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|  | **International Council for Education of People with Visual Impairment** |

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## ICEVI Submission to the Committee on the Elimination

## of Discrimination Against Women (CEDAW)

## Half-Day General Discussion on

## Girls’/Women’s Right to Education

## 7 July 2014

The International Council for Education of People with Visual Impairment (ICEVI) is a global association of individuals and organizations that promotes equal access to appropriate education for all children and youth with visual impairment so that they may achieve their full potential. ICEVI has consultative status with the United Nations Economic and Social Council and is a founding member of the UNICEF NGO Committee on Children with Disabilities. We also work closely with UNESCO, the World Bank and the World Health Organization. ICEVI operates through regional and national committees in each of its seven regions (Africa, East Asia, Europe, Latin America, North American/Caribbean, Pacific, and West Asia) and is governed by an Executive Committee composed of five Principal Officers, seven Regional Chairpersons, INGO and INGDO Partners, and representatives from our Founding Member Organizations. ICEVI brings together educators, administrators, parents and others to promote equal educational opportunity for children with visual impairment.

ICEVI affirms the Universal Declaration of Human Rights (1948), the Convention on the Elimination of All Forms of Discrimination Against Women (1979); the UNESCO Flagship Initiatives on Education for All (2004); and the United Nations Convention on the Rights of Persons with Disabilities (2006). We welcome this opportunity to contribute to the discussion on girls’ and women’s right to education and appreciate the Committee on Elimination of Discrimination Against Women’s attention to Article 10 of the Convention.

Progress in the education of women and girls has been slow but steady. Unfortunately, education of female children and youth, particularly those with visual impairment, has been somewhat slower. Consider these estimates from the World Health Organization (WHO; 2013):

* 285 million people in the world are visually impaired – 28.5% of all persons with disabilities;
* 39 million (13%) of this population are blind;
* 19 million children (almost 13% of the 150 million children with disabilities) under the age of 15 have a visual impairment;
* 12 million (63%) of the 19 million children with visual impairment are believed to have easily-correctable refractive errors – but they are nevertheless uncorrected and impact learning nonetheless;
* 7 million (almost 37%) of the 19 million children with visual impairment experience a severe visual loss that impacts their ability to learn; and
* 90% of the population of persons with visual impairment live in developing countries.

UNESCO (2004) reported that about 500,000 children every year lose some part of their vision due to vitamin A deficiency, which remains the leading cause of blindness in children. UNESCO further states that,

* More than 90% of children with disabilities living in developing countries do not attend school.

Significantly, 49.5% of the world’s population is female, which suggests that nearly half of the children with visual impairment are female as well. In many developed countries, children with visual impairment are considered a low prevalence disability group, but worldwide, visual impairment clearly comprises a large proportion of disability, and CEDAW’s attention to the education of girls and young women with visual impairment is crucial to their future and the development of their countries.

Statistics specific to female children and youth with visual impairment can only be surmised from the data already collected by agencies such as WHO and UNICEF. For example, UNICEF’s *State of the World’s Children* (2013, May)illuminates some of the issues that face all girls and women:

**Early Childhood Education.** Only 12% of female children between the ages of 3 and 5 years participate in early education programs. In the poorest one-fifth of nations, the participation rate for both genders drops to 6%, while participation jumps to 24% for the richest one-fifth of nations. For children with visual impairment, access to early intervention programs is crucial and can ameliorate the impact of vision loss by facilitating developmental progress (Ferrell, 2011); without early childhood programs, children miss a critical period to learn the skills and behaviors that will prepare them for more formal education.

**Education.** UNICEF (2013, May) indicates that across the world female children are less likely than male children to be literate and to participate in primary and secondary education. They are equally *un*likely to participate in pre-primary education. In the least developed countries, the literacy rate in adult women drops to 76% (vs. 90% worldwide), and they are much less likely to attend secondary school. Education prepares girls and women to participate in the social, economic, and political life of their countries, and persons with disabilities have an equal right to do so. But girls and women with visual impairment cannot participate in education unless they also have *access* – cognitive as well as physical – and that access cannot happen without instructional materials in alternative formats (braille, large print, audio, and digital).

**Access to Health Care.** Globally, only 55% of women of child-bearing age use contraception, and less than half of women receive prenatal visits. Only about two-thirds of women have a skilled attendant at childbirth. Approximately one-half of one percent have a lifetime risk of dying as a result of pregnancy. Again, in the least developed countries, women are less likely to use contraception (33%, vs. 55% worldwide), are much less likely to receive prenatal care, and less than half experience an attended birth. The maternal morbidity rate in developing countries increases to almost 2% (UNICEF, 2013). WHO (2011) reported that women with disabilities are less likely to receive screenings for breast and cervical cancer, and there is some indication that women of child-bearing age with functional limitations are not even asked about contraception. Sterilization of women with disabilities continues (WHO, 2011). For girls and young women with visual impairment, this limited access to health care also means that eye health is compromised and may lead to secondary disabilities that could be avoided.

