reducing that ability to the concept of medical fitness itself**. A rights-based assessment does not ask whether a person is **"medically fit"** according to an abstract health standard. It asks whether the person is able to perform the required essential functions, what measures should be taken to enable this, and whether the State or institution has fulfilled its obligations to remove barriers and provide the necessary accommodation and support.

This issue has become increasingly important in light of developments in the Palestinian legal system in recent years. The Amended Palestinian Basic Law established equality and non-discrimination and required the protection of the rights of persons with disabilities. The Convention on the Rights of Persons with Disabilities (CRPD) redefined disability and linked it to interaction between a person and different barriers, and it became an integral part of the Palestinian legal system following its publication in the Official Gazette pursuant to Decree-Law No. (36) of 2023. Palestinian constitutional and administrative jurisprudence has also recognized international human rights conventions and the need to apply legal provisions in a manner that fulfills their intended purposes and ensures consistency between the national legal system and those conventions.

This leads to a particularly important conclusion: the transition towards **rights-based functional assessment** need not remain dependent on the completion of amendments to every law containing the concept of medical fitness. It has a direct legal basis in the Amended Basic Law, the Convention on the Rights of Persons with Disabilities following its publication in the Official Gazette, and Palestinian judicial jurisprudence regarding the status of international conventions within the national legal system. This firm constitutional and legislative foundation enables public authorities to begin reinterpreting and applying existing provisions more consistently with the rights-based model while the comprehensive legislative review and the gradual, orderly reconstruction of the legislative and institutional framework are completed.

The continued presence of the medical fitness requirement in a number of laws in force therefore reveals a gap between the constitutional and rights-based developments witnessed by the State of Palestine and traditional legislative structures that remain grounded in concepts superseded by contemporary international law. It also demonstrates the need to reconstruct the legal standards governing assessment of the ability to perform jobs and exercise rights and to transition from the standard of **medical fitness** to the standard of **functional capacity**. Assessment should thereby become a tool for enabling persons with disabilities and realizing their rights, rather than a means of excluding them or restricting participation based on health status alone.

4.4 Absence of Institutional Governance and Unified National Standards

The structural deficiencies in the disability assessment system in the State of Palestine are not limited to the dominance of the medical model, the central role of medical committees, or the extension of the concept of "medical fitness" into certain legislation. They also include the absence of **an integrated national governance framework** and unified national standards regulating the system and ensuring consistency among its components. This results in fragmented references, varying practices, weak integration, and limited capacity to build an equitable, coherent, and rights-based assessment system.

This problem is reflected in the multiplicity of bodies involved in disability and its assessment, the variation in their roles and mandates, and the absence of a unified national framework clearly defining the governing references, the responsibilities of different institutions, and the mechanisms for coordination, cooperation, and information exchange among them. As a result, institutions and sectors often operate according to different approaches and procedures, producing variations in practices and outcomes and making it difficult to establish a shared national understanding of disability and the function and objectives of assessment.

The absence of institutional governance is also reflected in the standards and tools used for assessment. The Palestinian national system continues to lack a unified framework based on international professional standards, procedural guidance, standardized forms, quality indicators, and mechanisms for ensuring consistency among different bodies. This leads to variations in assessment methodologies and outcomes and reduces legal certainty, justice, equality, and equal opportunities in access to rights, services, and entitlements.

The impact of this absence extends beyond procedural or institutional matters to the data system itself, despite the ongoing aggression and its catastrophic effects on persons with disabilities. The absence of a national framework for disability data governance results in multiple databases, differing classification and updating standards, and weak integration and interoperability among institutions. This limits the State's ability to produce accurate, disaggregated, and updated data on disability in Palestine and directly affects the quality of national planning, resource allocation, measurement of the impact of policies and interventions, and preparation of relevant national and international reports.

This issue has additional significance in light of the obligations arising from the State of Palestine's accession to the CRPD, particularly Article 31 on data collection and statistics and Article 32 on international cooperation. These provisions emphasize the importance of establishing national data and knowledge systems and developing the national capacities needed to produce, analyze, and use data in support of policies and the realization of rights. The issue is especially urgent in the Palestinian context amid rapid humanitarian and social transformations and the profound changes in disability and the needs of persons with disabilities resulting from the aggression against the Gaza Strip. An integrated national data and planning system has therefore become indispensable.

The absence of institutional governance also affects monitoring, accountability, and quality assurance systems. Mechanisms for periodic evaluation, performance measurement, results monitoring, the handling of complaints and grievances, and reporting remain limited or inconsistent across sectors in the Palestinian context. This weakens institutional learning, course correction, gap identification, and the continuous development of policies and practices. It also restricts the State's capacity to measure the impact of public interventions, evaluate the efficiency of resource allocation, and strengthen governance, transparency, and accountability for results at the national level.

This does not mean that all elements of governance are absent from the Palestinian legislative environment. Certain modern legislation, particularly **Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021**, published in the Official Gazette on 25 February 2021, contains important

indications that some foundations of institutional governance have begun to emerge. The Regulation provides for establishing a disaggregated database, adopting an accessible complaints and grievance system with a dedicated register, preparing quarterly periodic reports, and issuing an annual report setting out the results of implementing its provisions and the progress achieved. This reflects the legislator's recognition of the importance of data, monitoring, evaluation, and accountability as essential elements for the effective management and sustainability of the system.

These foundations, however, have not been translated into practice and have not yet developed into the integrated operational governance system envisaged by the Regulation, despite the years that have passed since its publication and entry into force. Disaggregated databases have not been completed, an accessible complaints and grievance system for persons with disabilities has not been activated, and periodic and annual reports have not been issued. This gap between legislative development and institutional implementation demonstrates that the principal challenge does not always lie in the absence of legal provisions, but also in completing the requirements for enforcement and translating them into stable operational practices that can be measured and held accountable. Despite their significance, these developments therefore remain partial and sectoral and have not yet reached the level of an integrated national governance framework governing the entire disability assessment system in Palestine, unifying its references, and ensuring sustainable implementation and measurement of results.

The real problem therefore does not lie in the absolute absence of tools or initiatives, but in **the absence of a governing national framework** that unifies references, ensures consistency among legislation, policies, and institutions, regulates the production and exchange of data, establishes national assessment standards, and creates sustainable monitoring, quality, and accountability systems. Governance is not an organizational element that can be added to the system at a later stage. It is the institutional structure that ensures a unified vision, integrated roles and responsibilities, continuity of reform, and the translation of rights-based principles into operational practices that can be implemented, measured, and held accountable.

The absence of institutional governance and unified national standards thus reveals a principal structural cause of continued variation and fragmentation within Palestine's disability assessment system. It also partly explains the continued reliance on isolated traditional medical approaches and the difficulty of transitioning towards a more integrated and rights-based model. The absence of a unified national reference not only creates variations in practices and outcomes but also limits the State's ability to establish a shared understanding of the function of rights-based functional assessment, develop consistent tools, produce comparable data, and direct policies and resources based on evidence and results.

Genuine reform of the assessment system therefore requires more than developing assessment tools or modifying regulatory procedures. It requires establishing **a governing national framework** that reorganizes the relationship among legislation, institutions, and public policies; provides a shared reference for standards, concepts, roles, and responsibilities; and ensures integration among data, services, monitoring mechanisms, and accountability systems.

In this sense, establishing a national governance and standards system is not an independent end. It is the foundation for transitioning from assessment based on diagnosis and incapacity to **rights-based functional assessment**, and from multiple references and fragmented practices in the State of Palestine to a unified vision and institutional integration. It is also the necessary entry point for building a multidisciplinary, rights-based assessment system capable of understanding disability as a cross-sectoral human rights issue, identifying support needs, removing barriers, and promoting the full and effective participation of persons with disabilities in society.

4.5 Absence of Multidisciplinary Functional Assessment

The essence of the transformation advocated by this paper does not lie in replacing one committee with another, amending the assessment form, or modernizing certain administrative procedures. It lies in reconstructing the philosophy of assessment itself. The true difference between the traditional and modern systems is not the number or disciplines of committee members, but the question the assessment process seeks to answer.

Under the traditional medical model, the principal questions are: **What is the illness, and what is the degree of incapacity?** Under the rights-based model founded on functional assessment, the essential questions become: **What is the impact of the health condition on the person's functional performance? What barriers restrict participation? What measures, support needs, and reasonable accommodation are required to enable the person to exercise rights on an equal basis with others?** And how can those barriers be removed and the person enabled to participate fully and effectively in society? This shift is not merely a difference in measurement tools, but a transformation in the philosophy of the State from classifying people to empowering them.

From this perspective, medical opinion alone, regardless of its importance, cannot provide an integrated understanding of the situation of a person with a disability. A physician can diagnose a health condition, but cannot independently assess all the functional, social, educational, vocational, psychological, and environmental dimensions affecting a person's ability to learn, work, move, communicate, live

independently, or participate fully in society on an equal basis. Reliance on medical expertise alone therefore inherently reduces disability to its health dimension and disregards the other elements of the contemporary understanding of disability.

For this reason, the Convention on the Rights of Persons with Disabilities established the rights-based framework for this transformation, while the International Classification of Functioning, Disability and Health (ICF) provided the scientific and methodological framework for understanding functional performance and analyzing the relationship among health conditions, functional capacities, and environmental and personal factors affecting participation. Guidance and standards issued by the World Health Organization, the International Labour Organization (ILO), and other relevant international references completed the technical and institutional frameworks required to translate this transformation into legislation, policies, systems, and practice, thereby supporting the shift from assessment based on medical diagnosis to assessment centered on functional performance, support needs, and full and effective participation in society.

Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021 began to incorporate this transformation by providing that rehabilitation services are delivered **based on a report issued by a multidisciplinary rehabilitation committee** established by a decision of the Minister of Health, rather than based on an individual medical report. The importance of this provision extends beyond regulating rehabilitation services to its legislative significance. It reflects the Palestinian legislator's recognition that the needs of persons with disabilities cannot be assessed through a medical perspective alone and that assessment requires the integration of different areas of expertise to achieve a comprehensive understanding of the person's capacities and needs.

Nevertheless, the national disability assessment and certification system remains fundamentally based on a logic different from this reform direction, creating **duality within the legislative environment itself**. On the one hand, the legislator has begun to adopt a multidisciplinary approach in certain fields; on the other, the general disability assessment system remains primarily grounded in the traditional medical model. The effects of this duality are not confined to technical matters. It affects the coherence of the legal system as a whole and restricts the ability of the State of Palestine to build a unified assessment system linked to rights, services, and public policies.

The challenge facing Palestine therefore does not consist merely of establishing a new committee. It requires **redefining the function of assessment** within the national system. Multidisciplinary functional assessment is not an end, but a means of producing more accurate and equitable knowledge about the

needs of persons with disabilities and linking that knowledge to planning, resource allocation, service design, and the realization of rights. Transitioning to this model is therefore the cornerstone of any national reform aimed at aligning legislation, policies, and practices with the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities, and the transformation already initiated by the Palestinian legislator through the 2021 Government Health Insurance Regulation for Persons with Disabilities.

4.6 Impact of the Current System on Rights, Services, and Public Policies

The effects of maintaining the traditional disability assessment system are not confined to technical or administrative matters. They directly affect the exercise of rights by persons with disabilities, the efficiency of public policies, and the ability of institutions to plan, allocate necessary resources, and provide services in a manner consistent with the constitutional principles and international obligations of the State of Palestine. When the assessment system uses medical diagnosis as the principal reference for decision-making, the consequences extend far beyond the issuance of a disability certificate to every field in which access depends on assessment results.

This is clearly evident in the relationship between assessment and the right to work. The **medical fitness requirement** contained in several pieces of Palestinian legislation, particularly the Civil Service Law and the Law of Service in the Palestinian Security Forces, affects the opportunities of persons with disabilities to enter and remain in public employment. In many cases, assessment is not based on an analysis of functional performance, job requirements, or the possibility of providing reasonable accommodation and support that would enable the person to perform duties efficiently. The current system also affects education, social protection, health insurance, rehabilitation, and public services, making the medical report one of the principal determinants of access to rights and entitlements in practice, even though such rights are linked not only to health status but to a broader set of functional, environmental, and social factors.

