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Addressing the rights of women with disabilities in Europe: observations and perspectives

University Women of Europe webinar
“Femmes en Situation de handicap en Europe. Quelles avancées nécessaires ?”

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Ladies and Gentlemen,
Dear Friends,

It is an honour to be with you today.

Allow me first to thank the organisers for inviting me to this important and timely event. It is important and timely because it gives much-needed visibility to often ignored issues and indeed often ignored persons. As I wrote in a [Human Rights Comment](#) that I published earlier this year, women with disabilities are often 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's rights.

The protection of women's rights and of the rights of persons with disabilities has been high on my agenda since the beginning of my mandate. I would like to share with you some observations from my work and some thoughts on how to move forward together to achieve tangible results and better protect the rights of women with disabilities.

1. Systemic and widespread inequalities and discrimination – First, throughout my work, I noted how numerous systemic barriers affect the realisation of the human rights of women with disabilities. I already mentioned marginalisation and invisibility. These are rooted in prejudices and harmful stereotypes concerning both gender and disability and on related power imbalances which are deeply entrenched in our societies. It is necessary to recognise these issues so that adequate action can be taken to effect change. Particularly, societal stereotypes of persons with disabilities as dependent individuals are at the basis of laws and policies which continue to allow institutionalisation, deprivation of legal capacity and segregation in education, in violation of the [United Nations Convention on the Rights of Persons with Disabilities](#) (CRPD) and other human rights standards.

– Second, women with disabilities are affected by inequalities and discrimination in virtually all areas of their lives. They have lower employment rates and incomes, are less educated, and have more unmet health needs compared to men with disabilities and women without disabilities.

Lack of statistical data – Despite their widespread nature, the discrimination and other violations of human rights suffered by women with disabilities often go unacknowledged. For instance, there is a lack of statistical data, disaggregated by gender and disability, on the impact of Covid-19 on the health and lives of persons living in institutions. More accurate data is needed, however, to guide policy decisions.

Deficiencies in mainstreaming gender and disability and their intersectionality – These are warning signs that policy makers do not pay adequate attention to the situation of women with disabilities. In fact, gender and disability often appear to be afterthoughts in national policy-making and their intersectional aspects are regularly ignored.

I note that both the Council of Europe and the EU strategies for the rights of persons with disabilities stress the need to mainstream disability-related issues throughout policy sectors including, crucially, in participation and access to decision-making. However, women with disabilities continue to be **underrepresented in, or even excluded from decision-making spaces**. Moreover, measures to promote women's rights in general are not accompanied by adequate planning or budgeting. I have often found that gender equality institutions and bodies set up to promote and monitor the implementation of the Istanbul Convention lack adequate funding.

2. Gender-based violence and violations of women's **sexual and reproductive health and rights** are prime examples of areas where harmful practices such as the deprivation of persons with disabilities of their legal capacity intersect and create heightened risks for women and girls with disabilities.

It is estimated that women with disabilities are two to five times more likely to experience violence compared to other women. However, women with disabilities are often ignored by the police and other support services when they report such violence. During my country visits, women victims of gender-based violence have also shared with me their difficulties in accessing shelters, which were not adapted to their needs, and in obtaining protection from courts.

Women with disabilities are also often subjected to sexual violence, and very often in institutions. Institutional settings are breeding grounds for violence, including due to the impossibility for victims to seek and obtain outside help. I have consistently [called](#) for deinstitutionalisation and creating community-based support networks instead. The Parliamentary Assembly of the Council of Europe has also recently adopted a [recommendation](#) and a [resolution](#) in this respect.

Women with disabilities are also at heightened **risk of sexual violence in situations of armed conflict and humanitarian emergencies** and they are less likely to be able to have access to recovery and rehabilitation services and justice. Earlier this year, following my visit to Ukraine and other missions to neighbouring countries, I stressed the need to pay particular attention to the situation of women and girls and persons with disabilities [in Ukraine](#) and of those [fleeing the conflict](#).

Moreover, overall, the sexuality of women with disabilities is not recognised except as a matter of exerting control over their lives, which means that they are often subjected to **involuntary sterilisation, contraception and abortion**, as well as other medical procedures performed without their free and informed consent. Currently, the legislation in 13 EU member states still [allows](#) the forced sterilisation of persons with disabilities, while in three states this is also allowed in respect of children. Reasons invoked for these forms of violence include “the best interests of the person”, “protecting the person against sexual abuse”, “easing contraception”, beliefs that these women cannot take care of a child, as well as medical reasons.

None of these beliefs or reasons justify such involuntary measures and violence. I have [called](#) on all Council of Europe member states to end coercion in mental health.

These issues are also closely linked to the question of **legal capacity**. Frequently, the rights of women with intellectual and psychosocial disabilities are violated as a result of substituted decision-making. On this point too, my recommendation has always been to end deprivation of legal capacity.

3. The way forward

There are many things that Council of Europe member states need to do to improve the human rights situation of women with disabilities. These include action to:

- Fully ensure the participation of women with disabilities in decision-making affecting them, in line with the principle “Nothing about us without us”.
- Address prejudices and harmful stereotypes against women and persons with disabilities.
- Treat gender and disability as cross-cutting issues, in all policy sectors.

- Adequately address intersectionalities. Many women have disabilities and persons with disabilities are also women and girls, and it is high time to reflect this in laws and policies.
- Prioritise de-institutionalisation and legal capacity reforms to eliminate all forms of substituted decision-making.
- End coercion in mental health settings and ensure that women with disabilities have voluntary access to information allowing them to make free and informed decisions regarding their health, including their sexual and reproductive health and rights.
- Step up measures to increase gender equality and combat all forms of violence against women and domestic violence. In this respect, I welcome the "[Dublin Declaration](#)" on preventing violence through equality, signed recently by thirty-eight Council of Europe member states.
- Adequately support equality bodies and human rights monitoring institutions and the work of NGOs, of activists and of the academia

I thank you again and I look forward to our continued cooperation.