Sexual and reproductive health and rights of women and girls with disabilities

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About EDF
The European Disability Forum (EDF) is an independent organisation of persons with disabilities that defends the interests of more than 80 million Europeans with disabilities. EDF is a unique platform which brings together representative organisations of persons with disabilities from across Europe. EDF is run by persons with disabilities and their families. We are a strong, united voice of persons with disabilities in Europe.

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Sexual and reproductive health and rights of women and girls with disabilities

Introduction

Women and girls with disabilities are still confronted with many forms of discrimination in all areas of life. Because of myths, stereotypes and lack of knowledge of disability, they face discriminatory treatment and abuses that particularly affect their sexual and reproductive health and rights, with important and sometimes irreparable consequences on their lives.

This position paper was prepared by EDF Women’s Committee to raise awareness about the rights of all women and girls with disabilities to sexual and reproductive health and rights. It explains EDF’s position in relation to these internationally recognised rights and provides recommendations on how to fully ensure them at State level.

This position paper builds on significant steps EDF has taken previously to secure gender equality and guarantee the rights of women and girls with disabilities following the entry into force of the UN Convention on the Rights of Persons with Disabilities.¹

Background information

Women and girls with disabilities have been considered by society to be either asexual or hypersexual, and unfit to live with a partner and be a mother. This has led to strict and repressive control of their sexual and reproductive rights. Menstrual management, forced sterilisation and contraception, female genital mutilation and coerced abortion are just some examples of denial of rights that many women and adolescents with disabilities suffer, without giving their consent or fully understanding the intentions. Women and girls with high support needs, intellectual or psychosocial disabilities, women who are deafblind and those with multiple disabilities, and in particular those living in institutional settings - are particularly vulnerable to such abuses. Women with disabilities are rarely supported throughout motherhood and face multiple barriers to reproductive and adoption services.

There is a generalised lack of awareness, information, education and training, aimed at women and girls with disabilities, their families and professionals in the healthcare, educational and legal sectors. Sexual and reproductive health services, including gynaecology and obstetrics services are often not accessible, and no or very little technical support devices and personal assistance are provided to ensure the respect of sexual and reproductive health and rights. As a consequence, women and girls with

¹ These steps include the adoption of the EDF Gender Equality Plan for the period 2014-2017, the adoption and publication of the 2nd Manifesto on the Rights of Women and Girls with Disabilities in the EU: A toolkit for activists and policymakers, in 2011, and the adoption and publication of a joint EDF-CERMI Women’s Foundation report on Ending forced sterilisation of women and girls with disabilities in 2017.
disabilities are more vulnerable to sexual exploitation, violence, unwanted pregnancies and sexually-transmitted diseases from childhood on and often even at the hands of those closest to them, unknown and unreported.

Legal framework

The rights to equality and non-discrimination, to personal integrity, to marry and decide on the number and spacing of children, as well as the right to sexual and reproductive health, on the basis of free and informed consent, are specified in the UN Convention on the Rights of Persons with Disabilities (articles 5, 6, 17, 23 and 25)\(^2\) and the UN Convention on the Elimination of All Forms of Discrimination Against Women (articles 1, 5, 12 and 16).\(^3\) Both conventions have been widely ratified in Europe. It is crucial that states comply with their obligations and ensure and protect the rights of all women and girls, including women and girls with disabilities.

Sexual and reproductive health and rights of women and girls with disabilities have also been addressed by numerous experts of the United Nations\(^4\) and enshrined in commitments taken by countries at the international level.\(^5\) The report of the UN Special Rapporteur on the Rights of Persons with Disabilities on sexual and reproductive health and rights of girls and young women with disabilities is of particular importance. It should guide countries and other stakeholders on the implementation of sexual and reproductive health and rights of women, adolescents and girls with disabilities.

At the European level, the 2011 Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention)\(^6\) is an important instrument on combatting all forms of violence against women, including women with disabilities. It requires states to take measures against abuses, such as

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\(^3\) [http://www.un.org/womenwatch/daw/cedaw/text/econvention.htm](http://www.un.org/womenwatch/daw/cedaw/text/econvention.htm)

\(^4\) General Comment No. 3 (2016) on women and girls with disabilities from the UN Committee on the Rights of Persons with Disabilities; Joint statement by the Committee on the Rights of Persons with Disabilities and the Committee on the Elimination of All Forms of Discrimination against Women on ‘Guaranteeing sexual and reproductive health and rights for all women, in particular women with disabilities’ (2018); Committee on Economic, Social and Cultural Rights General comment No. 22 (2016) on the right to sexual and reproductive health; Committee on the Elimination of Discrimination against Women General recommendation No. 35 on gender-based violence against women, updating general recommendation No. 19; Joint general recommendation No. 31 of the Committee on the Elimination of Discrimination against Women/general comment No. 18 of the Committee on the Rights of the Child on harmful practices; Committee on the Elimination of Discrimination against Women General recommendation No. 24: Article 12 of the Convention (women and health); Committee on the Rights of the Child General Comment No. 9 (2006) on the rights of children with disabilities; and Committee on the Rights of the Child General comment No. 13 (2011) on the right of the child to freedom from all forms of violence.


