



**Women Enabled International
Comments on the CRPD Committee’s Draft General Comment No. 5 on Article 19:
Living Independently and Being Included in the Community**

Women Enabled International (WEI) works at the intersection of women’s rights and disability rights and advocates and educates for the human rights of all women and girls, emphasizing women and girls with disabilities, and works to include women and girls with disabilities in international resolutions, policies, and programs addressing women’s human rights and development.

WEI welcomes the opportunity to comment on the CRPD Committee’s Draft General Comment on Article 19, addressing the right to independent living and inclusion in the community. In particular, WEI welcomes the inclusion of issues that affect women and girls with disabilities¹ in the Draft General Comment, including that women with disabilities may face more restrictions on their living arrangements and also encounter further barriers to accessing social support services because of discrimination and stigma based on both their gender and disability.²

The social isolation that is often caused by and leads to gender-based violence against women with disabilities also has a significant impact on their ability to live independently and be included in the community. As such, WEI recommends that the CRPD Committee include more specific information about how violence against women with disabilities impacts the right to independent living and inclusion in the community. This submission provides background information about the impact of domestic violence and violence in institutions against women with disabilities on independent living and inclusion in the community, as well as specific recommendations for how to include this information in the Draft General Comment.

Background

As the CRPD Committee noted in its General Comment No. 3, women with disabilities are more likely to experience gender-based violence than are other women³ and that “[s]ome women with disabilities, in particular, deaf and deafblind women, and women with intellectual disabilities, may be further at risk of violence and abuse because of their isolation, dependency or oppression.”⁴ According to the former UN Special Rapporteur on Violence against Women, Rashida Manjoo, violence against women with disabilities can be of a “physical, psychological, sexual or financial nature and include neglect, social isolation, entrapment, degradation, detention, denial of health care, forced sterilization and psychiatric treatment.”⁵ This violence is perpetuated by stereotypes “that attempt to dehumanize or infantilize, exclude or isolate [women with disabilities], and target them for sexual and other forms of violence.”⁶ In turn, violence against women with disabilities can have a significant impact on their rights, including their right to live independently and be included in the community.

In particular, domestic violence may exacerbate the isolation women with disabilities experience while also creating barriers to exercising the right to independent living and inclusion in the community. Indeed, domestic violence is a means of one partner gaining or maintaining control over another through a pattern of abusive behavior, and abusers often isolate their victims from friends, family, and their communities as a means of control.⁷ Women with disabilities are twice as likely as other women to experience domestic violence,⁸ as they are more likely to be in unstable romantic relationships that can lead to violence.⁹ Domestic violence against women with disabilities often leads to greater isolation for them as they may be more physically, emotionally, or financially dependent on abusers (who are frequently also caregivers), and have fewer legal, economic, and social options to leave abusive relationships.¹⁰ For instance, in a

2007 survey of 30 women with disabilities in the United Kingdom (UK) who were victims of domestic violence, all of them reported that being disabled worsened the abuse and also put up barriers to them leaving abusive homes.¹¹ Women with disabilities in the UK reported that they were sometimes physically unable to flee abusive homes, particularly where public transportation is inaccessible.¹²

Furthermore, services intended to support women leaving abusive relationships—including domestic violence shelters—are frequently inaccessible to women with disabilities, creating further barriers to leaving these relationships and to exercising their right to live independently and be included in the community. Indeed, as the CRPD Committee noted in its General Comment No. 3, the lack of consideration of gender and disability prevents women with disabilities from living independently and “is specially relevant in their access to safe houses, support services and procedures in order to provide effective and meaningful protection from violence, abuse and exploitation or when providing health care, particularly reproductive health care.”¹³ In the UK, the inaccessibility of support services for victims of domestic violence posed a potentially major hurdle to them leaving abusive relationships.¹⁴ In a small qualitative study in 2012, women with intellectual disabilities in the UK reported particular problems when accessing support services, stating that they received inappropriate or unhelpful responses to their requests for help.¹⁵ Because of the unhelpfulness of these services and lack of services targeted specifically for women with intellectual disabilities, two of the five women in the study reported that they had to stay in their abusive homes and felt even more powerless in the face of domestic violence.¹⁶