The consequences of this situation extend beyond individuals to State institutions themselves. The absence of a national functional assessment system prevents the production of accurate data reflecting functional performance, support needs, and necessary accommodation measures. It limits the ability of public institutions to undertake evidence-based planning, design public policies, direct resources efficiently, and measure the impact of programs and services. The State thereby loses one of the most important tools for managing public policies in health, social protection, education, employment, rehabilitation, and development, because data produced by the traditional assessment system do not provide an integrated

picture of the situation of persons with disabilities or the barriers preventing their full and effective participation in society.

The system also weakens institutional integration among different sectors in addressing a cross-sectoral issue because assessment serves different purposes, multiple bodies use its results, and no unified national framework links assessment to rights and services. This results in duplicated procedures, repeated assessments, varying standards, and reduced efficiency of institutional coordination, adversely affecting service quality and increasing administrative and financial burdens on both the State and persons with disabilities.

The rights-related effects are no less important than the institutional consequences. Maintaining the current system restricts the State's ability to fulfill its obligations under the Amended Palestinian Basic Law and the Convention on the Rights of Persons with Disabilities and delays the alignment of national legislation, policies, and practices with the rights-based model now governing the understanding of disability at the international level. It also impedes the transition from care to rights and from managing disability as a medical condition to addressing it as an issue of equality, non-discrimination, accessibility, support needs, and full and effective participation in society.

Accordingly, the problem is not the efficiency of assessment tools, the composition of committees, or the modernization of procedures. It is the system's ability to fulfill the function for which it was established. If the purpose of disability assessment is to enable persons with disabilities to access their rights based on equality, any system that does not assess functional performance, identify support needs, or connect assessment results to the removal of barriers will remain unable to achieve that purpose, regardless of the accuracy of its medical or administrative procedures. The essence of reform lies not in improving assessment tools, but in redefining the purpose the assessment system was created to achieve.

The diagnosis presented by this paper therefore shows that the challenge does not lie in a defect in one component of the disability assessment system, but in the persistence of a legal and institutional philosophy that is no longer consistent with the constitutional and legislative developments witnessed by the State of Palestine or with the transformation established by international human rights law. Transitioning to **multidisciplinary functional assessment** is not a technical development of the existing system. It reconstructs the function of assessment itself as a tool for realizing rights, strengthening governance, supporting planning and policymaking, and enabling persons with disabilities to participate fully in society. The question is therefore no longer how to assess disability, but how to build a national

system in which assessment serves as an entry point for realizing rights, removing barriers, directing resources, and developing public policies that are more equitable, efficient, responsive, and sustainable.

5. The Proposed Philosophy of Reform

Reform of the disability assessment system in the State of Palestine cannot be completed merely by amending legislation, developing assessment tools, or reorganizing institutional structures. Important as these measures are, they remain insufficient unless grounded in **an integrated philosophy of reform** that redefines the function of assessment and determines its place within human rights, public policy, and modern administration. The problem identified by this paper lies not only in inadequate procedures or limited tools, but in the persistence of a legal and institutional philosophy that can no longer keep pace with the evolution of disability concepts at the national and international levels.

Genuine reform therefore does not begin by changing forms or replacing committees. It begins by reconstructing the intellectual and legal foundation of the entire assessment system so that its role shifts from classifying people to empowering them, from determining incapacity to realizing rights, strengthening autonomy, and respecting dignity, and from producing certificates to producing the knowledge needed to support policy and decision-making. On this basis, the chapter addresses the philosophical foundations that should guide the proposed national reform as a governing framework for redesigning the legislative, institutional, and implementation system for disability assessment in the State of Palestine.

The proposed reform does not formally replace the medical model with another model or transfer certain international practices to the Palestinian context. It seeks to reconstruct the disability assessment system on new constitutional, rights-based, and institutional foundations that make assessment a means of realizing rights, supporting public policies, and promoting the full and effective participation of persons with disabilities in society, rather than being limited to classifying cases or determining degrees of incapacity.

This philosophy is based on the conviction that the State's function is not confined to verifying the existence of disability. It extends to removing barriers that hinder the equal exercise of rights, identifying support needs, providing reasonable accommodation, and enabling persons with disabilities to access education, employment, social protection, and public services based on equality and non-discrimination. Assessment thereby becomes a tool of good governance rather than an independent medical or administrative procedure.

Accordingly, this chapter sets out the intellectual foundations for national reform of the disability assessment system, beginning with redefining the function of assessment, establishing the concept of rights-based functional assessment and its connection to support needs, and moving from a philosophy centered on determining incapacity to one aimed at empowering people and promoting their full participation.

5.1 Redefining the Function of Disability Assessment

The reform proposed in this paper is based on **redefining the function of disability assessment** as the starting point for any sustainable legislative or institutional transformation. Before developing forms, restructuring committees, or modifying procedures, agreement is needed on the essential question: **Why do we assess disability?** The answer determines not only the nature of the assessment process, but also the philosophy of the entire system, the direction of its legislation, institutions, and tools, its legal and administrative consequences, and its relationship to the realization of rights.

Within the traditional system, the function of disability assessment has been linked to proving the existence of disability, determining its degree, or calculating a degree of incapacity. Assessment consequently became an end in itself and a tool for classifying people into categories that determine whether certain rights are granted or denied. This philosophy has been reflected in legislation, public policies, administrative practices, procedures, and forms. In many cases, a medical report or a medical committee's decision has become the principal gateway to services and entitlements without being directed towards understanding the person's actual capacities or identifying the support required to enable the exercise of rights.

The philosophy adopted by this paper, by contrast, is based on the understanding that the function of disability assessment is not to prove disability, but to identify the requirements for realizing rights. Assessment is neither an independent end nor a tool for passing judgment on persons with disabilities. It is a means of understanding the relationship among health conditions, functional performance, and environmental and social factors in order to identify the measures the State must take to ensure substantive equality, strengthen autonomy, remove barriers, provide support needs and requirements and accommodation measures, and enable persons with disabilities to exercise their right to full and effective participation in society.

This transformation redefines the relationship between persons with disabilities and the State. Under the traditional system, a person approaches the State to prove entitlement to certain rights. Under a rights-

based system, the State becomes the addressee of assessment results because it is legally required to take the measures necessary to realize those rights. **The focus thus shifts from proving the person's entitlement to identifying the State's obligations.** Assessment outputs are transformed from descriptions of an individual's condition into a determination of what State institutions must do in education, employment, social protection, health, rehabilitation, and other areas of rights and services.

Based on this understanding, the function of assessment moves from the narrow medical sphere into the broader realm of public policy. Assessment results should not end with the issuance of a certificate or report. They should form a basis for decisions concerning education, employment, rehabilitation, social protection, health insurance, accessibility, planning, resource allocation, the design of public programs, and the development of national databases. **In a modern State, assessment does not produce a certificate, but knowledge; it does not end with classifying people, but begins by identifying the public obligations of the State.** Assessment thereby becomes a component of governance, a tool for producing knowledge, supporting planning and decision-making, and measuring the impact of public policies, rather than merely an administrative procedure preceding access to a service or entitlement. It is a comprehensive vision based on the person's capacities, environment, and needs.

Redefining the function of assessment also requires redistributing roles among the different actors within the system. Medical expertise remains necessary for understanding a health condition, but it does not independently determine legal or rights-related outcomes. It becomes one component of a multidisciplinary assessment process integrating medical, rehabilitation, psychological, social, educational, and vocational expertise, thereby ensuring that decisions are based on a comprehensive understanding of the person's capacities, environment, and needs rather than on medical diagnosis alone.

This philosophy does not depart from the Palestinian constitutional or legislative framework. It is consistent with the Amended Basic Law and the Convention on the Rights of Persons with Disabilities following its publication pursuant to Decree-Law No. (36) of 2023. It also has legislative support in Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021, which adopted a multidisciplinary rehabilitation committee and confirms that the legal environment has already begun to move towards this understanding. **What is required today is completion of this process within an integrated national framework** linking legislation, policies, institutions, and practice.

Redefining the function of disability assessment therefore does not constitute a technical change to working tools. It represents a transformation in the philosophy of the State itself, from a State

that uses assessment to verify the entitlement of persons with disabilities to certain rights to a State that uses assessment to identify the measures it must take to realize those rights based on equality and non-discrimination. The success of the assessment system is no longer measured by the number of certificates issued or the accuracy of disability classifications, but **by its ability to translate assessment results into enforceable obligations, more equitable policies, more responsive services, and rights that are more effective in the lives of persons with disabilities.** This is the foundation on which a rights-based functional assessment system in Palestine should be built.

5.2 Rights-Based Functional Assessment

Functional assessment, as understood in this reference paper, does not mean introducing a new technical tool or replacing one medical model with another, more advanced model. It means **reconstructing the function of assessment itself** considering the human rights and disability inclusion approach. The essence of functional assessment lies not in measuring disability or determining a degree of incapacity, but in understanding the effect of interaction between a person's health condition and the surrounding environmental, institutional, social, economic, and cultural factors, and analyzing how this interaction affects the person's ability to exercise rights and freedoms and participate fully and effectively in society on an equal basis with others.

From this perspective, functional assessment does not seek to determine the extent of incapacity or classify people according to specific degrees or percentages. It focuses on identifying a person's functional capacities, barriers to participation, support needs, measures, accommodation, and the means required to enable the person to overcome those barriers. **The focus of assessment thus shifts from the question, "What is the person unable to do?" to the question, "What does the person need in order to exercise rights?"** This shift reflects not only a transformation in assessment tools, but also in the philosophy of the State, the function of law, and the purpose of public administration.

This understanding is grounded in the Convention on the Rights of Persons with Disabilities and the scientific framework provided by the International Classification of Functioning, Disability and Health (ICF), both of which view disability as the result of interaction between a person and different barriers rather than an inherent characteristic of the individual or an inevitable consequence of a health condition. The assessment process therefore extends to examining the physical, organizational, social, and cultural

environment, as well as the availability of accessibility, reasonable accommodation, and support needs, all of which affect the exercise of rights and are not external to the assessment process.

This requires functional assessment to become a multidimensional process integrating medical, rehabilitation, psychological, social, educational, and vocational expertise, with results based on a comprehensive analysis of the person's capacities, potential, environment, and needs. **The purpose of assessment is not to pass judgment on the person, but to produce reliable knowledge that helps State institutions identify their obligations, make equitable decisions, design more efficient interventions, and direct resources based on evidence and fairness.**

Adopting rights-based functional assessment also requires moving beyond a narrow sectoral view of disability so that assessment results become a national reference used by all sectors, including health, education, employment, social protection, rehabilitation, transport, housing, justice, and other relevant fields. **Assessment thereby shifts from a procedure preceding service provision to a national structure for producing knowledge, coordinating institutions, supporting planning and decision-making, and measuring the impact of public policies. This strengthens administrative performance, reduces duplication of procedures, and improves the efficient use of public resources.**

The expected impact of this transformation is not limited to improving assessment quality or developing services. It extends to reframing the relationship between persons with disabilities and State institutions. Instead of being subjected to examination to prove entitlement, the person with a disability becomes a partner in the assessment process whose will is respected, priorities are taken into account, and lived experience is recognized as an authentic source of knowledge rather than supplementary information. Assessment is thereby transformed from an administrative practice imposed on the person into a constructive participatory process developed with the person, aimed at enabling the exercise of rights, strengthening autonomy, and supporting full and effective participation in society.

