International Disability and Development Consortium (IDDC) Submission to the CEDAW Committee on the Draft General Recommendation 19: Accelerating Elimination of Gender-Based Violence against Women

30 September 2016

The IDDC is a global consortium of 26 disability and development NGOs, mainstream development NGOs, and DPOs supporting disability and development work in more than 100 countries to promote human rights and inclusive development internationally. This document reflects the experience and expertise from IDDC members.

The rights concerning women and girls with disabilities are central and deeply connected to IDDC’s priorities and the priorities our members. We welcome the Committee’s commitment to tackling gender-based violence (GBV) against women and its recognition of the need to update General Recommendation 19. We welcome the Committee’s acknowledgement of the intersection between gender and disability in the new draft General Recommendation. This submission intends to build on the strengths of the Committee’s analysis of gender and disability and provide specific advice to strengthen standards for women and girls with disabilities.

N.B.: Specific additions to the text are marked in italic and bold. Direct quotations from the text are marked by quotation marks. Strikethrough text represents recommendations to remove text.

Specific Recommendations to the General Recommendation Text:

Title


Text removal: We recognise the need to urge States to take action on GBV; however, the addition of the term ‘accelerating’ may imply that GBV is subject to progressive realisation, whereby States must take steps to the maximum of their available resources. Given that the elimination of GBV is an immediate obligation\(^1\) on States and that it contains elements that are non-derogable\(^2\), we request removing the term to avoid unintentionally allow too much scope to interpret obligations. This suggestion also applied to paragraph 5 and other references within the General Recommendation.

Introduction

2. “(...) the international community accepts that gender-based violence against women constitutes discrimination against them on the basis of sex and a human rights violation.”

Additional sentence: Gender-based violence is also influenced by different identity dimensions or social categories, such as age, disability, race, ethnic origin, religion, socio-economic status, and

\(^{1}\) Specified in para. 13.

migrant or refugee status. We feel that the intersectional and multiple dimensions of GBV need to be identified within the introduction.

4. “(... reduction in public spending or justified in the name of tradition, religion or fundamentalist ideologies culture.”

Amendment: The term “fundamentalist” is often used politically, and in order to ensure political neutrality, we suggest replacing it with culture. We also suggest removing “ideologies”, as the general recommendation could be misinterpreted as taking a political stance on a particular ideology.

Scope

7. “(...) Aspects of the content of these obligations in relation to gender-based violence against women in particular contexts are addressed in General Recommendation No. 28 and other General Recommendations, including General Recommendations No. 27 on older women, General Recommendations No. 30 (...)

Additional text: We suggest addition General Recommendation No. 27 on older women which refers to violence against older women, particularly in paragraphs 27 and 37-38. We acknowledge that the General Recommendation No. 18 (1991) on women with disabilities does not mention violence and suggest to the Committee to update this General Recommendation to provide more substance and to reflect standards reflected in CRPD Committee General Comment No. 3 on women with disabilities.

9. “Gender-based violence affects women throughout their life cycle; accordingly references to women in this document include girls and older women. This violence takes multiple forms, including acts or omissions intended or likely to cause or result in death or physical, sexual, psychological or economic harm or suffering to women, threats of such acts, harassment, coercion, arbitrary deprivation of liberty and denial of control of their sexual and reproductive choices.”

Additional phrasing: All women are at risk of sexual and reproductive violence. However, women with all types of disabilities are often subjected to, for example forced sterilisations or forced abortions or unable to denounce abuse or violence, due to their gender and disability and stereotypes. Individual freedom, autonomy, and independence to make decisions and choices are greatly affected. For further information on the types of GBV that women with disabilities face, please refer to Committee on the Rights of Persons with Disabilities General Comment No. 3 (2016) Article 6: Women and girls with disabilities, CRPD/C/GC/3, paras. 29-37. We also feel that older women should be highlighted in addition to girls, as older women are often not considered.

11. The Committee recognises that women are not a homogeneous but very diverse group consisting of women of different backgrounds and identities who experience multiple and intersecting discrimination.