Women with disabilities also experience gender-based violence in institutions, a situation that is exacerbated by the isolation from the community they experience while in those institutions. As the CRPD Committee noted in its General Comment No. 3, violence against women with disabilities in institutions includes “involuntary undressing by male staff against the will of the woman concerned; forced psychiatric medication; and overmedication which can reduce the ability to describe and/or remember sexual violence.”¹⁷ Women with disabilities in institutions may also be subjected to forced sterilization.¹⁸ The Committee already finds in its Draft General Comment that living in an institution is itself isolating and does not allow persons with disabilities to live independently and be included in the community, but this isolation can be compounded for women with disabilities who are at greater risk of gender-based violence, as institutionalization keeps them from reaching out for help. Indeed, the Committee in its General Comment No. 3 noted that perpetrators of violence in institutions “may act with impunity because they perceive little risk of discovery or punishment as access to judicial remedies is severely restricted, and women with disabilities subjected to such violence are unlikely to be able to access helplines or other forms of support to report such violations.”¹⁹

For instance, non-governmental organizations in India have reported that forced institutionalization disproportionately impacts women with disabilities because of their disempowerment within families, leading to even greater isolation and disempowerment.²⁰ Once institutionalized, women with disabilities in India are subjected to several other forms of violence, including forced treatment, emotional abuse, forcing them to stay naked, and physical abuse as a form of punishment.²¹ Many staff members in Indian institutions are also not adequately trained to work with persons with disabilities, potentially exacerbating abuse.²² Furthermore, there are several reports from the 1990s of women and girls undergoing forced sterilizations in institutions in India,²³ and as recently as 2008, the government of Maharashtra supported a policy of forcibly sterilizing “mentally challenged” women and girls in institutions as a means of ensuring “menstrual hygiene” or the elimination of periods.²⁴ If women with disabilities do suffer violence in institutions, they have little access to redress. Of 128 instances of abuse documented by Human Rights Watch in Indian institutions in 2014, none of the women had been able to file First Information Reports or otherwise access redress mechanisms to address their forced institutionalization or the verbal, physical, or sexual abuse they suffered.²⁵

Specific Recommendations

With this background in mind, it is important to include violence against women with disabilities in the CRPD Committee's General Comment No. 5 on the right to independent living and inclusion in the community. WEI recommends including this issue in the following ways:

- Amend paragraph 70 to provide more context about how gender-based violence affects the right to independent living and inclusion in the community for women with disabilities, such as the following:
 - Women and girls with disabilities also experience gender-based violence at higher rates than other women, creating further isolation and violations of their right to independent living and being included in the community. For instance, women with disabilities who are victims of domestic violence are frequently more economically, physically, or emotionally dependent on their abusers, who often act as caregivers, a situation that prevents women with disabilities from leaving abusive relationships and leads to further social isolation.
- Amend paragraph 72 to explicitly include the need to ensure that domestic violence shelters are available and accessible to women with disabilities, as a means of ensuring their right to independent living and to be included in the community.
- Include an additional paragraph alongside paragraphs 71-72 that specifically addresses gender-based violence in institutions and the need for states to monitor and address this violence, such as the following:
 - Because institutions isolate those who reside within them from the rest of the community, institutionalized women and girls with disabilities are further susceptible to gender-based violence, including forced sterilization, sexual and physical abuse, and emotional abuse and further isolation. They also face increased barriers to reporting this violence. It is imperative that states include these issues in their monitoring of institutions and ensure access to redress for women with disabilities who are victims of gender-based violence in institutions.
- Add a recommendation to paragraph 94, addressing implementation at the national level, that is specific to women and girls with disabilities, such as the following:
 - Specifically address the social isolation often experienced by women and girls with disabilities that can lead to further violations of their right to live independently and be included in the community, including discrimination, cultural norms, and stereotypes and stigma based on both their gender and disability that may limit their movement or access to services, as well as domestic violence that can lead to further isolation from the community and greater dependence on their abusers. Monitor state and private institutions to ensure that women and girls with disabilities are free from gender-based violence, including forced sterilization, and have access to redress when this violence occurs.

Thank you for your consideration of these comments. Should you have any questions, please do not hesitate to contact WEI's president and legal director, Stephanie Ortoleva, at president@womenenabled.org, or legal adviser, Amanda McRae, at a.mcrae@womenenabled.org.

¹ Throughout this submission, the term "women" should be read to include women and girls of all ages.

² CRPD Committee, *Draft General Comment No. 5 on Article 19: Living Independently and Being Included in the Community*, ¶¶ 71-72 (2017).