\(^6\) [https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=090000168008482e](https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=090000168008482e)
sexual violence, including rapes, forced marriage, female genital mutilation, forced abortion and forced sterilisation and sexual harassment (articles 33 to 40). Sexual and reproductive health and rights are also addressed by EU bodies, for instance in the 2018 opinion adopted by the European Economic and Social Committee on the situation of women with disabilities and the European Parliament resolution of 29 November 2018 on the situation of women with disabilities. Both documents address sexual and reproductive rights of women with disabilities.

**Women’s autonomy on their own bodies**

EDF fully aligns with the views of the UN Committee on the Rights of Persons with Disabilities and the Committee on the Elimination of Discrimination against Women that women’s decisions on their own bodies are personal and private. States should ensure non-interference, including by non-state actors, with the respect for autonomous and supported decision-making by women and girls with disabilities. This includes the choice to undergo or not undergo abortion. States should decriminalise abortion in all circumstances and legalise it in a manner that fully respects the autonomy of women with disabilities. States must ensure that any decision about the sexual and reproductive health and rights of women and girls with disabilities is not performed without their prior free and informed consent. Substituted decision-making never amounts to consent. To fully ensure the principle of autonomy, states must repeal all forms of removal or restriction of legal capacity and replace them with supported decision-making mechanisms. States should ensure that women and girls with disabilities are well informed of their rights through accessible and age appropriate information. Peer support should be recognised as an important tool.

**Ending abuses and harmful practices**

States must take immediate measures to end all forms of abuse and harmful practices that hinder sexual and reproductive health and rights of women with disabilities. Menstrual management, forced sterilisation, abortion and contraception, as well as other forms of harmful practices such as female genital mutilation and incest, should be prohibited, prevented, investigated and prosecuted. This also includes sexual and other forms of violence.

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7 Thirty-three European countries have either ratified or acceded to the Istanbul Convention, and the European Union is expected to accede shortly after agreement in the European Council.


10 Joint statement by the Committee on the Rights of Persons with Disabilities and the Committee on the Elimination of Discrimination against Women on ‘Guaranteeing sexual and reproductive health and rights for all women, in particular women with disabilities’.

appropriate remedies to women and girls with disabilities who experience such abuses and violence.

Effective access to justice

Thousands of women and girls with disabilities are denied access to justice because they face multiple barriers when they attempt to assert their rights in courts of law. Article 15 of the Convention on the Elimination of All Forms of Discrimination against Women states that men and women are equal before the law and in terms of the protection afforded to them by the law, and the Convention obliges States Parties to adopt all appropriate measures to ensure substantive equality between men and women in all areas of life.

Furthermore, article 13 of the Convention on the Rights of Persons with Disabilities places an obligation on States Parties to ensure that persons with disabilities enjoy access to justice on an equal footing with others.

However, there are still many obstacles which prevent women and girls with disabilities from exercising their rights, and in particular, their sexual and reproductive rights. These barriers, which range from symbolic ones which permeate the work of all actors (law enforcement agencies, lawyers, prosecutors, the judiciary, etc.) to obvious material obstacles related to the physical environment and communication, are impediments which systematically prevent women and girls with disabilities from exercising a fundamental right.

For a woman or girl with disabilities who falls victim to violence to take the case to court can be considered an accomplishment, if we realise that in general the system does not place trust in their statements (and this is especially the case if it is a woman with an intellectual disability or a psychosocial disability, or a woman who is deafblind). Furthermore, we must also take into account the universal lack of accessibility faced by a woman or girl with disabilities who decides to report the case, the lack of training among professionals working in the field and, most seriously, the current lack of awareness among many women and girls with disabilities concerning their own status as rights-holders.

Moreover, we must also consider the thousands of women and girls with disabilities who are currently legally incapacitated and who, as a result, cannot access justice themselves when their rights are infringed, unless it is through an intermediary (a guardian or custodian). This places them in a particularly vulnerable situation.

