



RI Australia Network

The Gender Trap

Gender, Disability & Domestic Violence

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Women with disabilities experience a higher incidence of domestic and family violence and sexual assault than non-disabled women and of men with disabilities. At the United Nations there is increased recognition of and focus on gender-based violence. Examples of best practice in reducing violence and providing avenues of escape from violence must be fully inclusive of women with disabilities. Some national programs do address inclusion challenges in the development of policies to reduce violence. This presentation will look at mainstreaming and targeted measures which can be used to develop inclusion practice in programs, including a look at the work of the Global Network of Womens Shelters formed in 2009, and of the Australian National Plan to Reduce Violence against Women and their Children.

In 2012, women the world over continue to be a suppressed majority. From the most liberal nations, where women themselves would acknowledge a high degree of equality in participation, to the most oppressive cultures where women remain hidden behind compound walls, the fact of gender difference gives rise to a power imbalance of lesser or greater proportions. This power imbalance creates the social environment in which women, in all ages and stages of life, in all nations, may experience domestic and family violence, sexual assault, harassment and abuse.

Understanding of the social and cultural construction of gender has been evolving over past decades. Arguably this has been occurring in tandem with the evolution of the United Nations. Women at the UN have had an important influence on the drafting of documents and from its earliest days. Whilst I acknowledge that progress is agonizingly slow, I contend that the UN human rights instruments give us the tools to argue and fight for structural changes in the machinery of governments and in societies, to improve the lives of women with disabilities.

At the United Nations Charter conference held in San Francisco in April 1945, there was a small contingent of women who contributed to drafting the document under which the UN came into being on 24 October 1945¹. They were successful in having women recognised in the Preamble to the Charter as having equal rights to men, irrespective of nationhood^{2 3}. Their

¹ October 24 is celebrated annually as United Nations Day

² Evatt, E (2008) *Jessie Street & Human Rights* Evatt Foundation, viewed online, 30 July 2012 at: <http://evatt.org.au/papers/jessie-street-human-rights.html>

³ Charter of the United Nations, Preamble, *We the peoples of the united nations determined:.... to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small,....* viewed online, 30 July 2012 at: <http://www.un.org/en/documents/charter/preamble.shtml>

further work ensured that the UN Charter would commit the organisation to equality of employment for men and women. At the same time, a final goal for the women was the establishment of the Commission on the Status of Women (CSW) as a body which would directly address the human rights of all women. Consequently CSW delegates were present for the Drafting of the Universal Declaration of Human Rights in 1948.

These women recognised that unless women are specifically named in documents, policies and programs, their rights and issues will be neglected and ignored. (Of course, as women with disabilities, this maxim also applies to us, the necessity of having a presence in future discussions.) They argued that it was imperative to have inclusive language in the Declaration. Thanks to them, Article 1 commences with the inclusive phrase: *All human beings* (rather than 'all men') *are born free and equal in dignity and rights*. Small additional gains meant that there is recognition of equal pay, equal rights in marriage and divorce, and social security protection for widows in the Universal Declaration. Elimination of Violence against women was proposed but defeated in 1948, and did not make it into the Declaration. I thank these women for their foresight and the gains they did make in fight for gender equity.

Discrimination against women was undeniable. However, more than 30 years passed until the impetus of the women's liberation movement impacted on the work of CSW and the UN. Eventually the International Convention on the Elimination of (all forms of) Discrimination Against Women (CEDAW) was adopted in 1981. One hundred and eighty-seven (187) nations, from Afghanistan to Zambia have now ratified this Convention⁴ and are bound by it to report to the CEDAW committee on actions taken to eliminate gender discrimination. No matter what we might say about the failure of States Parties to implement the treaty, without it male powers would be further entrenched.

Again, despite efforts from those drafting the text, and recognition that gender-based violence is a major barrier to achieving equality, violence against women was not mentioned in CEDAW. Another 8 years passed until a General Recommendation 12 was adopted in 1989, requiring States Parties to document, address and report on the incidence of violence against women. General Recommendation 19, in 1992, strengthened and expanded requirements. In February 1994, the Declaration on the Elimination of Violence Against Women⁵ was adopted and a UN Special Rapporteur on Violence Against Women appointed.