ظ**Accordingly, the adoption of rights-based functional assessment is not a technical development of the disability assessment system. It establishes an institutional transformation that reconstructs the relationship among assessment, legislation, public policies, services, and rights, and makes assessment results an entry point for realizing rights, directing interventions, allocating public resources, and strengthening the efficiency of planning and decision-making. The success of the assessment system is no longer measured by the accuracy of disability classifications or the number**

of certificates issued, but by its ability to translate assessment results into enforceable legal and institutional obligations, more equitable and efficient public policies, more responsive services, and rights that are more effective in the lives of persons with disabilities. Functional assessment thereby becomes a principal foundation for building a State in which institutional efficiency is measured by the ability to remove different barriers, empower people, realize the system of rights, and translate knowledge into evidence-based public policies that achieve equality and human dignity.

5.3 The Relationship among Assessment, Support Needs, and Reasonable Accommodation

The philosophy of rights-based functional assessment is not completed merely by moving from medical diagnosis to the assessment of functional performance. The true value of assessment lies not in the assessment process itself, but in the results that follow from it. Under the rights-based model, assessment is not the end of the process but its beginning. It should lead to identification of the measures required to enable a person with a disability to exercise rights on an equal basis with others, rather than merely proving or classifying disability. Assessment does not produce only a description of a condition; it provides an objective basis for determining the obligations, decisions, and interventions that the State and its institutions must undertake.

From this perspective, assessment results, support needs, and reasonable accommodation are organically connected and mutually complementary. Functional assessment identifies the person's functional performance, barriers to participation, and environmental and institutional conditions affecting the exercise of rights. Support needs constitute the practical response to those results by identifying the services, assistive devices, human support, rehabilitation, assistive technology, or other interventions the person requires to live independently and with dignity. Reasonable accommodation represents the legal obligation of the State, institutions, and other duty-bearers to adopt appropriate modifications and measures that remove barriers and ensure substantive equality in the enjoyment of rights for persons with different disabilities. **Assessment thereby becomes the point of connection among diagnosing reality, identifying obligations, and designing the interventions required to realize rights.**

Functional assessment is therefore no longer merely a means of determining eligibility for a service or entitlement. It becomes the tool through which the State identifies the nature of its obligations. Instead of asking only whether the person qualifies for a particular service, the question becomes: what measures must be taken so that this person can exercise the right effectively? This transformation shifts attention

from the person's entitlement to the State's responsibility, and from granting a service to ensuring the exercise of a right.

This understanding requires assessment results to be translated not into percentages or degrees of incapacity, but into an integrated plan for enabling the person. The plan should identify support needs, reasonable accommodation, priority services, the bodies responsible for providing them, implementation and monitoring mechanisms, and periodic updating. The assessment process thereby shifts from a static administrative document to a dynamic tool for managing rights that evolves as the person's circumstances, environment, and needs change.

This model also requires the integration of institutional roles in implementing assessment results. The Ministry of Health should not remain solely responsible for their consequences. Assessment results should become a shared national reference for education, employment, social protection, rehabilitation, housing, transport, justice, and other sectors, each within its mandate. This ensures a unified reference, integrated interventions in the cross-sectoral field of disability, and efficient use of resources. The success of functional assessment is therefore measured not by the quality of the report issued, but by the ability of State institutions to translate its results into enforceable obligations, coordinated policies, integrated services, and practical measures that promote the full and effective participation of persons with disabilities.

This relationship is affirmed by the Convention on the Rights of Persons with Disabilities, which connects substantive equality to the removal of barriers and links the exercise of rights to the provision of reasonable accommodation and support where required. It is also consistent with the Amended Palestinian Basic Law, which makes the support of persons with disabilities and the protection of their rights a constitutional obligation of the National Authority, and with Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021, which adopts reasonable accommodation, multidisciplinary committees, accessibility, and non-discrimination as essential components of the health system.

Accordingly, the relationship among functional assessment, support needs, and accommodation is not merely procedural or organizational. It is the mechanism through which rights are transformed from abstract legal principles into practical and enforceable obligations. The more comprehensive and accurate the assessment, the more precisely support needs can be identified, the more appropriate and effective accommodation can be designed, and the more capable the State becomes of fulfilling its obligations. The disability assessment system thereby moves from a tool

for determining eligibility to an integrated system for realizing rights. It does not measure what a person is unable to do, but identifies what the State and its institutions must do to ensure the person's full and effective participation in society based on equality and human dignity.

5.4 From Determining Incapacity to Empowering the Person

The most profound transformation advocated by this reference paper may not consist of replacing one assessment model with another, reorganizing committees and institutions, or developing legislation and public policies. Rather, it lies in a systematic institutional transition in Palestine from a philosophy centered on **determining incapacity** to one centered on **empowering the person**. This is the true transformation in the international understanding of disability, and it has become a requirement of constitutional, legislative, and institutional development in the State of Palestine and a necessary condition for building **a national system that places the person at the center of legislation, public policies, and administration.**

For many years, the disability assessment system was connected to identifying a person's deficiencies, measuring the degree of incapacity, and proving limitations in capacity. Assessment consequently became a means of determining what the person could not do. Institutions focused on classifying people according to health conditions rather than analyzing the barriers they encountered or identifying the measures needed to enable them to exercise their rights. Incapacity thus became the center of the assessment process, while participation, autonomy, accessibility, support needs, and substantive equality were marginalized.

The philosophy established by this paper begins from an entirely different perspective. It **does not view a person with a disability through the lens of what the person has lost, but through the lens of what the person can achieve** when a supportive environment is available, barriers are removed, reasonable accommodation is provided, and support needs are accurately identified. Under this understanding, disability is not measured by what a person is unable to perform, but by the capacity of society and the State to remove barriers to the person's full and effective participation in public life.

The purpose of assessment is no longer to issue a report describing the person's condition, but to produce knowledge that helps build a more equitable and inclusive environment. Assessment becomes a tool for identifying opportunities rather than restricting them, a means of expanding rights rather than limiting them, and a mechanism for guiding public policies rather than merely an administrative procedure preceding access to a service. The true value of assessment is no longer measured by what it says about the person, but by the obligations it places on the State and its institutions. **In this sense, the State shifts from**

assessing incapacity to enabling rights, and assessment is transformed from a means of proving entitlement into a tool for identifying the obligations of State institutions.

The impact of this transformation extends beyond persons with disabilities to the culture governing public administration. When the purpose of assessment becomes **empowering the person**, the manner in which legislation is drafted, policies are designed, services are organized, data are produced, resources are allocated, and institutional performance is measured necessarily changes. Success is also measured differently. The efficiency of the system is no longer assessed by the number of certificates issued or the accuracy of medical classifications, but by its success in removing barriers, strengthening autonomy, expanding opportunities in education and employment, and achieving the full participation of persons with disabilities in all areas of life.

The transition from determining incapacity to empowering the person is therefore not a rights-based slogan or a linguistic change in terminology. It reflects a reconstruction of the relationship between the individual and the State on a new foundation within the disability assessment system. The State and its institutions are no longer assessed by their ability to determine the degree of disability or incapacity, but by their ability to guarantee the exercise of rights, achieve equality, eliminate discrimination, and provide an environment in which every person can develop capacities, participate in society, and live independently and with dignity.

This paper therefore calls not only for reforming the disability assessment system, but also for redefining the purpose for which the system exists. In a modern State, assessment is not a tool for proving incapacity, but a means of realizing rights; its purpose is not to classify the person, but to empower the person; and its success is not measured by the accuracy of its description of disability, but by its ability to translate assessment results into policies, legislation, services, and practical measures that make equality a lived reality rather than merely a legal principle. The transition from determining incapacity to empowering the person is not merely a reform of the disability assessment system. It represents a transformation in the philosophy of the State itself, from a State that assesses a person to prove incapacity to a State that assesses the person's needs in order to enable the exercise of rights. This is the philosophy that should guide national reform of the disability assessment system in Palestine during the coming period.

6. The Proposed National Model for Reforming the Disability Assessment System

Reform of the disability assessment system is not limited to replacing assessment tools, modifying administrative structures, or redistributing mandates among institutions. It requires reconstructing the

entire national system on new foundations consistent with the rights-based model of disability and responsive to the requirements of good governance, integrated institutional work, and evidence-based decision-making.

Functional assessment is not an isolated technical procedure. It forms part of an interconnected national system that begins with the constitutional, legislative, and institutional framework, passes through assessment processes and the production, management, and exchange of data, and ends with translating assessment results into policies, services, programs, and practical interventions that realize rights, promote equality, and guide the allocation of public resources.

Accordingly, this paper proposes an integrated national model for reforming the disability assessment system, based on five principal pillars: institutional governance; a multidisciplinary institutional framework; a clear distribution of mandates and responsibilities; a data governance and digital transformation system; and quality assurance and accountability. These pillars are not presented as separate elements or parallel reforms, but as interconnected components of a single system whose success depends on the integration and consistency of all its parts. A deficiency in any component will weaken the capacity of the entire system to achieve its objectives.

This model aims to transform the disability assessment system from a framework for issuing certificates and proving health status into **a national system for producing institutional knowledge on functional performance**, barriers, and support needs. This will enable the State to undertake evidence-based planning, allocate resources more equitably and efficiently, design services and interventions in accordance with actual needs, measure the impact of public policies, and strengthen consistency among legislation, policies, and practices and the Amended Basic Law, the Convention on the Rights of Persons with Disabilities, and the International Classification of Functioning, Disability and Health (ICF).

The proposed model for reforming the disability assessment system in the State of Palestine does not create a parallel institutional structure or add new administrative levels. It reorganizes relationships among existing institutions, defines their roles, and links their functions within a unified national framework that ensures integrated mandates, a unified reference, continuous coordination, data exchange, and shared accountability for results. Institutional reform is achieved not through a multiplicity of bodies, but through the effective distribution of roles, clear responsibilities, and efficient coordination.

The proposed national model is not limited to presenting a new vision for a committee or assessment mechanism. It establishes integrated institutional architecture that reconstructs the relationship among rights, governance, data, public policies, and evidence-based and results-based

decision-making. It thereby makes the disability assessment system in the State of Palestine a strategic pillar of modern public administration, inclusive development, the realization of rights, and respect for dignity, rather than merely a gateway to a service or entitlement.

6.1 Institutional Governance

Sustainable reform of the disability assessment system cannot be achieved through the development of assessment tools or modification of technical procedures alone. It must be grounded in a clear institutional governance system that identifies national leadership for reform, distributes responsibilities, regulates relationships among relevant bodies, and ensures coordination, integration, and accountability. By its nature, functional assessment does not fall within the mandate of a single sector. It intersects with health, social protection, education, employment, rehabilitation, statistics, justice, finance, and other sectors directly or indirectly connected to the realization of the rights of persons with disabilities.

From this perspective, the proposed national model treats the disability assessment system as **a cross-sectoral national system**, rather than a health program or administrative service for which the Ministry of Health alone is responsible. Although the Ministry of Health serves as the technical lead for the assessment process, the system's success requires an institutional framework ensuring integration among all ministries and institutions. Assessment results should become a unified national reference for coordinating policies and interventions, used by the different sectors in planning, decision-making, service provision, and monitoring implementation of resulting obligations. This ensures a unified reference and consistent practices.

This requires a shift from sectoral administration to **participatory governance**, based on clear roles and responsibilities, integrated mandates, effective information exchange, and collective and coordinated decision-making. The purpose is not to create new levels of bureaucracy, but to build an institutional system capable of unifying references, preventing duplication, and ensuring consistency among legislation, policies, and procedures. This will improve the efficient use of public resources and ensure the sustainability of reform.

The proposed governance is based on the principle that realizing the rights of persons with disabilities is not the responsibility of one body, but a shared responsibility of all State institutions, each within its mandate. Functional assessment results should therefore be transformed into a shared institutional language that links assessment to education, employment, social protection, rehabilitation, health services,

and development planning, rather than remaining confined to health files or procedures for issuing disability certificates.

