

# Addressing the invisibility of women and girls with disabilities

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Often, women with disabilities are invisible and marginalised in society, including among those promoting the rights of persons with disabilities, and those promoting gender equality and the advancement of women. The exclusion of women with disabilities from decision-making spaces has for a long time impoverished our societies. It masks the root causes of the discrimination they face, allows the perpetuation of harmful stereotypes, both concerning gender and disability, and leads to innumerable human rights violations.

## Violence against women and girls with disabilities

In their [evidence](#) submitted to a recent inquiry by the UK Parliament concerning violence against women and girls, Disabled Survivors Unite, a UK disability rights NGO, pointed out that women with disabilities were more than twice as likely to experience violence and abuse compared to women without disabilities in the UK. [News coverage](#) following this evidence also showed not only the increased risk of sexual violence and abuse faced by women with disabilities, but also how they are ignored by the police and other support services when they report this violence, mainly because of their disability. One woman was told, for instance, that her disabilities (autism and PTSD) made her “not a reliable witness”. A blind woman’s reports on repeated sexual assaults were dismissed, because she could not “identify her perpetrators”.

These are unfortunately very common occurrences throughout Europe. Increased risk of sexual violence and abuse is only one aspect among many that prevent women and girls with disabilities from enjoying a wide range of human rights on an equal basis with others. For a long time, women with disabilities, who make up an estimated one fifth of the world’s women, remained invisible, both because of their gender and their disabilities. This invisibility explains the statistical evidence that they are in a disadvantaged position compared to both women without disabilities and men with disabilities. Regrettably, the protection of their human rights is not given the necessary attention from all policy-makers and institutions. Considerations about women’s rights are often excluded from disability-related laws, while gender equality legislation frequently fails to incorporate a disability dimension.

This situation is acknowledged in the United Nations Convention on the Rights of Persons with Disabilities (CRPD), ratified by all Council of Europe member states but one (Liechtenstein). This Convention specifically dedicates an article to women with disabilities (Article 6), setting out the obligation of states to recognise that women and girls with disabilities are subject to multiple discrimination and to take measures to offset this discrimination, as well as to ensure the full development, advancement, and empowerment of women.

In its [general comment](#) on Article 6, the treaty body of the CRPD sets out the many ways in which women with disabilities are specifically hindered from enjoying their human rights protected under different articles of the UN Convention. Many of these considerations also apply to the rights enshrined under the European Convention on Human Rights.

As the examples above show, the violations of the right to freedom from exploitation, violence and abuse are particularly striking, owing to the vastly higher risk women with disabilities face in this regard: it is estimated that women with disabilities are two to five times more likely to experience violence compared to other women. Women and girls with disabilities are also more likely to face [violence and abuse online](#).

In addition to types of gender-based violence that affect all women and girls, disability-specific forms of violence perpetrated against women and girls with disabilities include, among others: the withdrawal of necessary supports to live independently, to communicate or to move around, for example by removing or controlling access to vital communication aids (such as hearing aids) or refusal to assist with communication; removal of accessibility devices and features, such as wheelchairs or ramps; as well as the refusal by caregivers to assist with daily activities, such as bathing, dressing, eating and menstrual management. Other disability-specific forms of violence can include the harming of assistance animals and bullying, verbal abuse, and ridicule on the grounds of disability.

In this connection, the level and calculation methods of disability allowances can be of direct relevance for victims of violence, as financial dependency can be a factor which limits autonomy and perpetuates violence. I have been following with great interest [the debate in France](#) regarding the need to dissociate the

calculation of women's disability allowances from the revenues of their partners, as specialised NGOs report that the present situation traps many women with disabilities in abusive relationships.

Women with disabilities are also too often subjected to sexual violence, including very often in institutions. As I highlighted on many occasions, institutional settings are breeding grounds for violence and abuse, including sexual violence, due to various factors such as geographic isolation, power asymmetries and the impossibility for victims to seek and obtain outside help, which all contribute to impunity for perpetrators. This involves both interpersonal violence, but also often structural and institutional forms of violence. Personal stories of women, [for example with intellectual disabilities](#), who live or survived living in institutions expose the many ways in which violence and abuse against them can be normalised and become structural.

The Council of Europe Convention on violence against women and domestic violence (the Istanbul Convention) has been universally recognised by [disability rights NGOs](#) and the CRPD Committee (for example, in its [concluding observations](#) addressed to the European Union recommending accession to the Istanbul Convention) as crucial in protecting women and girls with disabilities. The [mid-term horizontal review](#) of the monitoring body of the Istanbul Convention (GREVIO) shows how, in many states parties to the Convention, women with disabilities face problems reporting acts of violence and seeking assistance and justice, ranging from accessibility issues to lack of training of and harmful stereotypes and prejudices held by law-enforcement officials and lack of information on support services in accessible formats. I reiterate my [constant call](#) on all member states of the Council of Europe to ratify and implement this Convention.

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

A particular form of violence specifically targeting women and girls with disabilities concerns involuntary sterilisation, contraception and abortion, as well as other medical procedures performed without the free and informed consent of the women concerned, despite the fact that such acts are specifically prohibited under the Istanbul Convention and the CRPD. This issue is intimately linked to the question of [legal capacity](#), a right enshrined in Article 12 of the CRPD and more often denied to women with disabilities than men with disabilities. Frequently, the right to physical integrity of women with disabilities, in particular with intellectual and psychosocial disabilities, is violated as a result of substituted decision-making, where an appointed guardian or a judge is empowered to take life altering decisions, supposedly in the "best interests" of the woman and against her will and preferences.