Additional sentence: We suggest adding an introductory sentence to para. 11 to highlight the diversity of women and corresponding diverse forms of discrimination.

“Accordingly, the Committee acknowledges that gender-based violence may affect some women to different degrees, or in different ways, than other women because they experience varying and intersecting forms of discrimination, which frequently have an aggravating negative impact”.
Additional sentence: These multiple and intersecting forms of discrimination can place some groups of women at higher risk of GBV. At the end of para. 11, we suggest this additional sentence to more clearly specify that certain groups of women may be explicitly targeted for violence, so that States are aware of the specific measure that they must take. For example, women with disabilities have been targeted by men with HIV/AIDS who believe that engaging in sexual intercourse with them could cure HIV/AIDS.\(^3\)

General Obligations

13.a.ii. “States parties are responsible for preventing these acts or omissions –including through awareness-raising, training and the adoption, implementation and monitoring of legal provisions (...)”

Additional text: Awareness-raising is an important factor in tackling stigma and negative stereotypes about women with disabilities and women across their lifecourse more generally. Training alone is insufficient to generate changes in culture within State institutions and would be more effective with awareness-raising initiatives and campaigns.\(^4\)

Recommendations

15.b. “Develop and implement effective measures, with the active participation of all relevant stakeholders, such as women’s organisations, organisations of women with disabilities, and other civil society organisations, to address the stereotypes, prejudices, customs and practices that condone or promote such violence and underpin structural inequality of women with men, as described in article 5.”

Additional text: While women’s organisations play an essential role in tackling GBV, organisations from other sectors or with other specialisations are often the leaders in tackling GBV targeted at specific groups, such as organisations of persons with disabilities. IDDC supports the recommendation to include the participation of women’s organisations, but feels that other organisations should be included in this participation, particularly on intersectional aspects of GBV against women.

15.b.i. “The integration of gender equality content into curricula at all levels of education from the early childhood level, as well as in public education programmes targeting stereotyped gender roles and promoting values of respect and equality and non-discrimination, including comprehensive sexuality education for girls and boys, ensuring the inclusion of intersectional dimensions of gender-based violence against women within these programmes;”

Additional text: We recommend specifying that intersectional dimensions are considered within educational programmes for boys and girls.

15.b.ii. “These programmes should include intersectional dimensions of gender-based violence against women and they should target: (a) women and men at all levels of society (...)”

Additional text: As above, it would be beneficial to explicitly mention that programmes should tackle intersecting aspects of GBV.

---

\(^3\) Committee on the Rights of Persons with Disabilities General Comment No. 3 (2016) Article 6: Women and girls with disabilities, CRPD/C/GC/3, para. 17.

\(^4\) See generally, Convention on the Rights of Persons with Disabilities, article 8.
15.c.i. “Promotion of positive portrayals that challenge gender stereotypes relating to the roles of women and men, which reflects the diversity of the population and tackle intersectional dimensions of discrimination”

Additional text: Women with disabilities and women other intersectional dimensions are often stereotyped for the gender in addition to their other status, such as disability status. It is important to ensure firstly that women with disabilities are included in mainstream media aimed at tackling negative stereotypes, but it is equally important to tackle the multiple and intersecting dimensions of these gender stereotypes and to portray positive examples of women with disabilities.

15.j.iii. Provisions that do not respect equal recognition before the law and that restrict or diminish women’s right to legal capacity\(^5\), for example to maintain control over their reproductive health

Additional paragraph: Following paragraph 15.j.ii., we recommend the text above to highlight the connections between legal capacity, dependency and additional risks for violence. Women with disabilities are often subjected to substitute decision-making by family members and carers, which disempowers them and which can put them at increased risk of GBV.

15.m. Adopt and support community-based measures to make public spaces safe and accessible to all women and girls

Additional paragraph: Following paragraph 15.l., we suggest a paragraph to highlight the need for safe and accessible public spaces as a preventative measure. Often, women are expected to not travel at night or through certain areas, and this can be particularly acute for women with disabilities if public spaces are not very accessible. These factors may increase the risk of GBV for all women, especially women with disabilities.