The proposed institutional governance is also based on **national ownership of reform**, ensuring that development of the disability assessment system forms part of national policies rather than a temporary project linked to external funding or intervention. Sustainable institutional reform requires national institutions to lead the development process while benefiting from technical support provided by United Nations agencies and international partners within a framework that respects national priorities and strengthens, rather than replaces or bypasses, institutional capacities.

This is closely linked to the meaningful participation of persons with disabilities and their representative organizations, in accordance with Article 4(3) of the Convention on the Rights of Persons with Disabilities. Their participation should not be limited to general consultations, but should extend to designing the assessment system, developing its tools, adopting performance indicators, reviewing implementation results, and evaluating policy impact. This approach is a fundamental safeguard for building a system responsive to actual needs, strengthening public trust, and consolidating social accountability.

This vision does not begin in a vacuum. **It is grounded in the constitutional and legislative environment itself**, which has developed gradually in recent years towards the rights-based model of disability. The Palestinian legislator recognized at an early stage the importance of coordination and cross-sectoral institutional work when Article 7 of the Law on the Rights of Persons with Disabilities No. (4) of 1999 established obligations concerning coordination among official bodies in the field of disability rights. Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021 reinforced this direction by adopting a multidisciplinary committee and integrating reasonable accommodation, accessibility, and non-discrimination into the health system. Decree-Law No. (36) of 2023 on the publication of the Convention on the Rights of Persons with Disabilities in the Official Gazette then confirmed the Convention's status within the Palestinian legal system and opened the way for continued alignment of legislation, policies, and institutions with the rights-based model.

The challenge therefore does not lie in the absence of a constitutional or legislative basis for reform, but in the incomplete institutional structure required to translate these references into an integrated national system. The current stage requires not so much the production of new references as **the structuring of what has already been achieved** and connecting its components within a unified institutional framework that coordinates competent bodies, unifies references, integrates data, and ensures that assessment results are translated into policies, services, monitoring, and accountability in a consistent and sustainable manner.

Institutional governance in **the proposed national model** is not merely a regulatory framework. It is the governing structure within which all components of the national system are organized, ensuring clear mandates, a unified reference, integrated data, continuous coordination, and accountability for results. In this sense, the proposed national model does not establish an entirely new system so much as reengineer the existing one and guide it towards a more coherent and efficient national framework in which functional assessment becomes a tool for managing rights, guiding policies, supporting evidence-based planning, and strengthening development based on equality, non-discrimination, and respect for dignity.

6.2 The Multidisciplinary Institutional Framework

Transitioning to a rights-based functional assessment system requires reconstruction of the institutional framework through which assessment is conducted so that it reflects the multidimensional nature of disability and moves beyond the traditional structure based on a single or limited medical opinion. The proposed reform is not intended to replace one committee with another, but to redesign the institutional system so that it can produce a comprehensive assessment reflecting the person's functional performance, support needs, and the environmental factors affecting the exercise of rights. **This cannot be achieved merely by bringing different disciplines together in one committee. It requires an institutional framework that integrates those areas of expertise within a unified national methodology and produces a single, integrated assessment rather than multiple or conflicting determinations.**

This framework is based on integration among disciplines as a fundamental pillar of the rights-based model of disability, the International Classification of Functioning, Disability and Health (ICF), and modern international practice. Functional assessment cannot be based on medical expertise alone, regardless of its importance. It requires the integration of medical, rehabilitation, psychological, social, educational, vocational, and other relevant expertise, with each discipline contributing to an integrated understanding of the person's situation, capacities, barriers, and the measures required to enable the exercise of rights.

Accordingly, a multidisciplinary committee should not be understood merely as a group of experts from different disciplines, but as **an institutional mechanism for producing integrated professional knowledge on which subsequent decisions are based**. **The multidisciplinary committee does not issue separate judgments. It produces a unified joint assessment combining health, rehabilitation, psychological, social, educational, and vocational dimensions within a single analytical framework, ensuring consistent results that can be used for planning, the realization of rights, and decision-making.** The objective is not a multiplicity of opinions in itself, but a unified assessment reflecting all

relevant dimensions and translating them into results that can be used in planning, public service provision, and decision-making.

This model requires **separating technical assessment from administrative decision-making without separating their legal effects**. The principal function of the multidisciplinary framework is to produce an objective professional disability assessment based on evidence and approved national standards, serving as the technical and rights-based reference for subsequent decisions. Competent bodies then make administrative decisions, provide services, or grant entitlements, each within its mandate and in accordance with the Convention as published in the Official Gazette (Palestinian Gazette) and applicable legislation. This separation strengthens assessment independence, reduces conflicts of interest, and ensures that administrative decisions are grounded in a unified professional assessment rather than individual discretion or estimates unsupported by objective standards.

This framework should operate in accordance with unified national procedures and standards in the State of Palestine, ensuring consistent practice across governorates and relevant bodies, equal application of assessment criteria, high-quality outputs, and the possibility of review and updating where required. **Justice within the assessment system is not achieved merely through good standards. It requires consistent application, institutional supervision, and clear mechanisms for quality assurance and continuous improvement.** It also requires a national system for adopting and periodically reviewing professional standards and building the capacities of multidisciplinary teams. **The system cannot be effective unless assessment results become the technical and rights-based foundation for subsequent administrative decisions, ensuring their consistency with scientific standards and preventing assessment from becoming a formal procedure or a document filed without tangible practical effect.**

The role of this framework is not limited to assessing persons with disabilities. It extends to producing the institutional knowledge needed to support national planning, build databases, monitor trends, identify intervention priorities, and evaluate the impact of policies and services. Assessment is thereby transformed from an individual activity affecting only the person being assessed into a strategic source of information required by the State to manage policies in health, education, employment, social protection, rehabilitation, and development.

This vision is supported by a legislative environment that has already begun to incorporate this direction. Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021 provides for a

multidisciplinary rehabilitation committee to determine the rehabilitation needs of beneficiaries. This is an important indication that Palestinian legislation has begun to move from exclusive reliance on medical reports towards recognition of the value of integration among disciplines. This development remains confined to a limited area, however, and its philosophy should be extended to become the governing institutional framework of the disability assessment system as a whole, rather than only the rehabilitation sector.

The multidisciplinary institutional framework in the proposed national model therefore does not constitute a limited regulatory amendment. It reconstructs the institutional structure that produces the knowledge required to realize rights. The greater the framework's ability to integrate expertise, unify standards, and link assessment results to support needs and public policies, the greater the State's capacity to make decisions that are more equitable, efficient, and consistent. The multidisciplinary committee thus becomes not merely an assessment mechanism, but an institutional pillar that produces the knowledge required to realize rights and connects legislation, policies, and services. This supports the transition from managing disability as a medical matter to addressing it as an issue of rights, development, social justice, and evidence-based institutional governance.

6.3 Distribution of Mandates and Responsibilities

The proposed national model is based on the principle that the success of the functional assessment system depends not only on the quality of the assessment process, but also on a clear distribution of mandates and responsibilities, the integration of roles, and the consistency of interventions within a unified institutional framework. By its nature, functional assessment produces knowledge extending beyond the health sector. Its results must therefore be reflected across the sectors responsible for realizing the rights of persons with disabilities, each within its mandate. **Clear mandates are not intended to separate institutional roles, but to ensure their integration and prevent overlap, duplication, or conflicts of responsibility.**

From this perspective, the Ministry of Health has a leading role in the technical aspects of the assessment system, including developing national standards, approving assessment tools, supervising the quality of implementation, building professional capacities, and ensuring consistency with national and international references. Important as this role is, it does not make the Ministry the sole body responsible for assessment outcomes, because realizing the rights identified through assessment extends to fields beyond its institutional mandate in the cross-sectoral area of disability.

More specifically, the Ministry of Social Development, for example, uses assessment results to design social protection and care programs and direct social support services. The Ministry of Education and Higher Education uses them to strengthen inclusive education, provide reasonable accommodation and support services, and ensure the full participation of students with disabilities in the educational process. The Ministry of Labour uses them to support labour-market inclusion policies, develop inclusive workplaces, and activate equal opportunities. Bodies responsible for rehabilitation, transport, housing, justice, and other national institutions also use the results, each according to its mandate. Assessment results thereby become a shared national reference used by all sectors in exercising their respective legal mandates and institutional responsibilities.

The role of the **Palestinian Central Bureau of Statistics** is equally important as the national institution responsible for producing official statistics, developing statistical methodologies, and ensuring data quality and consistency. Integration between administrative data produced by the functional assessment system and national statistical data should be a principal foundation for an integrated national knowledge system that unifies data sources, improves their exchange and use, and supports planning, public policies, plans and programs, the definition of roles and responsibilities, measurement of intervention impact, and monitoring of national and international obligations. **The value of this integration is not limited to improving data quality. It transforms data into a strategic tool for managing policies, identifying priorities, allocating resources, and strengthening governance, transparency, and accountability. It thereby consolidates evidence-based sound administration and ensures that national decisions rest on a unified and updated knowledge base.**

Representative organizations of persons with disabilities have a fundamental role throughout this system, not merely as service providers, but as essential partners in designing public policies, reviewing tools, monitoring implementation quality, regularly evaluating the system's impact, and contributing to its continuous development, in accordance with **Article 4(3) of the Convention on the Rights of Persons with Disabilities**, which establishes the principle of close and active participation in all relevant decision-making processes.

This integration also includes **United Nations agencies and international partners**, whose role should focus on technical support, capacity-building, transfer of expertise, support for developing systems and tools, and stronger international cooperation in accordance with Article 32 of the Convention on the Rights of Persons with Disabilities, to which the State of Palestine has acceded and which has been published in the Official Gazette. Such support should strengthen rather than replace national capacities. This requires an effective institutional partnership among competent national bodies, organizations of persons with

disabilities, and international partners based on knowledge exchange, capacity-building, transfer of best practices, and participatory system development, ensuring alignment of international support with national priorities. **Sustainable reform requires institutional, operational, and administrative leadership to remain with national institutions, while international cooperation is used to strengthen their efficiency, accelerate the transition, and consolidate national ownership of reform without replacing national will or the legal responsibilities of competent institutions.**

This model requires a permanent institutional coordination mechanism among the different bodies that extends beyond seasonal meetings or temporary committees. It should provide for regular information exchange, review of performance indicators, data analysis, monitoring of decision implementation, resolution of operational problems, and periodic updating of reform priorities. The proposed national system is based not only on distributing mandates, but on their effective management, continued coordination among its components, and **shared responsibility for results.**

This distribution does not redraw the legal mandates of all relevant institutions and bodies in the State of Palestine. It reorganizes the relationship among them in light of **the philosophy of rights-based functional assessment**. Each institution retains its legal mandate but exercises it within a unified national system that shares the same reference, relies on unified assessment results, and pursues the common objective of enabling persons with disabilities to exercise their rights on an equal basis with others.

The distribution of mandates and responsibilities in the proposed national model is therefore not based on separating institutions and partners, but on their effective integration. All relevant bodies operate within one integrated system, share knowledge and responsibility, and adhere to the same national references and standards. Disability assessment thereby becomes a point of connection among legislation, public policies, administration, and services, and an entry point for building a State that is more consistent in its decisions, more efficient in its institutions, and more capable of realizing the rights of persons with disabilities based on equality and human dignity.

6.4 Data and Digital Transformation

The effectiveness of the proposed national model is not achieved merely by establishing a functional assessment system, defining mandates, or developing databases. It depends fundamentally on an integrated system for **quality assurance and accountability**, continuous improvement, reliable results, and periodic review and evaluation. As a tool for realizing rights, functional assessment loses its value if standards differ between bodies or outputs vary by governorate, institution, or practitioner.

The proposed national model therefore requires **a unified national quality assurance framework** covering assessment standards, working procedures, approval of measurement tools, qualification of multidisciplinary teams, technical supervision mechanisms, and regular periodic auditing of practice. This will ensure consistent application, equitable outcomes, and alignment with national and international references. Quality assurance is not limited to reviewing procedural integrity. It extends to evaluating the system's ability to achieve the purpose for which it was established, namely **the realization of rights and enabling persons with disabilities to participate fully and effectively in society**.