³ CRPD Committee, *General Comment No. 3: Article 6: Women and girls with disabilities*, ¶ 29, U.N. Doc. CRPD/C/GC/3 (2016) [hereinafter CRPD Committee, *Gen. Comment No. 3*].

⁴ *Id.*, ¶ 33.

⁵ UN Special Rapporteur on Violence against Women, *Report of the Special Rapporteur on violence against women, its causes and consequences*, ¶ 31, U.N. Doc. A/67/227 (2012) [hereinafter SRVAW, *Report on women with disabilities*].

⁶ *Id.*, ¶ 32.

⁷ See, e.g., Domestic Violence, OFFICE OF VIOLENCE AGAINST WOMEN, U.S. DEP'T OF JUSTICE, <http://www.justice.gov/ovw/domestic-violence>.

⁸ SRVAW, *Report on women with disabilities*, *supra* note 5, ¶ 31.

⁹ World Health Organization and United Nations Population Fund, *Promoting sexual and reproductive health for Persons with Disabilities: World Health Organization/United Nations Population Fund Guidance Note* (2009).

¹⁰ Hope Lewis & Stephanie Ortoleva, FORGOTTEN SISTERS: A REPORT ON VIOLENCE AGAINST WOMEN WITH DISABILITIES 38-39 (2012), available at <http://bit.ly/2cW6EVJ>.

¹¹ Gill Hague, Ravi Thiara, Pauline Magowan, and Audrey Mullender, *Making the Links: Disabled Women and Domestic Violence* 33, 42 (2007), available at <http://wwda.org.au/wp-content/uploads/2013/12/hague1.pdf>.

¹² *Id.* at 33, 42.

¹³ CRPD Committee, *Gen. Comment No. 3*, *supra* note 3, ¶ 48.

¹⁴ EUROPEAN UNION AND UNIVERSITY OF LEEDS, ET AL., ACCESS TO SPECIALIZED VICTIM SUPPORT SERVICES FOR WOMEN WITH DISABILITIES WHO HAVE EXPERIENCED VIOLENCE: FINAL SHORT REPORT 23 (2014), available at http://www.gla.ac.uk/media/media_394354_en.pdf.

¹⁵ Alison Walter-Brice et al, *What do women with learning disabilities say about their experiences of domestic abuse within the context of their intimate partner relationships?* in 27(4) DISABILITY AND SOCIETY 503, 510 (2012).

¹⁶ *Id.* at 512.

¹⁷ CRPD Committee, *Gen. Comment No. 3*, *supra* note 3, ¶ 53.

¹⁸ Hope Lewis & Stephanie Ortoleva, FORGOTTEN SISTERS: A REPORT ON VIOLENCE AGAINST WOMEN WITH DISABILITIES 42 (2012), available at <http://bit.ly/2cW6EVJ>.

¹⁹ CRPD Committee, *Gen. Comment No. 3*, *supra* note 3, ¶ 53.

²⁰ See, e.g., CREA, *count me IN!: Violence against disabled, lesbian, in sex-working women in Bangladesh, India, and Nepal* (2012), available at <http://www.creaworld.org/sites/default/files/The%20Count%20Me%20In!%20Research%20Report.pdf>.

²¹ HUMAN RIGHTS WATCH, "TREATED WORSE THAN ANIMALS": ABUSES AGAINST WOMEN AND GIRLS WITH PSYCHOSOCIAL OR INTELLECTUAL DISABILITIES IN INSTITUTIONS IN INDIA 57-58 (2014).

²² *Id.* at 8, 50 & 65-66.

²³ See, e.g., Rajeswari Sundar Rajan, *Beyond the Hysterectomies Scandal: Women, the Institution, Family, and State in India*, in THE PRE-OCCUPATION OF POST-COLONIAL STUDIES (ed. Khan & Seshadri) 200, 201 (2000).

²⁴ Ashika Misra, *Is hysterectomy the final solution?*, DNA INDIA, Jan. 30, 2008, <http://www.dnaindia.com/mumbai/report-is-hysterectomy-the-final-solution-11482>.

²⁵ HUMAN RIGHTS WATCH, "TREATED WORSE THAN ANIMALS": ABUSES AGAINST WOMEN AND GIRLS WITH PSYCHOSOCIAL OR INTELLECTUAL DISABILITIES IN INSTITUTIONS IN INDIA 69 (2014).