It is worth quoting from the Declaration on the Elimination of Violence Against Women, the self-evident truths of the cultural constructs which lead to the perpetration of violence against women:

....violence against women is a manifestation of historically unequal power relations between men and women, which have led to domination over and discrimination against women by men and to the prevention of the full advancement of women, and that violence against women is one of the

⁴ UN Treaty Collection, Chapter IV, 8. *Convention on the Elimination of All Forms of Discrimination Against Women*, Status of States parties as of 11 August 2012, viewed online at: http://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-8&chapter=4&lang=en

⁵ UN General Assembly, A/RES/48/104, 23 February 1994, *Declaration on the Elimination of Violence Against Women*, General Assembly resolution 48/104 of 20 December 1993, viewed online, 28 July 2012 at: [http://www.unhcr.ch/huridocda/huridoca.nsf/\(Symbol\)/A.RES.48.104.En](http://www.unhcr.ch/huridocda/huridoca.nsf/(Symbol)/A.RES.48.104.En)

crucial social mechanisms by which women are forced into a subordinate position compared with men,

The prevalence and severity of the violence experienced by women is related to the disparity of that power imbalance. Recognition of the multiple discriminations experienced by some women because of their membership of minority groups, is described in the Declaration and includes (emphasis added):

...indigenous women, refugee women, migrant women, women living in rural or remote communities, destitute women, women in institutions or in detention, female children, women with disabilities, elderly women and women in situations of armed conflict,

Already the particular vulnerability of women with disabilities to all forms of discrimination had been recognised with the adoption of CEDAW General Recommendation 18 in 1991, in which States Parties are required to address and report their situation.

Although the Disability Rights movement was established by the 1970's, little momentum was achieved until the early 1980's. It was a movement dominated by men, and disability advocacy is still largely controlled by men. The intersectionality of gender and disability continues to disadvantage women with disabilities disproportionately compared to men with disabilities and compared to non-disabled women. The constructs of the societies in which we live, irrespective of GDPs, further entrench power away from women with disabilities. In 1993, the UN adopted *Standard Rules on the Equalization of Opportunities for Persons with Disabilities* - the precursor of the eventual disability rights convention.

The Convention on the Rights of Persons with Disabilities (CRPD) does not convey any new rights, but is an implementation blueprint for the realisation of human rights in the context of persons with disabilities. The CRPD states that disability is an evolving concept, and *an interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others*⁶. Power imbalances are also recognised, and the vulnerability of people with disabilities to violence and abuse is addressed in Article 16 (Freedom from Exploitation, Violence and Abuse). This Article includes an obligation to eliminate gender-based violence. In Article 6 (Women with Disabilities), the CRPD also recognises the multiple discriminations experienced by women and girls with disabilities.

Thus there have now been 60 years of deliberations to give us a framework of human rights conventions and declarations. Gender discrimination has been clearly identified since the mid-1940s; gender-based violence since the early-1990s and intersectionality of gender and disability has been consistently in focus since 2006.

It is with some disillusionment that I now look at the legacy of 6 decades of noble talk of Human Rights and promises on the actual lives of women, and women with disabilities.

⁶ UN Convention on the Rights of Persons with Disabilities *Preamble*.

Gender discrimination continues to pervade all societies. Let us look first at the extent of the gender gap. Worldwide, women and girls make up 70% - 75% of the poorest people^{7 8}. However, appraisal of the outcomes of the Beijing Platform for Action (1995) (BPFA) shows that many governments now at least acknowledge the gendered nature of poverty and have instigated mainstream and targeted policies to improve women's financial security⁹. The gender gap in education is decreasing. Certainly markedly more girls are in primary education, and slightly more are in secondary education. The most notable change is at the tertiary level where there has been a reversal of the trend for male dominance. But sheer numbers mask the stereotyping of fields of study with men still dominating areas of higher remuneration such as engineering¹⁰. The gap in non-disabled labour force participation has narrowed slightly over the past two decades but remains considerable. Women are under-represented in jobs with status and power and under-represented in legislature and senior management. Thus these gender differences are all-pervasive and whilst they persist we will find that violence against women remains in epidemic proportions.