This also requires **a national indicator and performance measurement system** that measures not only the number or speed of assessments, but their actual impact on improved access by persons with disabilities to inclusive education, employment, vocational and technical training, social protection, rehabilitation, public services, accommodation, support needs, and quality of life in general. The success of the proposed assessment system is measured not only by procedural efficiency, but by its ability to create a tangible impact in the lives of persons with disabilities and translate assessment results into more responsive public policies, higher-quality services, and rights that can be more effectively realized.

A complaints, grievance, and periodic review system is a fundamental safeguard of quality and accountability. Persons with disabilities must be able to object to assessment results, request their review, or challenge procedures or decisions affecting their rights through mechanisms that are independent, accessible, prompt, and transparent; provide due procedural safeguards; respect their right to participate and be heard; and ensure effective redress where appropriate, as required by the Convention on the Rights of Persons with Disabilities. The function of these mechanisms extends beyond protecting individual rights to **correcting institutional deficiencies, improving the quality of practice, strengthening public confidence in the system, and consolidating a culture of learning and continuous improvement.**

Accountability also extends to the institutional level. Competent bodies should be subject to periodic monitoring and evaluation based on clear and measurable performance indicators, regular national reports, evaluation mechanisms, and reviews of performance quality and impact. This should extend beyond verifying procedural integrity to **measuring the system's success in realizing rights, improving service quality, strengthening public policy efficiency, and ensuring equitable decisions**. Results should be published in a manner that strengthens transparency, supports institutional learning, and provides a basis for continuous development of legislation, policies, and procedures and for evidence-based and results-based resource allocation.

This direction is connected to, and consistent with, the national and international legal environment, including the Amended Palestinian Basic Law and the Convention on the Rights of Persons with Disabilities (CRPD), to which the State of Palestine has acceded and which has been published in the Official Gazette. This is particularly true of obligations relating to implementation monitoring, data collection, and the involvement of persons with disabilities and their representative organizations in monitoring and evaluation processes. These obligations strengthen transparency, accountability, and continuous improvement and consolidate governance in the administration of the disability assessment system.

Quality assurance and accountability in the proposed national model are therefore not a subsequent phase of the assessment process. They form the governing framework for its sustainability and development. The more firmly established the quality standards and the more independent and effective the accountability mechanisms, the greater the system's ability to produce reliable assessments, more equitable and consistent decisions, and more responsive Palestinian public policies. This makes the disability assessment system part of the national governance system rather than merely an administrative or technical procedure and ensures that the ultimate objective of assessment remains the realization of the system of rights, the promotion of dignity, and the achievement of substantive equality.

6.5 Quality Assurance and Accountability

The proposed national model cannot be completed by establishing institutional governance, developing a multidisciplinary framework, organizing the distribution of mandates, or creating a national data governance system unless these elements are complemented by an integrated quality assurance and accountability system that ensures the sustainability of reform, maintains consistency in practice, and supports continuous improvement. **Institutional systems are measured by their capacity to review performance, correct course, respond to change, and produce a continuous cycle of learning and development.**

The quality assurance system should be based on unified national standards for functional assessment and periodic mechanisms for reviewing implementation quality, verifying consistency of practices across governorates and institutions, monitoring performance differences, analyzing their causes, and establishing continuous improvement plans. Equality in rights requires equality in the quality of procedures, assessment standards, and implementation outcomes.

Accountability should also extend beyond traditional administrative oversight and become part of rights-based governance. It should not be confined to verifying compliance with procedures but should measure the system's capacity to achieve its essential purposes, foremost among them the removal of barriers, identification of support needs, promotion of the full and effective participation of persons with disabilities, and improvement of services and policies. Performance indicators thereby become connected to the system's rights-related and social impact.

A system for complaints, grievances, accessible forms, and periodic review is among the fundamental safeguards of quality and accountability. Persons with disabilities must be able to object to assessment results, request their review, or challenge related procedures and decisions through mechanisms that are independent, accessible, prompt, and transparent; provide due procedural safeguards; respect their right to participate and be heard; and ensure effective redress where appropriate. These mechanisms do more than resolve individual disputes. They are also an institutional source of continuous learning, identification of deficiencies, improved performance quality, and the development of policies and procedures based on practical experience, thereby strengthening the system's fairness, sustainable development, and public trust.

This direction is reinforced by provisions of **Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021** concerning the establishment of a disaggregated database covering all health services provided to persons with disabilities and their families (Article 16); the establishment of a complaints register and the documentation, follow-up, and response to complaints through means accessible and appropriate for different disabilities (Article 17); and the requirement that competent bodies prepare quarterly and annual reports on implementation results (Article 7). **This confirms that quality assurance and accountability are not new concepts in the Palestinian legislative environment, but are grounded in existing legal foundations that need to be completed, activated, and linked within a more comprehensive and integrated national framework.**

Accountability also extends to the institutional level, with competent bodies subject to periodic monitoring and evaluation based on clear and measurable performance indicators, regular national reports, internal and external evaluation mechanisms, and independent reviews of performance quality and impact. This extends beyond verifying procedural integrity to measuring the system's success in realizing rights, improving service quality, strengthening policy efficiency, and ensuring fair and consistent decisions. **Results should be published** in a manner that strengthens transparency and provides a basis for developing legislation, policies, and procedures and allocating resources based on evidence and results.

Transparency is equally important. The system should adopt an institutional disclosure policy based on issuing periodic reports containing performance indicators, disaggregated data, the level of progress in implementing reform, existing challenges, and corrective measures taken, while protecting personal data and privacy. **Transparency is not a media objective. It is a tool of good governance that strengthens public trust, enables monitoring and evaluation, supports evidence-based accountability, continuously improves the quality of policies and decisions, and forms part of the rule of law under international standards.**

The quality system should also be based on **the continuous institutional participation of persons with disabilities and their representative organizations**, not only in policy preparation, but also in reviewing performance indicators, evaluating service quality, analyzing report findings, and proposing development priorities. This is consistent with the authentic participatory approach adopted by this reference paper as a foundation of good governance and **with the international obligation set out in Article 4(3) of the Convention on the Rights of Persons with Disabilities (CRPD).** Quality in rights-based systems is not measured solely from within the institution, but also through the experience of persons with disabilities and their representative organizations and the impact of policies, procedures, and services on their daily lives.

Quality assurance and accountability in the proposed national model therefore do not constitute a phase following implementation of reform, but the governing framework for its sustainability and development. The greater the system's capacity to measure performance, learn from results, correct course, and strengthen transparency, the greater its capacity to respond to societal transformations, achieve sustainability, and consolidate public trust. **In this sense, functional assessment is transformed from an administrative procedure subject to review into a national system that learns from practice, develops its tools, and continuously improves performance, ensuring that it remains faithful to the purpose for which it was established: realizing the rights of persons with disabilities based on equality, non-discrimination, human dignity, and evidence-based governance.**

7. Legislative Architecture for Managing Transition

The transition towards a rights-based functional assessment system requires more than developing institutional models or modernizing assessment tools. It requires **reengineering the legislative environment** governing the disability assessment system to ensure consistency with the constitutional and international transformation in the understanding of disability. Institutional reform cannot be sustained

without a coherent legislative environment that redefines the function of disability assessment, unifies the governing legal references, eliminates conflicts or duplication among provisions, and **provides an integrated legal framework supporting an orderly and sustainable transition towards the rights-based model.**

This paper does not assume a legislative vacuum. It recognizes legislation accumulated across different stages, some aspects of which reflect important progress towards the rights-based model, while other provisions remain based on **the medical model or the medical fitness requirement**. The challenge is therefore not to create an entirely new legislative system, but to **reengineer the existing legislative framework** in a manner that ensures consistency among the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities, and national legislation and regulations, and establishes a gradual and orderly transition towards a functional assessment system in which rights, support needs, participation, and **the removal of barriers** govern all relevant legal provisions, **thereby strengthening the unity and stability of the legal system and ensuring that reform is practicable and sustainable.**

7.1 The Amended Palestinian Basic Law

The Amended Palestinian Basic Law constitutes the supreme constitutional reference on which all legislation, policies, and institutions governing the disability assessment system must be based. Accordingly, any legislative reform in this field must not be limited to aligning laws and regulations with international developments. **First and foremost**, it must proceed from the governing constitutional principles established by the Basic Law, particularly the obligation to respect and protect rights, equality and non-discrimination, and the rule of law.

Article (22) of the Basic Law is of particular constitutional importance because it is the provision most directly connected to the rights of persons with disabilities. It regulates the matter at two different levels. The first paragraph leaves the regulation of social and health insurance services and disability and old-age pensions to the ordinary legislator, while the second paragraph establishes a more binding constitutional rule by providing that **supporting persons with disabilities is a duty** and that the National Authority **guarantees** them education and social and health insurance services. This distinction does not merely reflect a difference in drafting. It demonstrates a clear constitutional intent to afford special protection to persons with disabilities and to impose on the State an obligation that goes beyond merely regulating services to ensuring their actual provision and realization.

It follows that the role of the ordinary legislator, through ordinary laws and subordinate legislation, is not to create or confer rights, but to build the legislative and institutional frameworks necessary to enable persons with disabilities to enjoy them on an equal basis with others. Legislation regulating the **disability assessment system** must therefore be interpreted and applied as a tool for implementing the constitutional obligation firmly established in the Basic Law, not as a means of restricting or limiting it. Accordingly, the purpose of assessment should not be to prove a person's entitlement to a right, but to identify the means and measures that enable the State to fulfil its constitutional obligation to guarantee that right.

This understanding is reinforced when **Article (22)** is read within the constitutional system as a whole, particularly **Article (9)**, which enshrines the principle of equality and non-discrimination; **Article (10)**, which requires the National Authority to work without delay to accede to international covenants and declarations that protect human rights and renders human rights and fundamental freedoms binding and subject to respect; and **Articles (30) and (32)**, which guarantee the right of access to justice and establish the National Authority's responsibility for any infringement of rights and freedoms. The integration of these provisions leads to a clear constitutional conclusion: protecting the rights of persons with disabilities is not a policy or administrative commitment, but an enforceable constitutional obligation whose effects must be reflected in all legislation, policies, and public practices.

Accordingly, the transition towards a rights-based functional assessment system represents a natural extension of the constitutional development enshrined in the Amended Basic Law and a practical embodiment of the obligations it places on the National Authority towards persons with disabilities. In requiring their rights to be guaranteed, the Basic Law did not stop at recognizing those rights. It placed on the State the responsibility to establish the legislative and institutional frameworks necessary for their realization. The function of the disability assessment system is therefore not to prove disability or restrict access to rights, but to identify the measures and support needs that enable the State to fulfil its constitutional obligations, promote equality, and ensure the full participation of persons with disabilities in society.

The Amended Palestinian Basic Law is therefore not merely a constitutional reference for reforming the disability assessment system. It is the foundation whose provisions require the system to be rebuilt so that the proposed functional assessment system becomes a tool for realizing rights, strengthening good governance, and supporting public policy, rather than a means of restricting rights or limiting access to them. In this sense, the constitutional rule is transformed from a general obligation to guarantee the rights of persons with disabilities into an implementable, measurable, and accountable legislative and

institutional system, thereby strengthening the rule of law and ensuring the practical effectiveness of constitutional rights.