**Child Labor.** Fourteen (14%) of female children under the age of 15 years work, decreasing the availability of time to participate in education (UNICEF, 2013, May). While the proportion of males who work is similar, the lack of education prevents women from learning about their human rights. This is no less an issue for girls and young women with visual impairment.

**Family Life.** Wilkerson (2013) found that eleven percent (11%) of young women are married before the age of 15; more than 3 times as many are married by the time they reach age 18 (34%). In developing countries, 46% are married by age 18. While 47% of women around the world believe that a husband is justified in beating his wife, the proportion rises to 54% in developing countries. This, too, is no less an issue for girls and young women with visual impairment – if they are deemed “marriageable” at all. Unfortunately, attitudes toward visual impairment and blindness all too frequently manifest as *dis*ability, rather than *cap*ability, and young women with visual impairment may be deemed less desirable for marriage.

**Violence.** WHO (2011) indicates that people with disabilities experience a greater risk of violence than persons without disabilities, and that sexual abuse also occurs more often, particularly in institutionalized settings. Girls and women with visual impairment and blindness may be even more at risk for violence, if the visual impairment impacts their ability to monitor others’ movement and take steps to protect themselves.

Children with visual impairment learn differently, for no other reason than they cannot rely on their vision to obtain information. The issue becomes not *what* they can learn, but *how* they learn: With trained teachers, access to the curriculum in formats other than print, and practice and repetition, there is very little that a child with visual impairment cannot learn. Children with visual impairment learn by doing, whether it is reading a braille book or conducting a biology experiment: (a) They rely on their other senses, particularly hearing and touch, to gain information; (b) initially they rely on the adults around them to create learning opportunities and to make connections to previous events, concepts, and experiences, until they can do it themselves; (c) their access to print is severely limited, so they utilize alternative methods for reading and writing, such as braille, enlarged print, keyboarding, and special devices; and (d) with technology, their access to the curriculum can be greatly enhanced. This is no less true for females with visual impairment than it is for males.

Children and youth with visual impairment are thus twice-exceptional – limited by the lack of resources that provide access to instruction, educational materials, and trained teachers, at the same time as they are impacted by poverty, inadequate health care, and stereotypical attitudes toward blindness and disability. As if this were not enough, girls and women with visual impairment must also contend with stereotypical attitudes toward their gender, attitudes which often manifest as a denial of basic human rights, discrimination, and educational, economic, and social segregation.

ICEVI, working in collaboration with the World Blind Union (WBU), launched the ***Education for All Children with Visual Impairment (EFA-VI)*** campaign in 2006. The campaign, similar to the worldwide Education for All initiative, focuses specifically on children and youth with visual impairment in the developing world, where we estimate that less than 10% of children have access to education. The campaign addresses three key Millenium Development Goals:

* Achieving universal primary education;
* Promoting gender equality; and
* Development of global partnerships for development.

We accomplish these goals within the framework of the general and special education systems of individual nations, utilizing task forces of stakeholders composed of family members, educators, international nongovernmental organizations, and government officials. Our joint ICEVI-WBU position statement (Campbell & Rowland, 2003) calls upon governments to:

* Guarantee the right and access to educational services in accordance with the Universal Declaration on Human Rights to children and youth with visual impairment;
* Place the educational services for blind and visually impaired children and youth under the same government bodies as that of children without blindness or visual impairment;
* Guarantee all blind and visually impaired children and youth in integrated, inclusive, or special school programs—as well as their teachers – access to the equipment, educational materials and support services required for persons with visual impairment (e.g., books in accessible formats, low vision devices, technology);
* Offer high quality education that meets national standards in a range of educational options, including special schools; and
* Give prominence to the voice of parents and (where appropriate) children and youth in decisions about placement.

**EFA-VI Results:** We are proud to report that we have increased enrolment worldwide by nearly 75,000 children in more than a dozen focus countries. Our campaign thus far has involved some 35,000 family members, educators, and government officials in capacity building programs. Furthermore, at the request of Gordon Brown, United Nations Special Envoy for Global Education, we are developing plans to harness the power of information and communications technology to enable blind and partially sighted children and youth to be included in mainstream schools alongside their sighted peers. Digital technology has the power to “level the playing field” for all children and youth with visual impairment – to provide the same books and other instructional materials in accessible formats (braille, large print, audio, digital) at the same time that children without disabilities receive them. This goal is no longer just an ideal or a wish – *it can be achieved* if we work collaboratively to make it happen.