Indeed, when we look at the incidence and prevalence of violence against women this is what we find¹¹. Causes of violence can be both biological, but more often circumstantial, based on social (family, community) culture (traditions, taboos, structures) and economics. Cost of violence equates to billions in health care, and billions to economy¹². Globally, up to six out of every ten women experience physical and/or sexual violence in their lifetime. UN studies estimate that at least one out of every three women in the world has been raped, beaten, coerced into sex or otherwise violently abused in her lifetime¹³. Studies also show that, in the majority of cases, the perpetrator of the violence is an intimate partner or someone known to the woman¹⁴. A World Health Organization (WHO) study of 24,000 women in 10 countries found that the prevalence of physical and/or sexual violence by a partner varied from 15% in urban Japan to 71% in rural Ethiopia, with most areas being in the 30–60% range^{15 16}. Twenty-two per cent of women in the United States have experienced Intimate Partner

⁷ UNWomen, *Facts & Figures on Women, Poverty & Economics*, viewed online 26 July 2012 at http://www.unifem.org/gender_issues/women_poverty_economics/facts_figures.php

⁸ UNWomen, *Women, Poverty & Economics*, viewed online 26 July 2012 at http://www.unifem.org/gender_issues/women_poverty_economics/

⁹ UN Department of Economics and Social Affairs (2005), *The World's Women 2005: Progress in Statistics*, ST/ESA/STAT/SER.K/17, viewed online 26 July 2012 at http://unstats.un.org/unsd/demographic/products/indwm/ww2005_pub/English/WW2005_text_complete_BW.pdf

¹⁰ UN Department of Economics and Social Affairs (2010) *Worlds Women 2010: Trends & statistics* ST/ESA/STAT/SER.K/19, viewed online 26 July 2012 at http://unstats.un.org/unsd/demographic/products/Worldswomen/WW_full%20report_color.pdf

¹¹ Krug, E., et al (2002) *World Report on Violence and Health*, chapter 1 Violence – A global Public Health Problem, WHO 2002

¹² Ibid.

¹³ UN Development Fund for Women

¹⁴ UNWomen (2001) *Violence Against Women Prevalence Data: Surveys by country*, compiled by UN Women, viewed online 26 July at http://www.unifem.org/attachments/gender_issues/violence_against_women/vaw-prevalence-matrix-2011.pdf

¹⁵ Garcia-Moreno, c. et al (2005) *WHO Multi-country study on women's health and domestic violence against women: initial results on prevalence, health outcomes and women's responses*, WHO

¹⁶ WHO *Global Burden of Disease Project 2004 Update*

Violence (IPV)¹⁷. In Australia, the *Personal Safety Survey 2005* found that 15% of women had experienced physical or sexual violence from a previous partner since the age of 15, and 2.1% from a current partner¹⁸. When UNWomen was set up in January 2011 (as result of amalgamation of UNIFEM, DAW, INSTRAW, and OSAGI¹⁹) it immediately adopted Violence Against Women as one of its key focus areas. This focus has to become an integral part of activities undertaken in the BPFA and the Millennium Development Goals (MDGs). As yet, there is only marginal attention to the situation of women with disabilities in BPFA or the MDGs.

With a dearth of disaggregated data about women with disabilities, it is necessary to extrapolate these terrible statistics, to look at the circumstances for women and girls with disabilities. Our situation is dire.

In 1991 Resolution 18 was added to CEDAW, recognising women with disabilities as an 'area of concern' and requiring States Parties to report on measures taken to address their situation.

The World Report on Disability²⁰ acknowledges that the measurement of the incidence of disability is a complex task. Measurements of disability differ according to the purpose of the task. Definitions and data collection methods are diverse. International frameworks are important, and we have a basis in the principles set out in the CRPD, accompanied by universal adoption of a standard in the International Classification of Functioning²¹. However, the World Report on Disability estimates that 15% of the world's population (about 1 billion people) are people with disabilities and that 200 million people have considerable challenges in functioning. Not surprisingly, the 2002-2004 World Health Survey²² revealed that the incidence of disability is higher in low income countries than in high income countries and that the prevalence is greater amongst women, low income groups, and older people.

This can be conflated with the high incidence of violence experienced by women, to make an informed estimate that number of women with disabilities, world-wide experiencing violence and abuse would number several hundred million. There is little sex- and disability-disaggregated data on violence which could throw a more accurate picture on the numbers. Suffice to note that it is imperative and urgent that the problem be addressed country by country.

¹⁷ Tjaden, P & Thoennes, N (2000) Research Report, *Full Report of the Prevalence, Incidence and Consequences of Violence Against Women*, Findings from the National Violence Against Women Survey, US Department of Justice NJC 183781, viewed online 26 July 2012 at www.ncjrs.gov/pdffiles1/nij/183781.pdf

¹⁸ Australian Bureau of Statistics (2006) *Personal Safety Survey, Australia, 2005, (reissue)* cat.no. 4906.0, ABS, Canberra

¹⁹ DAW (Division for the Advancement of Women), INSTRAW (International Research & Training Institute for the Advancement of Women), OSAGI (Office of the Special Adviser on Gender Issues and Advancement of Women).