Subtitle on Protection and redress – Protection, response and redress

Additional text: We suggest adding ‘response’ to the subtitle on Protection and redress, to make it clearer to States that they have a responsibility to respond to GBV. We feel that redress and protection do not sufficiently capture the State’s obligation to provide support services, which serve as a critical step for recovery and reintegration into society after experiencing GBV.

Under Protection and redress, para. a.iii. (paragraph # not specified, page 11) – “(...)States should provide 24-hour helplines, and sufficient numbers of safe and adequately equipped and accessible crisis, support and referral centres, and shelters for women and their children (...)(...)in particular to those affected by intersecting and multiple forms of discrimination, and take account of any specific needs of their children. Wherever possible, perpetrators should be removed from the survivors’ environment to prevent unnecessary displacement and burden on survivors, particularly for women and girls who find it difficult to leave the situation.

Additional sentence: We agree that the response by the State should support a range of services, including crisis and support centres and shelters, but stress that the GR should explicitly call for accessible centres and shelters, as many are not adequately accessible and equipped to support women with disabilities or women with children with disabilities\(^6\). In addition to supporting


\(^6\) See generally, CRPD General Comment No. 2 (2014) Article 9: Accessibility, CRPD/C/GC/2, 2 May 2014.
accessible centres and shelters, IDDC has observed that some women with care needs, such as women with disabilities and older women, as well as young girls, may not be able to leave a situation where GBV is prevalent, such as in a care home or if family members serve as the carer, as these women may rely on either the perpetrator(s) or others that are close to the perpetrator(s) for care and support. Placing the responsibility on women in all situations to leave the an abusive environment does not adequately address the issues regarding intersecting and multiple discrimination, and we feel that this needs to be spelled out more clearly to States with clear guidance on removing perpetrators of violence from the victim’s/survivor’s environment.

Under Protection and redress, para. a.iv. (paragraph # not specified, page 11) – “Providing protective and support measures in relation to gender-based violence to women in institutions, including residential care homes, schools, hospitals and all forms of prison”

Additional text: We suggest adding schools to this paragraph because of the overwhelming historical evidence of GBV perpetrated within schools. We also suggest adding hospitals, as women who are seeking treatment may be at additional risk of GBV.

Under Protection and redress, para. b. (paragraph # not specified, page 11) – “Address factors that heighten women’s risk of suffering exposure to gender-based violence (…)”

Replace text: We suggest replacing ‘suffering’ with ‘exposure to’ in order to focus on the risk factors and to maintain the inherent dignity of all women.

Under Protection and redress, para. d. (paragraph # not specified, page 11) – “Disseminate accessible information aimed at women, in particular those affected by intersecting forms of discrimination such as those who live with a disability, are illiterate, or have no or limited knowledge of the official languages of the country, on the legal and social resources available to victims/survivors of gender-based violence through diverse and accessible media or through other methods, such as by disseminating to civil society organisations.”

Additional text: Media outlets, including those that use accessible formats, often do not use methods that are fully accessible to all impairment groups of women with disabilities. We, therefore, suggest that States should also disseminate to civil society organisations, such as disabled people’s organisations (DPOs) and others, who may be better positioned to reach women with disabilities.

Data collection and monitoring

Under Data collection and monitoring, para. b. (paragraph # not specified, page 12) – “Data should also be disaggregated by age and disability and in relation to other intersecting forms of discrimination against women.”

Additional text: Current data on GBV against women does not adequately disaggregate by disability. This has been largely due to the challenges of identifying appropriate and more accurate questions to ascertain disability status. The Washington Group’s short set of questions is now widely recognised as the best solution to this challenge. There are further challenges regarding data collection by age, as the age cap is typically 49 years, which fails to capture data on older women. We recommend explicit reference to universal collection of data by age and disability.