The International Disability Alliance (IDA) and International Disability and Development Consortium (IDDC) admonishes us that

Without a concerted effort to highlight and protect citizens with disabilities in the post-2015 agenda, inequalities will endure. Failure to address this inequality is inconsistent with a UN Charter that speaks of ensuring the dignity and worth of every human. (IDA-IDDC, 2014, p. 1)

**ICEVI Recommendations:**

With this IDA-IDDC statement in mind, and as the Committee discusses the education of women and girls, ICEVI would like to offer the following recommendations

**We call upon States Parties to:**

1. Provide guidance on the implementation of the Convention on the Elimination of All Forms of Discrimination Against Women that specifically addresses the unique needs of girls and young women with visual impairments.
2. Implement Article 24 of the UN CRPD to promote the education of women/girls with visual impairments.
3. Develop specific strategies to promote the education of girls and women with visual disabilities, including the education of women with visual disabilities who did not have an opportunity to attend school as a child.
4. Ensure that technology and assistive devices are affordable and available in the schools to support the education of girls and young women with visual impairment.
5. Promote special training in the alternative skills of blindness (braille, large print, digital technologies, audio description, cane travel, orientation and mobility) to teachers, parents, rehabilitation workers, and others, who provide education and instruction to blind and visually impaired children and youth.
6. Utilize distance methodologies to train orientation and mobility instructors, braille instructors, technology specialists, and other instructors of special skills, with particular emphasis on training female instructors who can appreciate the experiences of girls and young women.
7. Promote the training of women with visual impairment to provide education and serve as mentors, assuring the appropriate knowledge, attitudes, and skills to deal with girls and young women with visual impairments.
8. Encourage the screening, early intervention, and quality rehabilitation of blind and visually impaired children by specially trained teachers and instructors.
9. Assure that teachers, who are in inclusive school programs with blind or low vision students in their classrooms, and those teachers who are in special schools for such children, receive adequate training and skills in braille and other educational strategies in order to provide a quality education.
10. Encourage remuneration commensurate with qualifications and training to ensure that investments in human resources are not lost.
11. Acknowledge the critical importance of the pre-school years to the long-term social, emotional and educational development of blind and visually impaired children.
12. Recognise the need for the development of appropriate services for infant and pre-school blind and visually impaired children.
13. Promote the establishment of programs and services for blind and visually impaired children and youth with additional disabilities.
14. Promote programs and services for deafblind children through efforts at community levels, awareness raising, screening and human resource training.
15. Provide special attention to the education and literacy needs of blind and visually impaired children, youth, and adults from especially vulnerable groups such as refugees and indigenous populations.
16. In line with *The State of World Population 2013* (Wilkerson, 2013) create a paradigm shift in how adolescent girls are viewed, moving away from interventions targeted at girls towards more

broad-based approaches that build girls’ human capital, help them make decisions about their lives, including matters of sexual and reproductive health, and offer them real opportunities so that motherhood is not seen as their only destiny. This new approach must target the circumstances, conditions, norms, values and structural forces that perpetuate adolescent pregnancies on the one hand and that isolate and marginalize pregnant girls on the other.

1. Adopt an attitude that views women and girls with visual disabilities as capable individuals who need less protection and more empowerment in their struggle against all forms of prejudice and discrimination.

**We call upon the United Nations and its Institutions, Agencies and Programmes to:**

1. Disaggregate data on economic indicators to reflect the impact on persons with disabilities.
2. Disaggregate data on education indicators specifically to reflect their impact on children and youth with visual impairments.
3. Disaggregate data on teachers to indicate the number of special education teachers supporting the education of children and youth with disabilities.

Women of color and disability recently lost one of their greatest advocates, Dr. Maya Angelou, who experienced racial and gender discrimination, violence, and in her later years, visual limitations. She wrote:

Here on the pulse of this new day

You may have the grace to look up and out

And into your sister's eyes, into

Your brother's face, your country

And say simply

Very simply

With hope

Good morning.

ICEVI looks forward to this new day, when all girls and women with visual impairments receive at least a primary education that addresses their unique learning needs, obtain instructional materials in an accessible format and in a timely manner, are free of economic and employment discrimination, receive adequate health care, and have no fear of violence or mutilation.

Thank you for this opportunity to participate in the discussion.

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