²⁰ WHO, *World Report on Disability 2011*, ISBN 978 92 4 068521 (PDF), WHO and World Bank

²¹ International Classification of Functioning, *Disability and Health (ICF)*, Geneva, World Health Organisation, 2007, viewed online 27 July at www.who.int/classifications/icf/en

²² *World Health Survey*. Geneva, WHO, 2002-2004 (<http://www.who.int/health-info/survey/whsresults/en/> in World Report on Disability

As the evolution of the UN human rights conventions illustrates, violence against women is now recognised as a pervading condition affecting women of all ages across all countries. This realisation has emerged as one of the key actions which nations must address. I would like to use Australia as an illustration of how targeted and mainstream measures must be put in place in order to reduce the levels of violence against women with disabilities.

In May 2008, the Prime Minister of Australia and the Minister for the Status of Women appointed an 11-member National Council to research and consult widely to develop a plan to combat the high national levels of violence against women. Women with disabilities did not have a direct representative on this National Council to Reduce Violence against Women and Their Children. Given the largely unresearched but acknowledged high incidence of violence experienced by women with disabilities, this was a major oversight.

However specific consultations were held with women with disabilities. The findings of the National Council's comprehensive investigation were presented to Government in March 2009 in the form of a report: *Time for Action: the National Council's Plan for Australia to Reduce Violence against Women and Their Children, 2009-2021*²³. This 12-year plan consisted of four three-year cycles of actions – in acknowledgement that a long-term commitment was needed to address an entrenched culture of violence against women in Australian society. The Plan called for a building of a strong evidence base, in which data would be collected in a way which enabled women with disabilities to be counted, and which would be published with information disaggregated so that some account could be taken on the multiple discriminations affecting some sub-groups such as women with disabilities, Indigenous women, women from diverse cultural backgrounds, and with different sexual preferences.

The Plan findings were premised in the assumption that the gendered societal structures need to be addressed in order for the incidence of violence to be reduced. It directed attention at 6 specific outcomes which would make communities safe and free from violence²⁴. Giving individuals support to build respectful relationships would engender an atmosphere which then made communities safer. It specifically identified the shortfall in the number and type of services which support women and children escaping from a current violent situation. It further recognised that legal structures mitigate against women having access to and obtaining justice. Suggestions for programs which would address perpetrator behaviour and reduce recidivism were proposed. The final outcome identified that violence against women presently permeates all facets of community and that any implementation plan must have an overview of all systems working together with the single purpose of reduction of violence against women. Women with disabilities were specifically nominated in all outcome areas, so that all implementation plans should have a disability element to them.

The Plan highlighted that actions implemented to address and reduce the incidence of Intimate Partner Violence needed to explicitly include the needs of adults with disabilities²⁵.

²³ Commonwealth of Australia, 2009, *Time for Action: the National Council's Plan for Australia to Reduce Violence against Women and Their Children, 2009-2021*, FaHCSIA, viewed online 27 July 2012, at http://www.fahcsia.gov.au/sites/default/files/documents/05_2012/the_plan.pdf

²⁴ Outcome 1: *Communities are safe and free from violence*; Outcome 2: *Relationships are Respectful*; Outcome 3: *Services meet the needs of women and their children*; Outcome 4: *Responses are just*; Outcome 5: *Perpetrators stop their violence*; Outcome 6: *Systems work together effectively*.

²⁵ *Ibid.* p.60

However, because large numbers of women with disabilities do not live in conventional family settings, but in institutions, nursing homes, group houses and prisons, Intimate Partners Violence (IPV) does not have relevance. In fact women with disabilities are vulnerable to abuse and violence from support workers and institution staff, as well as family carers and co-habitants. In Australia it has also been necessary to target those who write the domestic and family violence laws²⁶. With varying degrees of success, the definitions of a domestic setting are being expanded to include the range of places where women with disabilities are likely to live. In addition, the definition of a perpetrator in that domestic setting is being expanded to include those people who have regular contact in the daily lives of these women with disabilities. In addition the definition of sexual assault has to be expanded. All these are mainstream actions.

The comprehensive National Violence Plan *Time for Action* was delivered to the Australian Government in March 2009. In April 2009, both the Report and an immediate government response were released to the public²⁷. It was clear that the responses to the Plan would involve all the states and territories²⁸ and many different government departments and funding sources across the country. The Australian Government has taken the lead role. This also meant that responses to domestic violence against women with disabilities would need to be addressed outside the disability sector. This necessitates hitherto unprecedented cooperation with the sector. The final Plan was developed with an advisory group which included a woman expert with the lived experience of disability, and has both mainstream and targeted measures to address the situation for women with disabilities. It is self-evident that women with disabilities are not represented by others. Without a strong voice at the table, issues for marginalised sub-groups, such as women with disabilities, can be too easily overlooked.