7.2 Convention on the Rights of Persons with Disabilities (CRPD)

The Convention on the Rights of Persons with Disabilities marked a qualitative turning point in the development of international human rights law because it did not add a new category of rights. Rather, it **reconstructed the legal philosophy governing the relationship among persons with disabilities, the State, and society.** The Convention moved away from viewing disability as a medical condition or a basis for entitlement and recognized it as a human rights issue grounded in human dignity, equality, non-discrimination, autonomy, accessibility, full and effective participation in society, and respect for human diversity. Through **Article (4/3)**, it also established one of its foundational principles: the close and active participation of persons with disabilities, through their representative organizations, in developing legislation and policies and making decisions that affect them, embodying the principle internationally known as **"Nothing About Us Without Us."**

From this perspective, the function of national legislation is no longer limited to regulating services or defining the conditions for benefiting from them. It is also required to remove the legal, institutional, and environmental barriers that prevent persons with disabilities from exercising their rights on an equal basis with others. In this sense, the Convention did not merely provide a new understanding of disability. It redefined the function of the State itself, making its role one of enabling persons with disabilities to exercise their rights and taking the legislative, administrative, and institutional measures necessary to realize them, rather than merely managing the effects of disability or the services associated with it.

This transformation was directly reflected in the **concept of disability assessment**. The purpose of assessment is no longer to determine a degree of incapacity or classify persons according to their health conditions, but to **understand functional performance, analyze the barriers that limit participation, identify support needs, and connect assessment results to the realization of rights**. Assessment has therefore become one of the implementation tools that enables the State to fulfil its obligations under the Convention, rather than merely an administrative procedure preceding access to a service or entitlement.

The Convention also established an integrated set of general obligations requiring the continuous review of legislation, policies, and institutions to ensure their compatibility with the principles of equality and non-

discrimination, accessibility, reasonable accommodation, universal design, and the effective participation of persons with disabilities and their representative organizations in all relevant decision-making processes. Legislative harmonization is therefore no longer a process limited to amending certain legal provisions. It has become a continuing process of legislative and institutional reform aimed at aligning the entire legal environment with the rights-based model established by the Convention.

The Convention on the Rights of Persons with Disabilities is particularly important to the reform of the disability assessment system because it does not impose a rigid institutional model or a uniform assessment mechanism. Rather, it defines the principles and objectives that must govern the system. It does not prescribe how States should organize their committees or institutions, **but it obliges them** to ensure that the system's outcomes are consistent with human dignity, non-discrimination, autonomy, full and effective participation, the removal of barriers, the provision of reasonable accommodation, the identification of necessary support needs, accessibility, and inclusion. These are the principles underpinning rights-based functional assessment.

Accordingly, the importance of the Convention on the Rights of Persons with Disabilities in this context lies not only in its status as an international reference, but also in its role as the rights-based framework through which national legislation is reinterpreted, public policies are evaluated, institutions are redesigned, and a **disability assessment system is built on foundations consistent with the philosophy of human rights**, the rights-based development model, and an inclusion-based approach. Following the Convention's publication in the Official Gazette, these principles became part of the national legal environment and must therefore be reflected in the legislation, public policies, institutions, and practices related to the disability assessment system.

7.3 Decree-Law No. (36) of 2023 on the Publication of the Convention on the Rights of Persons with Disabilities

Decree-Law No. (36) of 2023 on the publication of the Convention on the Rights of Persons with Disabilities in the Official Gazette represents a pivotal milestone in the development of the Palestinian legal system and in the process of harmonization with international human rights conventions through a disability inclusion approach. It transferred the Convention's provisions from the sphere of international obligation into domestic application and made them part of the national legal system, in whose light legislation, policies, and practices concerning the rights of persons with disabilities must be read and

interpreted. The Convention is therefore no longer merely an international reference to guide the State when appropriate. It **has become part of the national legal environment that must be taken into account in legislation, interpretation, application, and the exercise of public powers.**

The importance of this Decree-Law is not limited to the formal publication of the Convention, but lies in its legal effect. Its provisions must now be treated as a legal reference that must be considered when interpreting national legislation, developing public policies, and exercising administrative and judicial powers, thereby ensuring consistency between the State of Palestine's international obligations and its domestic legal system. Publication in the Official Gazette (Palestinian Gazette) is not intended merely to complete a formal procedure. It has the legal effect of incorporating the Convention's provisions into the governing reference framework for Palestinian legislation, application, and interpretation.

This understanding is reinforced by Palestinian constitutional and administrative jurisprudence, which has established the principle of respect for international human rights conventions and **their supremacy over ordinary Palestinian laws within the hierarchy of legislation**, as well as the application of legal provisions in a manner that achieves the purpose for which they were enacted. In Decisions Nos. (4) and (5) of 2017, the Palestinian Constitutional Court affirmed that international conventions that complete the required constitutional and legal procedures become integrated into the Palestinian legal system and constitute a reference that must be considered when interpreting national legislation, thereby ensuring consistency between domestic law and the State of Palestine's international obligations. The High Court of Justice also established an equally important principle: legislation recognizing rights is not enacted merely to declare them but requires the administration to take all decisions and measures necessary to implement those rights and achieve the purpose for which the legislation was enacted. The function of legislation is to protect, regulate, and realize rights in practice, not merely to recognize them in theory.

Accordingly, publishing the Convention on the Rights of Persons with Disabilities in the Official Gazette does not merely require references to it in legislation or reliance on it when needed. It requires a **comprehensive review of the existing legal and regulatory provisions** to determine their consistency with the principles established by the Convention, particularly in areas that remain grounded in the traditional medical model or base rights on concepts of incapacity, medical fitness, or other concepts that contemporary international law has surpassed.

The **legislative architecture proposed in this reference paper** therefore does not proceed from the idea of replacing national legislation with the Convention, but from the principle of interpretation and harmonization. This means reinterpreting and developing national legislation in light of both the constitutional and Convention-based references in a manner that achieves the internal consistency of the Palestinian legal system and avoids duplication or conflict among its different sources. The aim is not so much to produce new provisions as to redirect the legislative system towards a unified philosophy in which functional assessment, the realization of rights, non-discrimination, reasonable accommodation, and support needs are the governing references.

Decree-Law No. (36) of 2023 therefore does not represent the end of the process of accession to the Convention on the Rights of Persons with Disabilities. Rather, it marks the starting point for reengineering the Palestinian legislative system in light of the Convention's status within the national legal system. Following its publication in the Official Gazette, the requirement is no longer merely to rely on the Convention as an interpretive reference, but to make its principles a standard for developing, interpreting, and applying legislation and for measuring its consistency with the State of Palestine's constitutional and international obligations. This ensures that the system of rights is transformed from legal provisions into an institutional reality and practices that can be implemented, measured, and held accountable.

7.4 Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021

The Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021, published in the Official Gazette on 25 February 2021, represents one of the clearest legislative indicators of the Palestinian legal environment's emerging shift towards the rights-based model of disability. Although the Regulation governs a specific sectoral field, namely health services, its provisions go beyond the traditional regulatory framework for health services and clearly incorporate a number of the principles and mechanisms established by the Convention on the Rights of Persons with Disabilities. This makes it an advanced legislative model on which the transition towards a national functional assessment system can be built.

This development is evident, first, in the Regulation's adoption of a definition of persons with disabilities based on the interaction between impairment and barriers; its prohibition of discrimination based on disability; its recognition of the right to health services on an equal basis with others; and its affirmation of reasonable accommodation, accessibility, free and informed consent, and human dignity. All of these

concepts lie at the heart of the rights-based model established by the Convention and are no longer confined to international discourse, but have become part of the Palestinian legislative framework. The Regulation also provides for disability-disaggregated databases and an accessible complaints system.

Perhaps the most prominent manifestation of this shift in the Government Health Insurance Regulation for Persons with Disabilities is its adoption of a **multidisciplinary rehabilitation committee**, reflecting **the legislator's recognition that identifying the needs of persons with disabilities cannot be based on medical diagnosis alone, but requires the integration of medical, rehabilitation, social, and other relevant expertise**. This step represents an important change in Palestinian legislative thinking because, in a field that extends beyond sectoral boundaries, it establishes the concept of a multidisciplinary assessment system on which functional assessment systems are based. It also enshrines the principle that sound decisions must be grounded in an integrated understanding of functional performance, support needs, and environmental factors, rather than a single medical opinion.

This development is not limited to the technical aspect of assessment. It extends to establishing an integrated system of institutional governance through the Regulation's explicit provisions requiring the creation of a disaggregated database, linking it to the assessment and development of services, adopting an accessible complaints and appeals mechanism, creating a classified register for such complaints and appeals, requiring the Ministry to respond within specified timeframes, guaranteeing the right to challenge decisions before the courts, and requiring the preparation and publication of periodic and annual reports on the Regulation's implementation. These provisions demonstrate that the Palestinian legislator has already begun linking service delivery, data production, monitoring, transparency, accountability, and evaluation. **These are the elements on which the governance of modern functional assessment systems is based and which this reference paper seeks to structure, build upon, and complete within an integrated national framework.**

Nevertheless, the existence of these advanced legislative foundations does not mean that the institutional structure of the functional assessment system is complete. Practice reveals a clear gap between legislative development and institutional implementation. Although a legal basis exists for establishing databases, activating complaints and appeals mechanisms, issuing periodic reports, and strengthening monitoring, these tools have not yet been transformed into an integrated operational system capable of achieving the Regulation's objectives. In addition, several laws in force continue to rely on medical fitness, incapacity, or

other traditional concepts that are not fully consistent with the philosophy of rights-based functional assessment. **The principal challenge therefore lies not in the absence of legal provisions, but in completing their harmonization, enforcement, integration, and structuring within a robust and unified national framework for data governance, quality assurance, accountability, and cross-sectoral institutional coordination, thereby ensuring consistency among legislation, institutions, and practice.**

This conclusion is particularly important to this paper because it confirms that the Palestinian legislative environment **is not starting from zero**. It already contains advanced legislative models that incorporate many foundations of the rights-based model and establish several institutional governance tools that now constitute pillars of functional assessment. The **proposed legislative architecture** therefore does not seek to replace or bypass these experiences, but to build on them, unify them, extend their scope, and connect them within an integrated national framework governing all areas of disability assessment based on rights, disaggregated data, accountability, and coordinated institutional action.

Accordingly, the Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021 is not merely a sectoral regulation governing health services. It constitutes legislative evidence that the transition towards the rights-based model is no longer a future concept, but a legislative pathway that has already begun within the Palestinian legal system. The legislative architecture proposed in this paper therefore does not start by creating new rules, but by completing an existing legislative trajectory, unifying its foundations, generalizing its mechanisms, and connecting them within an integrated national framework that makes the disability assessment system more consistent with the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities, the requirements of good governance, and the realization of rights.

7.5 Reconstructing the Medical Fitness Requirement in Palestinian Legislation

The medical fitness requirement is one of the most deeply rooted concepts in the Palestinian legislative structure. In varying forms, it appears in a number of laws and regulations governing public employment, the judiciary, the security services, and other sectors as a necessary condition for appointment, continued employment, or the exercise of certain legal rights. This concept emerged within a legislative context associated with the medical model of disability, which measures an individual's health condition and

conformity with abstract medical standards as the basis for determining eligibility or entitlement. This made a single medical diagnosis the criterion for legal and administrative decision-making.

Although this concept reflected the prevailing understanding of disability at earlier stages, developments in international human rights law, comparative constitutional law, and the Convention on the Rights of Persons with Disabilities require its legal structure and legislative philosophy to be reconsidered. The question that should guide legislation is no longer whether a person is **"medically fit"** according to an abstract medical standard, but whether the person is capable of performing the essential tasks associated with the position or right being regulated, and what measures, support needs, and reasonable accommodation should be provided to enable the person to perform them independently and on an equal basis with others.

From this perspective, the problem does not lie in requiring verification of a person's ability to perform a position or exercise a function, but in reducing that ability to the concept of medical fitness and excluding the functional, environmental, and organizational elements that have become integral to modern rights-based assessment. A person may have a particular health condition or disability and still be capable of performing all essential functions efficiently once barriers are removed, reasonable accommodation and necessary support are provided, and the work environment is reorganized to ensure equality, non-discrimination based on disability, and equal opportunities. Conversely, relying solely on medical fitness may exclude capable and qualified persons merely because their health conditions do not conform to abstract traditional medical standards that neither reflect actual functional performance nor measure their real ability to exercise the relevant functions.