Due to all of the above, states must put an end to the lack of progress in court proceedings, which is based on stereotypes and myths surrounding gender and disability, by promoting training and awareness-raising programmes for key actors on the reality faced by women and girls with disabilities. States must also ensure full

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12 For more information on access to justice for women and girls with disabilities, see Committee on the Rights of Persons with Disabilities General Comment No. 3 (2016) on women and girls with disabilities and Committee on the Elimination of Discrimination against Women General Recommendation No. 33 on women’s access to justice.
accessibility within the justice system and training for practitioners as a priority to achieve genuine democratisation.

These efforts on the part of states must be extended to cover all authorities and actors involved in the journey women and girls with disabilities must take to demand and assert their rights (reporting processes in police stations, treatment in centres for victims, dealings with the legal profession, courts, etc.).

**Fully ensuring sexual and reproductive health and rights**

To fully ensure sexual and reproductive health and rights of women and girls with disabilities, the autonomy of their decisions and eliminate prejudice, states must take measures to raise awareness of the rights of women and girls with disabilities among their families, medical and legal professionals, as well as of the persons working in the education system. All women and girls with disabilities, including those living in institutional settings, should be informed of their rights and provided with adequate sexual education and information in an accessible and age-appropriate manner. All sexual and reproductive health services, including gynaecological, obstetrics and breast cancer screening services, as well as family planning and abortion services, must be ensured and accessible to women and girls with disabilities. This includes accessibility of information (including sign-language, easy-to-read and braille formats) and of the built environment, as well as appropriate forms of support and accommodation, including through technical support devices and personal assistance.

In developing measures to ensure sexual and reproductive health and rights, states must address the situation of all women and girls with disabilities, including those who are indigenous, Roma, migrants, refugees and asylum seekers, from ethnic minorities, those living in rural and remote areas, those living in conflict areas and those residing in institutions, without any form of discrimination based on age, race, ethnic origin, gender identity and sexual orientation. States should collect appropriate information, including statistics and disaggregated data, and conduct studies and research to adequately design, implement and monitor disability-inclusive sexual and reproductive health and rights-related policies and programmes. Any information or data collected should respect the right to privacy of women and girls with disabilities.

All laws, policies and programmes on, or impacting, sexual and reproductive health and rights must be developed with the active participation and close consultation of women and girls with disabilities, and their representative organisations, as they are the experts on their own lives. More generally, women and girls with disabilities should participate and be included in all policy making on women’s rights. It is also important to consult and engage directly with girls and adolescents with disabilities as their views and preferences may differ from those of their families, caregivers and mainstream organisations of persons with disabilities.\(^\text{13}\)

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\(^{13}\) Special Rapporteur on the Rights of Persons with Disabilities, Study on sexual and reproductive health and rights of girls and young women with disabilities (A/72/133), 2017, paras 54-55.
Resources

European Disability Forum

- 2nd Manifesto on the Rights of Women and Girls with Disabilities in the EU: A toolkit for activists and policymakers (2011)

European Union

- European Economic and Social Committee, Opinion on the situation of women with disabilities (2018)

Council of Europe

- Convention on preventing and combating violence against women and domestic violence (Istanbul Convention) (2011)

United Nations

- Joint statement by the Committee on the Rights of Persons with Disabilities and the Committee on the Elimination of All Forms of Discrimination against Women on 'Guaranteeing sexual and reproductive health and rights for all women, in particular women with disabilities' (2018)
- Committee on the Elimination of Discrimination against Women, General recommendation No. 35 on gender-based violence against women, updating general recommendation No. 19 (2017)
- Report of the Special Rapporteur on the rights of persons with disabilities on 'Sexual and reproductive health and rights of girls and young women with disabilities' (2017)

• Committee on the Rights of Persons with Disabilities, General Comment No. 3 (2016) on women and girls with disabilities (2016)

• Committee on Economic, Social and Cultural Rights, General Comment No. 22 (2016) on the right to sexual and reproductive health (2016)

• Committee on the Elimination of Discrimination against Women, General recommendation No. 33 on women’s access to justice (2015)

• Joint general recommendation No. 31 of the Committee on the Elimination of Discrimination against Women/general comment No. 18 of the Committee on the Rights of the Child, on harmful practices (2014)

• Special Rapporteur on violence against women, its causes and consequences, Thematic study on the issue of violence against women and girls and disability (2012)

• Committee on the Rights of the Child, General Comment No. 13 (2011) on the right of the child to freedom from all forms of violence (2011)


• Committee on the Elimination of Discrimination against Women, General recommendation No. 24: Article 12 of the Convention (women and health) (1999)

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