The National Plan to Reduce Violence against Women and their Children²⁹ was launched in 2010 as an initiative of the Council of Australian Governments, and is thus a whole of country 12-year commitment.

The first 3-year implementation Plan specifically identifies actions to address violence against women with disabilities, including in primary prevention activities. Importantly National Outcome 4 is to ensure that *Services meet the needs of women and their children experiencing violence*. The development of better service delivery to cater for women with disabilities is urgently needed. A number of targeted projects are now under way, to build the evidence base about disability sensitive women's services, to work with domestic violence crisis services to improve understanding of the needs of women with disabilities, to work with the disability sector to recognise the issue, to put measures in place which will enable emergency support workers services to assist women with high support needs to find refuge from a perpetrator. This momentum needs to grow if significant long-term safety of women with disabilities is to be assured.

²⁶ Australian Law Reform Commission and New South Wales Law Reform Commission, *Family Violence—A National Legal Response*, ALRC Report 114; NSWLRC Report 128 (2010), Recs 5–1, 6–1, 6–4, accessed online 27 July at: http://www.alrc.gov.au/sites/default/files/pdfs/publications/ALRC114_WholeReport.pdf

²⁷ Australian Government (2009) *The National Plan to Reduce Violence Against Women – Immediate Government Actions – April 2009*,

²⁸ Australia has 8 separate jurisdictions in a Federal system

²⁹ Australian Government (2010), *National Plan to Reduce Violence Against Women and their Children*, FaHCSIA 2010

There is also much benefit for organisations of women with disabilities to be involved with mainstream women's and domestic violence NGOs. In 2009 the Global Network of Women's Shelters (GNWS)³⁰ was formed in Ottawa, Canada, and arose as an action out of the 2008 first World Conference of Women Shelters (WCWS)³¹ held in Edmonton, Canada. Unfortunately, at the first and second world conferences there has been only marginal attention given to women with disabilities, with one or two panel presentations and attendance by perhaps 5-10 women with disabilities themselves. This needs to change. Unless women with disabilities are included in the policies and programs of shelters and refuges, women with disabilities will continue to have no avenues of escape from violence. We need these mainstream responses.

An important action undertaken by the GNWS is to conduct an annual snapshot survey of registered shelter organisations. There have been 3 Global Shelter Data Counts conducted from 2009-11. Thus far no questions on disability have been included. This also needs to change. The 2011 Global Shelter Data Count³² represents information provided by 2,636 shelters, and 25 shelter networks from 36 countries. These organisations accounted for 56,308 women and 39,130 children who sought refuge on the census day. Through this data count it will be possible to build international evidence about how shelters are changing their practices to include women with disabilities. I encourage any disabled women's organisations at this conference to register with the Global Network and contribute to its 2012 census. RI Australia is endeavouring to get questions on disability included.

Much of what is currently happening in Australia which I believe will improve the lives of women with disabilities in the long term arises from a coincidence of many factors. At the international level, the human rights conventions, particularly CEDAW and CRPD have been important on specifically identifying women with disabilities. The UN is also increasing international focus on the epidemic of violence against all women. At the national level, a change of government in 2007 meant a renewed commitment to the UN human rights conventions, and with this, renewed commitment to measures which address their content. There is a national focus on gender, a national focus on violence, a national focus on disability and a recognition of the intersectionality gender and disability. At the NGO level, organisations of women with disabilities have used the UN conventions and processes to contribute to national dialogues. With the strong voices of women who have the lived experience of disability contributing individually and collectively, the issues for the women with disabilities are constantly raised nationally.

There is a detectable and gradual change occurring. Women with disabilities are more routinely included in high level formulation of policies and programs. This does not mean that we can be complacent. In all countries, whether with high, middle or low income, the voices of women with disabilities must be raised. Those of us with strong voices must persist to speak up for those who have no voices at all.

³⁰ Global Network of Women's Shelters: www.gnws.org

³¹ World Conference of Women's Shelters: <http://www.worldshelterconference.org/>

³² Global Network of Women's Shelters (2011) *Global Data Count 2011*, accessed online on 30 July at: http://www.gnws.org/docs/GNWS_2011_GlobalDataCount.pdf