This problem is clearly evident in several Palestinian laws, including Civil Service Law No. (4) of 1998, as amended; the Law of Service in the Palestinian Security Forces No. (8) of 2005, as amended; Decree-Law No. (40) of 2020 amending Judicial Authority Law No. (1) of 2002; and other provisions that continue to make medical fitness a general condition for appointment to public positions in the civil and security public sectors. These laws do so without clarifying the relationship between this condition and the nature of the position or its essential functions, without clearly regulating the duty to provide reasonable accommodation, and without adopting functional assessment as the appropriate tool for determining capacity to perform. This perpetuates a legislative philosophy in which medical diagnosis serves as an entry

point for legal decision-making, even though contemporary constitutional and international references have moved beyond this approach.

This approach conflicts with the development of the Palestinian legal system itself. The Amended Basic Law establishes a constitutional obligation to guarantee the rights of persons with disabilities, while the Convention on the Rights of Persons with Disabilities redefined disability by linking it to the interaction between the person and various barriers. The Convention became part of the Palestinian legal system following its publication pursuant to Decree-Law No. (36) of 2023, in light of constitutional and administrative jurisprudence affirming the relevance of international human rights conventions and the application of legal provisions in a manner that achieves the purpose for which they were enacted. The Government Health Insurance Regulation for Persons with Disabilities No. (2) of 2021 also provides clear indications that the Palestinian legislator has adopted an approach based on multidisciplinary assessment, support needs, governance, and data rather than relying solely on abstract medical diagnosis.

Accordingly, the proposed legislative architecture does not call for abolishing the requirement to verify a person's ability to perform a position or exercise a function. Rather, it calls for reconstructing the legal standard on which that ability is assessed. This requires moving from the standard of **"medical fitness"** to that of **"functional capacity,"** so that assessment is based on analyzing the essential tasks associated with the position or right being regulated and the extent to which they can be performed after reasonable accommodation and appropriate support are provided and barriers are removed, rather than on an abstract health condition or medical diagnosis in itself. This transformation rests on an existing legal basis, namely the publication of the Convention on the Rights of Persons with Disabilities pursuant to Decree-Law No. (36) of 2023 and Palestinian constitutional jurisprudence concerning the legal status of international human rights conventions. **This requires interpreting and applying legislation in force considering the Convention's provisions and enables the commencement of a rights-based functional assessment system without waiting for all legislative amendments to be completed, while the harmonization process continues in parallel to consolidate this transition.**

صThis transformation reshapes the relationship between assessment and legislation. Functional assessment no longer becomes a tool for excluding persons with disabilities, but a means of identifying the obligations of the State, the employer, and the competent authorities before determining that a person cannot perform the relevant tasks. The analytical burden therefore shifts from searching for limitations in

persons with different types of disabilities to determining whether the State and the institution have fulfilled their obligations to remove the various barriers, provide reasonable accommodation and necessary support, and enable the person to perform essential tasks on an equal basis with others.

This proposed approach is consistent with the legal status of the Convention on the Rights of Persons with Disabilities within the Palestinian legal system following its publication in the Official Gazette, and with constitutional and administrative jurisprudence requiring national legislation to be interpreted and applied in a manner that achieves the purpose for which it was enacted. **This makes it possible to begin applying the proposed philosophy of rights-based functional assessment without waiting for the amendment of all relevant legislation to be completed, while legislative harmonization continues in parallel.**

Reconstructing the medical fitness requirement therefore does not merely involve replacing one legal term with another. It entails rebuilding the legal standard governing conditions for appointment to public positions, the exercise of rights, and the determination of legal eligibility in areas regulated by legislation. It shifts the focus from assessing health status to assessing functional capacity, from focusing on the person's limitations to focusing on the obligations of the State and institutions, and from a logic of exclusion to a logic of enablement. **In this sense, the proposed legislative architecture becomes a tool for rebuilding the relationship among legislation, assessment, and rights, making competence, functional capacity, equality, non-discrimination, and human dignity the governing principles of relevant Palestinian legislation and establishing a gradual and sustainable legislative transition towards a national rights-based functional assessment system in the State of Palestine.**

8. National Roadmap for Managing the Transition

The transition towards a national rights-based functional assessment system represents **one of the most complex institutional reform and legislative and administrative transformation projects in the field of the rights of persons with disabilities**. It is not limited to replacing assessment tools or developing procedural forms, but requires rebuilding the relationship among legislation, institutions and relevant authorities, data, services, and public policies, as well as redefining the function of the State itself in relation to disability. The success of this transition therefore does not depend on issuing new legislation or establishing a new committee, but on managing a multi-stage national transition based on gradual implementation, institutional coordination, capacity-building, risk management, and continuous learning.

This approach ensures the sustainability of the reform process, maintains continuity in the services provided, and prevents transitional gaps that could affect the rights of persons with disabilities.

Accordingly, this paper proposes a **national roadmap for managing the transition**, consisting of **three interconnected and complementary stages**, preceded by a governing framework for reform management and accompanied by systems for monitoring, evaluation, risk management, impact measurement, and institutional learning. This makes the transition an organized national project rather than a set of fragmented sectoral interventions or temporary initiatives.

8.1 Stage One: Foundation

The foundation stage is the starting point of the reform process and aims to establish the legal, institutional, technical, and digital foundations for the transition towards a rights-based functional assessment system. This stage is not limited to preparing documents or forming committees. It seeks to **build comprehensive national readiness for reform, establish its governing references, and provide the institutional conditions necessary to ensure an orderly and sustainable transition.** It is based on the recognition that the success of reform depends not only on the quality of the proposed functional assessment model, but also on the ability of the State and its institutions to absorb, operate, and manage it consistently. The principal objective of this stage is therefore to **build national consensus around the philosophy of the proposed reform, unify the reference frameworks, and establish the governing structure for managing the transition before initiating any fundamental change in implementation practices.**

The priorities of this stage include reviewing relevant national legislation and completing its harmonization with the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities as published in the Official Gazette (Palestinian Gazette), and relevant sectoral legislation. They also include adopting the national functional assessment framework, developing professional guidelines and standards, preparing standardized forms, establishing the foundations of institutional governance, and defining the roles and responsibilities of the various relevant authorities.

This stage also requires establishing the national structure necessary to lead the reform and manage the transition by adopting clear institutional arrangements for guidance, coordination, monitoring, and the allocation of responsibilities. Such arrangements must ensure a unified reference framework, continuity of institutional work, and the resolution of issues that may arise during implementation. Cross-sectoral

reforms cannot be managed through temporary arrangements or separate initiatives. They require a **stable national framework for governance and institutional leadership** that ensures complementary roles, coordinated interventions, shared accountability for results, and the long-term sustainability of the reform process.

A national disability data governance system should be established, together with the digital infrastructure necessary for the secure and orderly exchange of information. National standards should be developed for data quality, classification, updating, protection, integration, availability, and interoperability, ensuring that data become a core foundation for planning, decision-making, impact measurement, and evidence- and results-based public policy. **This stage should also include preparations for conducting a specialized national disability survey through an inclusion-based approach, nearly fifteen years after the last specialized survey was conducted in 2011. This constitutes a national and legal imperative consistent with Article (31) of the Convention on the Rights of Persons with Disabilities concerning data and statistics and with the obligations arising from Article (32) concerning international cooperation, capacity-building, and knowledge transfer. It would allow United Nations support and the support of partners and donors to be used in developing and sustaining the national disability data system.**

This stage also includes preparing an **integrated national capacity-building plan** targeting medical, rehabilitation, social, legal, and administrative personnel. The plan should ensure the development of **a shared national understanding of the rights-based model of disability** and strengthen institutional capacity to apply functional assessment consistently and sustainably. Capacity-building should not be limited to initial training. It should include the development of professional accreditation programs, the preparation of national trainers, and the strengthening of partnerships, thereby establishing a permanent national base of expertise and specialized knowledge.

In parallel, **broad national consultations** should be launched with government authorities, organizations of persons with disabilities, professional associations, academic institutions, and international partners, in application of the principle of close and active participation established in Article (4/3) of the Convention on the Rights of Persons with Disabilities and the principle of **"Nothing About Us Without Us."** These consultations should not only build consensus on the details of the reform. They should also consolidate

national ownership of the reform process, strengthen its institutional and societal legitimacy, and ensure that the new system reflects the actual needs and aspirations of persons with disabilities.

This stage should conclude with the adoption of the **national functional assessment framework**, approval of the institutional model governing the system, adoption of national guidelines and standards, and completion of the legislative, institutional, and digital infrastructure. These steps should confirm readiness to begin a gradual and orderly transition based on clear references, defined roles, and stable mechanisms for governance, monitoring, and accountability.

The foundation stage therefore represents the construction of the constitutional and institutional infrastructure governing the functional assessment system by establishing its legal references, governance arrangements, knowledge and digital infrastructure, and the national capacities required to manage reform. In this sense, it is the stage at which the idea of reform moves from a conceptual level to national readiness, so implementation begins from an integrated, clear, and coherent framework capable of developing and responding sustainably to future changes.

8.2 Stage Two: Gradual Implementation

The gradual implementation stage is the phase in which the reform system moves from legal and institutional references to practical application and actual operation. It is not based on the immediate replacement of the existing system, but on managing an orderly institutional transition that balances the requirements of change with operational stability, ensures the regular continuity of services for persons with disabilities, protects acquired rights, and limits the operational and regulatory risks accompanying reform.

This approach recognizes that major institutional transformations are not managed by severing ties with the existing reality, but by building on what has already been achieved, proceeding gradually, learning during implementation, and continuously correcting the course. This stage therefore begins with the phased application of the functional assessment system in accordance with international standards and approved national guidelines through pilot programs in selected governorates, institutions, or fields. This allows the tools and procedures to be tested, their effectiveness to be measured, practical challenges to be analysed, and necessary improvements to be introduced before gradual expansion at the national level.

This stage also requires managing a transitional period during which, where appropriate, certain components of the existing and new systems operate in parallel. This enables comparison of results, verification of the reliability of functional assessment tools, the gradual resolution of implementation issues, and assurance that services are not interrupted and rights are not affected during the transition. Transition management is not intended to abolish the existing system immediately, but to manage the transformation safely and systematically in a manner that allows learning and development.

At the same time, the national digital system should be fully operationalized, and databases across institutions should be linked within a unified national data governance framework. This will ensure unified references, the secure exchange of information, and the production of disaggregated and updated data to support planning, decision-making, and the measurement of the impact of policies and interventions. Monitoring systems, periodic reporting, complaints mechanisms, and performance indicators should also be activated so that they become part of the system's management cycle rather than subsequent or exceptional procedures.

This stage also requires the continued implementation of specialized and sustainable capacity-building programs. These should not be limited to initial training, but should include professional supervision, technical guidance, learning through implementation, the exchange of expertise, and the development of national personnel capable of leading the system in the future. This is particularly important given the multidisciplinary nature of functional assessment, which requires a shared and sustainable institutional culture that transcends the traditional boundaries of disciplines and administrative mandates.

This stage should also include an integrated national change-management program aimed at strengthening acceptance of the reform within institutions, building a shared understanding of the philosophy of functional assessment, and improving communication with all relevant stakeholders. The success of institutional reform depends not only on the quality of systems and tools, but also on the ability of institutions and individuals to understand and adopt the change.

At the same time, implementation should be accompanied by continuous legislative and regulatory review to address any challenges or gaps revealed through practice and to ensure that practices remain consistent with the Amended Palestinian Basic Law, the Convention on the Rights of Persons with Disabilities (CRPD), and relevant national legislation. This review should also be linked to regular mechanisms for risk

management, impact measurement, and institutional learning, ensuring that reform remains a dynamic process capable of continuous development.