Such practices are commonplace around Europe as can be seen in numerous concluding observations of the CRPD Committee and reports of GREVIO, for example concerning [Belgium](#), [France](#), [Serbia](#) and [Spain](#). It is shocking that legislation in many European countries allows for forced sterilisation, contraception and abortion, considering that these practices are clearly based on eugenicist assumptions about the value of the lives of persons with disabilities or stereotypes concerning the capacity of persons with disabilities to be mothers. It is regrettable that states are still introducing such legislation, as for example in [the Netherlands](#) where a law introduced in 2020 allows for forced contraception, which perpetuates this discrimination and such stereotypes.

I call on all member states to follow the example of [Spain](#), which following the recommendations by GREVIO and the CRPD Committee, and after extensive consultations, abolished forced sterilisation, even with the prior approval of a judge, in 2020.

I attach great importance to the duty of member states to ensure the full enjoyment of [women and girls' sexual and reproductive health and rights](#). An important issue in this respect is access to safe and legal abortion care and modern contraception, where women with disabilities may face additional barriers, as stressed in a [joint statement](#) by the UN Committee on the Rights of Persons with Disabilities and the Committee on the Elimination of All Forms of Discrimination against Women. Like all women, women with disabilities must be free to choose the number and spacing of their children and take decisions concerning motherhood on an equal basis with others.

Moreover, as stated in my [written observations](#) to the European Court of Human Rights as a third party in various cases concerning abortion rights in Poland, I remain very vigilant about attempts to instrumentalise and co-opt the rights of others, such as the rights of persons with disabilities, in order to try to justify general restrictions on access to abortion. In line with the findings of [Women Enabled International](#), it is important to combat the root causes of abortion-related and disability-related stigma and to ensure women's voluntary access to unbiased, evidence-based information and non-directive information by trained providers to guarantee that women are able to make free and informed decisions.

Women with disabilities are also routinely excluded from [comprehensive sexuality education](#). This is often a reflection of harmful stereotypes ignoring and denying the sexuality of women and girls with disabilities. When sexuality education is delivered, it is not always disability-sensitive or conveyed through accessible formats. As stressed by the UN Committee on the Rights of Persons with Disabilities, a lack of access to sexuality information for women with disabilities, especially women with intellectual disabilities, deaf and deafblind women, can increase their risk of suffering sexual violence.

### **Women with disabilities in emergencies and conflict situations**

Another area of concern which has unfortunately become even more pressing in Europe is the inclusion of women with disabilities in responses to emergencies and conflict situations. As the [UN Committee on the Rights of Person with Disabilities highlighted](#), women with disabilities are at increased risk of sexual violence and are less likely to be able to have access to recovery and rehabilitation services or access to justice in situations of armed conflict, occupation of territories, natural disasters and humanitarian emergencies.

As the war in Ukraine is raging and Europe is witnessing the unfolding of [a humanitarian catastrophe](#), member states must do their utmost to ensure that humanitarian support also reaches women and girls with disabilities, who face additional barriers, including those affecting communication and mobility, in a situation where their support networks are disrupted and the accessibility infrastructure they rely on is being destroyed. I also call on member states who are hosting those women and girls with disabilities who escaped Ukraine to be particularly attentive to their needs and avoid secondary victimisation, owing for example to inaccessible reception facilities which may further increase the risk of violence and abuse.

The situation of women with disabilities has also considerably [worsened](#) during the COVID-19 pandemic, along with that of other women, highlighting the importance of policies and measures that take their specific needs into account when responding to public health emergencies.

### **Participation and inclusion of women and girls with disabilities**

Discrimination against women with disabilities is a pervasive problem, which is not limited to the issues mentioned above. For example, according to [2021 data](#) published by the European Institute on Gender Equality, only 20% of women with disabilities were in full-time employment within the EU, compared to 29% for men with disabilities and 48% for women without disabilities. Similarly, women with disabilities had lower incomes, were less educated and had more unmet health needs compared to men with disabilities and women without disabilities.

As in all areas concerning disability, the way forward must involve the full participation and involvement of women and girls with disabilities in policy and decision-making mechanisms and legislation affecting women and persons with disabilities, in accordance with the principle of “Nothing about us without us”. Member states need to make a lot of progress in this regard and go beyond tokenistic gestures which are not accompanied by long-term budgeting and planning.

I also see de-institutionalisation and legal capacity reforms to eliminate all forms of substituted decision-making as crucial to improving the situation of women with disabilities and all the more reason to treat these issues as an absolute priority.

It is high time to put an end to this state of affairs and take a firm commitment to reverse the exclusion of women and girls with disabilities. The first step in this direction must be the acknowledgment of the untapped strength and resilience of women and girls with disabilities, so that they themselves can lead the way forward.

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**Source:** <https://www.coe.int/en/web/commissioner/-/addressing-the-invisibility-of-women-and-girls-with-disabilities?redirect=%2Fen%2Fweb%2Fcommissioner%2Fthematic-work%2Fwomen-s-rights-and-gender-equality>

Girls and women with disabilities are particularly vulnerable to domestic violence. To support more accessible information on the topic of violence against women and domestic violence, Autism-Europe has developed an [Easy-to-read version of the Council of Europe Convention on preventing and combating violence against women and domestic violence](#) (Istanbul Convention).