This stage should conclude with the completion of the gradual national expansion of the functional assessment system and its adoption as a unified operational framework among the competent authorities, after verifying readiness, procedural stability, the efficiency of assessment tools, the effectiveness of governance, data, monitoring, and accountability systems, and the completion of institutional coordination and interoperability arrangements.

Accordingly, the gradual implementation stage is not merely a phase for operating a new system. It is the stage in which reform is transformed from a legal and institutional project into stable operational practice. During this stage, the philosophy of functional assessment moves from legal provisions into the daily practices of institutions, and the State begins to reshape its approach to disability based on rights, support needs, participation, and substantive equality. **In this sense, this stage constitutes the bridge through which the reform system moves from institutional readiness to the gradual consolidation of sustainable institutional change, laying the foundation for functional assessment to become an integral part of the permanent structure of public administration and policymaking in Palestine.**

8.3 Stage Three: Sustainability and Evaluation

The sustainability and evaluation stage is the phase in which institutional transformation is consolidated, and **the functional assessment system moves from being a reform project to becoming an integral part of the State's institutional structure**. The success of reform is not measured merely by completing implementation stages, issuing legislation, or operating new systems, but by the functional assessment system's ability to maintain its effectiveness, adapt to change, learn from implementation results, and continue to strengthen and develop its performance systematically and sustainably.

This stage requires the adoption of an institutional system for continuous evaluation and learning based on periodic reviews of legislation, public policies, professional standards, assessment guidelines, and working procedures in light of implementation results, scientific and technological developments, judicial jurisprudence, legislative developments, and international standards. The sustainability of reform does not mean preserving the status quo. It means ensuring the system's ability to renew itself, adapt, and respond to emerging challenges and needs.

The national data system should also become a strategic tool for planning and decision-making. Functional assessment results should be used to analyze national trends, monitor changes in the situation of disability in the State of Palestine, measure the impact of public policies, plans, programs, and services, identify intervention priorities, direct public resources, and prepare national and international reports. This strengthens the transition from reactive administration to strategic management based on evidence and future foresight.

In this context, the functional assessment system should become a national platform for institutional innovation and knowledge production through the development of indicators, the promotion of research and applied studies, and the use of digital transformation and the responsible application of artificial intelligence technologies. This will strengthen the capacity to anticipate future developments and respond to them efficiently and flexibly. It also requires consolidating a culture of learning so that the results of monitoring, evaluation, complaints, periodic reports, and technical reviews become continuous inputs for developing policies and procedures and improving performance. Institutional reform is not a project that ends at a specific point in time. It is a cumulative and dynamic process based on continuous learning, constant improvement, and periodic reassessment.

In the Palestinian context, this stage is of additional importance considering rapid humanitarian, social, and demographic changes and the profound effects of the ongoing aggression against the Gaza Strip on persons with disabilities. These circumstances have led to fundamental changes in patterns of disability, support needs, reasonable accommodation, and reconstruction and recovery priorities. Sustaining the functional assessment system is therefore an essential condition for developing flexible policies capable of responding to the changing needs of persons with disabilities in ordinary and exceptional circumstances, strengthening long-term planning, and improving crisis management.

This stage also requires stronger institutional cooperation among national authorities, academic institutions, research centers, organizations of persons with disabilities, and international partners, in implementation of Article (32) of the Convention on the Rights of Persons with Disabilities concerning international cooperation. Such cooperation supports national knowledge production, applied studies, measurement of the impact of reform, and the development of new generations of professionals and policymakers, while ensuring that continued development is not dependent on particular individuals or temporary projects.

This stage should conclude with the consolidation of a **rights-based functional assessment system** as part of the permanent structure of public administration, so that periodic review, the production of disaggregated data, performance measurement, institutional development, and continuous learning become stable, institutionalized, and sustainable operational practices rather than activities linked to temporary reform programs or time-limited funded projects.

Accordingly, the sustainability and evaluation stage is intended not merely to preserve the new system, but to ensure its capacity to learn, innovate, adapt, and continuously develop. It marks the transition from a time-bound institutional reform to a **permanent national system for governance, planning, and the realization of rights** that is continuously renewed based on evidence, data, and results. Functional assessment thus becomes part of the State's institutional structure and a strategic tool for producing knowledge, directing policies, allocating resources, measuring impact, and strengthening accountability and transparency. The system's capacity for self-review and continuous development also becomes a criterion for the efficiency of public administration itself. The ultimate objective of this stage is therefore not merely the stability of the system, but the consolidation of an institutional model capable of sustainably realizing the rights of persons with disabilities, keeping pace with national and international developments, and supporting the building of a State that is more inclusive, equitable, and responsive to present and future requirements.

8.4 Success Indicators

The success of the transition is not measured merely by issuing legislation or operating new systems, but by their ability to bring about a real transformation in the understanding of disability, the management of the assessment system, and the realization of rights in practice. The reform process should therefore rely on an **integrated national system of performance and impact indicators** that measures legislative, institutional, operational, and rights-based transformation and is not limited to measuring completed activities or compliance with procedures. In this sense, measuring success is not a stage that follows reform, but a component of governance itself and a tool for institutional learning, course correction, transparency, and accountability.

The measurement system should include legislative indicators assessing the extent to which national legislation is aligned with the Amended Basic Law and the Convention on the Rights of Persons with Disabilities, and the extent to which reliance on concepts of incapacity and medical fitness declines in

favour of functional capacity and support needs. It should also include institutional indicators measuring the clarity of the distribution of mandates, the effectiveness of coordination mechanisms, the level of interoperability among institutions, the efficiency of the multidisciplinary framework, and the stability of the national governance approach.

The rights-based functional assessment system should also include operational indicators measuring the quality of functional assessment, the consistent application of national standards, the integration of databases, the effectiveness of monitoring and appeals systems, the speed of responses to complaints, and the use of data in planning and decision-making. These indicators should be accompanied by measures of capacity-building, institutional learning, and change management to ensure that the system is capable of continuous development and adaptation.

The decisive measure of reform success, however, remains **rights-based impact indicators**, namely the extent to which this transformation affects the lives of persons with disabilities themselves. Reform outcomes should therefore be measured by improvements in access to education, employment, rehabilitation, health care, and social protection; greater autonomy and independent living; expanded accessibility of physical and digital environments; increased participation; reduced discrimination and exclusion; and improved satisfaction with and confidence in the new system.

To achieve this, measurement should rely on clear, measurable, and verifiable indicators and on periodic reviews grounded in data and evidence. This makes it possible to assess progress objectively, monitor gaps and challenges, identify intervention priorities, direct public resources, and update public policies, legislation, and procedures whenever necessary. The real value of indicators does not lie in producing reports or data for their own sake, but in their ability to transform measurement results into institutional knowledge and that knowledge into continuing reform decisions that improve performance, strengthen policy efficiency, and consolidate evidence- and results-based learning. This ensures the sustainability of reform and its capacity to adapt to changing circumstances and renewed needs.

Accordingly, success indicators are not merely a tool for determining whether the reform process has been completed. They constitute a permanent national system for measuring impact, institutional learning, and future foresight. The success of the proposed functional assessment system in the State of Palestine is not measured by the number of reports issued, committees established, or procedures taken, but by its ability to bring about a sustainable transformation in

the relationship between the State and persons with disabilities, so that rights, support needs, participation, and substantive equality become the governing references for legislation, policies, and public practices. In this sense, success indicators themselves become a tool of good governance, a safeguard for the sustainability of reform, and a means of consolidating the building of a more inclusive and equitable State capable of realizing the rights of persons with disabilities based on human dignity, equality, and non-discrimination.

9. Conclusion

At the national level, this reference paper proceeds from the conviction that reforming the disability assessment system in the State of Palestine is no longer a technical matter concerning the development of assessment tools or the amendment of administrative procedures. It has become a constitutional, legislative, institutional, and rights-based imperative connected to the State of Palestine's ability to fulfil its obligations towards persons with disabilities, develop more equitable, efficient, and sustainable public policies, and advance inclusive development based on rights and evidence. The essence of reform therefore does not lie in replacing one assessment model with another or restructuring the competent committees, but in rebuilding the philosophy underpinning the entire disability assessment system and redefining the relationship among assessment, the system of rights, and the obligations of the State.

This paper has shown that key aspects of the disability assessment system in Palestine continue to reflect the legacy of the traditional medical model, resulting in the reduction of disability to medical diagnosis and the linking of rights, services, and entitlements to concepts of incapacity and medical fitness. By contrast, the development of the Amended Basic Law, the Convention on the Rights of Persons with Disabilities following its publication in the Official Gazette, and subsequent legislative developments reveal a gradual shift towards a new rights-based model grounded in functional performance, the removal of barriers, the identification of support needs, and the promotion of full and effective participation in society.

Accordingly, this paper proposes an integrated national framework for managing this transformation, based on a multidisciplinary, cross-sectoral functional assessment system grounded in rights, data, and institutional governance. Under this framework, assessment does not end with the issuance of a report or certificate. It becomes an integrated institutional process that begins with understanding a person's functional performance and the barriers they face, proceeds through identifying support needs and reasonable accommodation, and concludes by translating assessment results into evidence-based policies,

services, interventions, and decisions. This strengthens the State's capacity to plan, allocate resources, measure impact, and realize rights effectively.

The paper has also shown that this transformation does not begin from zero and does not require severing ties with the existing system. Rather, it builds on what has already been achieved within the legislative and institutional environment and continues the existing development process by reengineering the relationship among legislation, institutions, data, and policies within a unified national framework. This framework ensures a unified reference, institutional integration, and shared accountability for results, and establishes a gradual, sustainable, and adaptable approach to managing institutional transformation.

At the same time, the paper has affirmed that this transition faces genuine challenges related to rebuilding institutional culture, strengthening cross-sectoral coordination, developing national capacities, establishing a national data governance system through a disability inclusion lens, and managing institutional change gradually and sustainably. These challenges do not diminish the importance of reform. Rather, they underscore the need to approach it as a long-term national project for rebuilding one of the core functions of the modern State.

The expected impact of this transformation is not limited to improving disability assessment mechanisms in Palestine. It extends to enhancing the quality of legislation, the efficiency of public administration, the effectiveness of national planning, the equitable allocation of resources, transparency and accountability, and the quality of services. This makes the disability assessment system a central pillar of rights-based policy. It also makes the reform a model for developing public administration and evidence-, data-, and good-governance-based policymaking, extending beyond the disability sector itself to strengthen the State's capacity for planning, response, and the realization of rights in a more efficient and inclusive manner.

Accordingly, the ultimate outcome of reform does not lie in establishing a new committee, adopting different assessment forms, or developing certain technical procedures. It lies in building a national system that makes functional assessment a tool for producing knowledge, disaggregated data a foundation for planning and decision-making, governance a framework for accountability and coordination, and legislation a means of realizing rather than restricting rights. This enables the State to understand the reality of disability and manage its public policies based on rights, evidence, and results.

Ultimately, the transformation Palestine needs today is not a transition from one assessment model to another, but a transition from a State that verifies the existence of disability to a State that identifies its obligations towards persons with disabilities and works to fulfil them through more responsive and inclusive policies, legislation, and institutions. Assessment then becomes an entry point for realizing rights rather than proving incapacity; data become a tool for understanding reality rather than merely a means of classification; policies become more responsive to people; and dignity, equality, and non-discrimination become firmly established principles governing the work of public institutions.

In this sense, reforming the disability assessment system is not a reform targeting a single sector. It forms part of a broader national project to rebuild certain core functions of the State and to build a more inclusive and equitable State that is better able to place people and their rights at the centre of legislation, public policy, sustainable development, and rights- and evidence-based national planning. The more capable the assessment system becomes of understanding the circumstances of persons with disabilities, identifying their needs, and removing the barriers that prevent their participation, the greater the State's own capacity to realize the system of rights, direct resources efficiently, strengthen good governance, and develop public policies and programs that are more responsive, equitable, and sustainable for present and future generations.